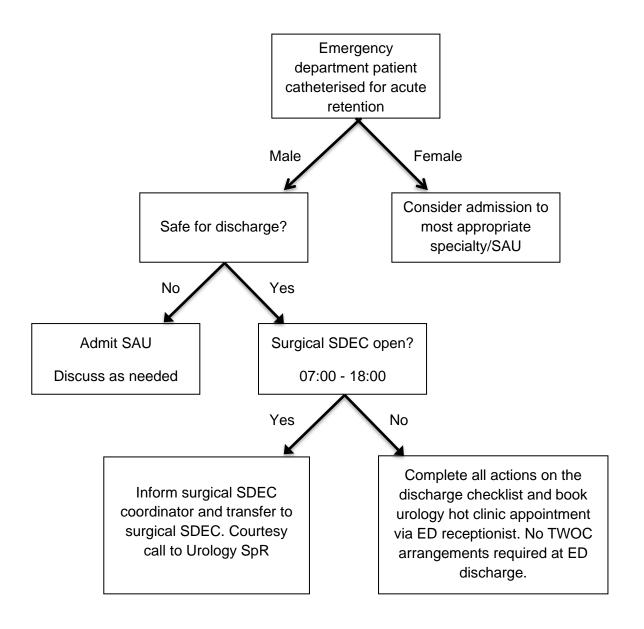
## Acute Urinary Retention in the Emergency Department – Summary Clinical Guideline



Affix	Patient	Sticker	Here
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## Acute Urinary Retention in Males Out-of-hours Ambulatory Follow-up Pathway

If Surgical SDEC (SSDEC) is open (07:00 – 18:00) then discontinue this pathway and send the patient there (inform SSDEC coordinator and Urology SpR). If SSDEC is closed and following full assessment it is felt that the patient may be suitable for outpatient follow-up then complete the following checklist.

## **Assessment**

Inclusion Criteria for ambulatory follow-up on UAU	Yes
Male with newly diagnosed acute urinary retention	
No acutely deranged physiological observations	
No evidence of another condition causing urinary retention that requires inpatient treatment (e.g. sepsis, cauda equina syndrome, urinary tract infection)	
Normal renal function (or unchanged from baseline)	
Not faecally impacted/constipation managed appropriately (consider DRE)	
Patient able to manage safely at home and access help as needed, and not needing a chair or bed on returning to hospital (consider frailty, telephone, mobility, support at home, ability to manage catheter).	

## **Actions**

Actions required prior to emergency department discharge	Completed
Urinary catheter inserted and draining freely	
Prostate-specific antigen (PSA) blood test sent (before or after catheter)	
Leg bag in place and night bag provided for patient to take home, the use of which has been explained and demonstrated	
Catheter passport provided – sticker on page 3, page 4 completed	

Urinalysis .....

Residual volume .....ml

If ALL Criteria met and actions completed:

- Discharge the patient from the emergency department with the date and time of the next available urology hot clinic (to be booked by the ED reception staff). There is NO NEED to discuss with the Urology SpR. Ensure patient knows that their catheter will NOT be removed at this appointment.
- Ensure this checklist is placed with the patient notes.
- There is no need to review the PSA result; this will be followed up and acted upon by Urology.

If criteria not met then admit to the Surgical Assessment Unit (SAU) unless concurrent illness requires admission elsewhere.

Clinician	Sign	Date	Time	