

AB047. SOH22ABS079. Low-dose non-contrast computed tomography scan in suspected renal colic in adult: are we complying with guidelines?

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Background: Adults with suspected renal colic should have low-dose non-contrast computed tomography (LDNCCT) kidney-ureter-bladder (KUB) within 24 hours of presentation as per the National Institute for Health and Care Excellence (NICE) guideline 29th July 2020. LDNCCT should be performed within 24 hours of presentation, unless it is contraindicated, to prevent delays to diagnosis and treatment. Delay in treatment of obstructed kidney can result in permanent damage to kidney function. Aim of this study was to assess the compliance to the existing NICE guidelines on getting LDNCCT for patients with suspected renal colic in our tertiary care university teaching hospital.

Methods: This retrospective study included adult patients presented with suspected renal colic in the month of September 2021. Data were collected from National Integrated Medical Imaging System (NIMIS) by checking the scan entry time and the time scans were filmed at, also the admission date from our urology handover sheets.

Results: Nineteen patients satisfied our inclusion criteria during the month of September 2021. Eighty-four percent patients (n=16) had their LDNCCT scan within 24 hours of their presentation, only 3 patients had their scan in interval more than 24 hours of the presentation.

Conclusions: Early investigation with LDNCCT KUB is essential in suspected renal colic to preserve renal function for patients with suspected renal colic. Our study showed good compliance with the guidelines. We are now looking into the timing of surgical intervention in patients with renal colic as a continuation of this study and any impact on renal function.

Keywords: Low dose; non-contrast CT scan; National Institute for Health and Care Excellence guidelines (NICE guidelines); renal colic; surgical intervention

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Footnote

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Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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