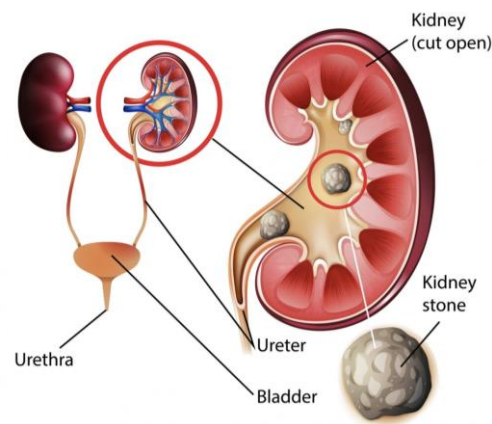


Kidney Stone (Renal Colic)

Kidney or urinary stones are made of minerals and salts that stick together to form crystals (stones) in your urine. The pain, medically called renal colic, occurs when a stone blocks your urinary tract. The stone can be small as a grain of salt or as large as a marble.

The stones generally stay in your kidney but sometimes move out of your body from your kidney to your bladder. This can cause severe abdominal and back pain that sometimes spreads to your groin. It can also lead to nausea, vomiting, difficulty to urinate (pee) or pain with urinating (peeing), and/or blood in your urine. However, they usually do not cause damage.



What to Expect

Most stones pass out of the body without any assistance. This can take several days to several weeks. You will likely be prescribed pain medications, and sometimes medications to help the stones pass.

If you have a small urinary stone, you may be able to pass it when you pee. If the stone is too big to move out on its own, or if it gets stuck on the way out, or if it causes an infection or kidney damage, you might need to see a specialist (urologist). Your doctor will discuss recommended treatment options for you such as:

Shock wave lithotripsy

- Shock waves break the stone up into smaller pieces which you can urinate (pee) out.

Ureteroscopy

- A thin tube with a tiny camera is placed into your urethra to find and remove the stone or break it up into smaller pieces.

Percutaneous nephrolithotomy

- For larger kidney stones, the urologist may recommend making a small surgical cut in your back to remove the stone.

Ureteral stent

- Place a stent in your ureter to help the stones pass.

Recommended Follow-Up

- Follow up in __ days.

Name of Provider

Reason

Date/Time

Location

Contact Info

- _____
- _____



When to Get Help

Go to the nearest Emergency Department or Urgent Care if:

- You have severe pain that does not improve with pain medication.
- You have severe nausea or vomiting – dehydration/can't take pills.
- You have a possible infection: fever over 38°C (100.4 °F), chills, body aches.
- You develop pain all over your abdomen (belly).

Go to a walk-in clinic, your health care provider, or call 811 (711) if:

- You have pain that is only partially controlled with pain medication.
- You run out of pain medications.
- You have recurrent pain or blood in your urine (hematuria) after this kidney stone episode.

To Learn More:

- Ask your health care provider.
- HealthLinkBC - call 8-1-1 (7-1-1 for deaf or hard of hearing) or go online to www.HealthLinkBC.ca.



How to Care for Yourself at Home

- If asked to strain your urine (pee), keep the stone or stones that pass and bring to your primary care doctor or urologist for analysis.
- Drink plenty of water and fluids to help the stone(s) pass.

Pain control:

- Try placing a heating pad, hot water bottle on your back and abdomen, or take hot bath or showers to help with the pain.
- You may be given a medication to help the stone pass as well as a narcotic medication. Only use these medications as prescribed by your health care provider.
- If you are not allergic, we recommend trying the medications listed below, as they can help manage kidney stone pain.

Kidney Stones/Renal Colic Discharge Instructions - continued

Medication:



IBUPROFEN (ADVIL®, MOTRIN®)

- 200-400 mg every 4–6 hours as needed while awake, taken with small snack (max. 1200mg/day).
- Avoid taking this medication for longer than 5-7 days. See your primary care provider if you need to use this for longer.
- Avoid this medication if you are >65 years old, pregnant or have the following conditions: severe liver or kidney disease, peptic ulcer disease, or heart failure.
- Speak to your primary care provider before taking this if you have a history of stroke, GERD, inflammatory bowel disease, liver cirrhosis or ischemic vascular disease.
- Don't take this with other NSAID medications like naproxen (e.g., Aleve®) or celecoxib (e.g., Celebrex®).

ACETAMINOPHEN (E.G. TYLENOL®)

- 500-1000 mg every 6 hours as needed while awake, with water (max. 4000mg/day).

If you have liver disease or drink >3 alcoholic beverages per day:

- Maximum dose: 3000mg per day.
- Do not use this medicine for longer than 5-7 days. Speak to your primary care provider if you need to use this for longer.

Be careful not to exceed the maximum dose when taking this medication with other medication that contain acetaminophen (e.g., Dayquil/Nyquil®).

Reproduced with permission from Vancouver Coastal Health and Providence Health Care. Find this information sheet on the ECBC website:

https://emergencycarebc.ca/clinical_resource/patient-information-sheet/kidney-stones/

Notes:

Additional Information

- Kidney Stones article (HealthLink BC): [https://www.healthlinkbc.ca/illnesses-conditions/kidneys/kidney-stones#:~:text=Kidney%20stones%20are%20made%20of,\(ureters\)%20to%20the%20bladder.](https://www.healthlinkbc.ca/illnesses-conditions/kidneys/kidney-stones#:~:text=Kidney%20stones%20are%20made%20of,(ureters)%20to%20the%20bladder.)
- Vancouver General Hospital Stone Centre Frequently Asked Questions <https://stonecentrevgh.ca/patient-information/frequently-asked-questions-faq/>
- Instructions for care at home (Video): <https://www.youtube.com/watch?v=7EXqlq6r5XE>

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