

Dear Urology Team,

Please arrange a trial of voiding for

Name	Contact no
Address	
	MRN
Suitable for : TOV in OPD or will require day bed	

Patient attended E.D. with A.U.R. on
Urologist Consultant on call
Previously seen by Mr Kiely Mr P Sweeney Other
Reviewed by urology team YES/ NO

ASSESSMENT

<u>Indications for Catheterisations</u> AUR, Retention with urinary sepsis, chronic retention with renal dysfunction creatinine >200mmol/l , overflow incontinence others
Medical , Surgical & Urological History
Recent drugs history that may cause retention
Alcohol consumption at time of retention YES/NO
Constipation YES/NO. Initiate oral therapy YES /NO
Digital Rectal Examination (DRE). YES/NO Findings

Catheterisation

Urethral / suprapubic . Catheter size	Ch .	Any problems negotiated?
Check that foreskin is not left retracted		
Document retention of urine volume at 15 min. post catheterisation		mls
Check Urea	Creatinine.	Do not do a PSA (AUR increases PSA)
Check Urinalysis dipstick (if positive for leucocytes or nitrates send CSU)		
CSU sent	YES/NO	Result
Antibiotic prescribed YES/NO .		
Commenced on Alpha 1 blockers		YES /NO
Referral Signed by Dr		
Bleep		ED