

CALGARY ZONE Urology REFERRAL QUICK REFERENCE

Alberta Health Services (AHS) and the Southern Alberta Institute of Urology (SAIU) have partnered to develop these Quick Reference guidelines for ADULT UROLOGY issues being referred to SAIU physicians.

NON-URGENT ADVICE

Call Specialist LINK and get a call back within one hour.

Local: 403-910-2551
Toll free: 1-844-962-5456 (LINK)
Website: www.specialistlink.ca

OUTPATIENT CONSULTS

(Patient does not need to be seen within one week)

UROLOGY CENTRAL INTAKE
Fax: 403-592-4250 | Phone: 403-943-8770

Urology Central Intake accepts referrals on behalf of AHS and SAIU. Please access the [Urology Central Intake Referral form](https://www.ahs.ca/frm-21349.pdf) (<https://www.ahs.ca/frm-21349.pdf>) to begin the referral process. Indicate reason for referral and any confirmed diagnosis to assist in directing your referral.

Referrals will be forwarded to appropriate provider assigned by intake protocol. Triage to follow within one to two weeks.

URGENT UROLOGY CHOICES

(Patient may need to be seen within one week)

Urgent phone advice or referral: Call RAAPID at 403-944-4486 or 1-800-661-1700.

EMERGENCY UROLOGY CHOICES

(Patient needs to be seen immediately)

Call RAAPID at 403-944-4486 or 1-800-661-1700 or call RGH Switchboard at 403-943-3000 to page the Urologist on call.

Send patient to Emergency as required.
If possible, please send patient to Rockyview General Hospital (RGH) (7007 14 Street SW, Calgary).

Reason for Referral	Access Target	Process/Instructions	Recommended Labs	Recommended Imaging	Timing for Recommended Info
Abnormal DRE	< 3 months	Refer to SAIU using Urology Central Intake Form	U/A, urine culture, PSA x 2 (at least four weeks apart)		< 3 months
Abnormal Semen Analysis	< 6 months	Refer to SAIU using Urology Central Intake Form	Semen analysis		< 3 months
Adrenal Mass	< 3 months (Urgent case < 2 weeks)	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	CBC, Ca, lytes, creatinine, BUN, LFTs, INR, random glucose, cortisol, 24-hour urine metanephrines	CT or MRI (abdomen), adrenal protocol showing mass	< 3 months
Bladder Mass	< 30 days	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	CBC, INR, lytes, creatinine, U/A	KUB US	< 30 days
Elevated PSA (no previous cancer)	< 3 months	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	U/A, urine culture, PSA x 2 (at least four weeks apart)		< 3 months

Reason for Referral	Access Target	Process/Instructions	Recommended Labs	Recommended Imaging	Timing for Recommended Info
Elevated PSA (previous cancer)	< 3 months	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	U/A, urine culture, PSA x 2 (at least four weeks apart)		< 3 months
Erectile Dysfunction	< 6 months	Refer to SAIU using Urology Central Intake Form			
Female Voiding Dysfunction	Urgent to < 3 months	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	Creatinine, U/A, urine culture	KUB US (NB: PVR > 200 ml)	< 3 months
Family Planning (Vasectomy Request)	< 6 months	Refer to SAIU using Urology Central Intake Form			
Fistula (bladder)	< 1 month	Refer to SAIU using Urology Central Intake Form		CT Cystogram	< 3 months
Fistula (Vesico-vaginal)	< 3 months	Refer to SAIU using Urology Central Intake Form		CT Cystogram	< 3 month
Foreskin Problems	< 6 months	Refer to SAIU using Urology Central Intake Form			
Hemospermia	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form	U/A, urine culture, PSA if 50-70 with 10 year life expectancy		< 3 months
Hematuria Gross	<1 month	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	CBC, lytes, creatinine, PT INR, PTT, urine culture	Renal US or CT urogram (hematuria protocol)	< 3 months
Hematuria Microscopic (greater than 3 rbc / hpf x 2 tests)	< 3 months	Refer to SAIU using Urology Central Intake Form	Creatinine, U/A, urine culture	Renal US or CT scan	< 3 months
Hydrocele	< 6 months	Refer to SAIU using Urology Central Intake Form		Scrotal US	< 3 months
Hydronephrosis	< 3 months (Urgent case < 2 weeks)	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	Lytes, creatinine, U/A, urine culture	KUB US	< 3 months
Incontinence	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form	U/A	KUB US	< 3 months

Reason for Referral	Access Target	Process/Instructions	Recommended Labs	Recommended Imaging	Timing for Recommended Info
Kidney Stone (acute/ureteric)	< 2 weeks	<ul style="list-style-type: none"> Refer to SAIU using Urology Central Intake Form Urgent advice or referral: Call RAAPID 	Lytes, creatinine, U/A	KUB X-ray and KUB US, or KUB X-ray and CT KUB	< 3 months
Kidney Stone Chronic (non-obstructing)	< 6 months	Refer to SAIU using Urology Central Intake Form	Lytes, creatinine, U/A	KUB X-ray and KUB US, or KUB X-ray and CT KUB	< 3 months
Male Lower Urinary Tract Symptoms (LUTS)	< 6 months (Urgent case < 2 weeks)	Refer to SAIU using Urology Central Intake Form	U/A	KUB US	< 3 months
Male Sexual Dysfunction	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form	CBC, lytes, creatinine, TSH, testosterone, fasting glucose, lipids, cholesterol, triglycerides		< 3 months
Neurogenic Bladder	< 6 months	Refer to SAIU using Urology Central Intake Form	Creatinine, U/A, urine culture	KUB US	< 3 months
Overactive Bladder (OAB)	< 6 months	Refer to SAIU using Urology Central Intake Form	Lytes, creatinine, U/A, urine culture	KUB US	< 3 months
Pelvic Organ Prolapse (Vaginal Prolapse)	< 6 months	Refer to SAIU using Urology Central Intake Form	Lytes, creatinine, U/A, urine culture	Pelvic US	< 3 months
Penile Mass (Cancer Concern)	< 2 weeks	Urgent referral to Urology: Call RAAPID	CBC, INR	CT abdomen/pelvis with contrast	< 3 months
Peyronies Disease	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form			
Prostatitis	< 6 months	Refer to SAIU using Urology Central Intake Form	U/A, urine culture	KUB US	< 3 months
Renal Cyst	< 3 months (Urgent case < 2 weeks)	Refer to SAIU using Urology Central Intake Form		KUB US	< 3 months
Renal Mass	< 1 month	Refer to SAIU using Urology Central Intake Form	Lytes, creatinine, CBC, alk phosphate, ALT, total bilirubin, Ca, PO4, LDH, PT INR, U/A	CXR and CT renal mass protocol	< 3 months
Spermatocele	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form		Scrotal US	< 6 months

Reason for Referral	Access Target	Process/Instructions	Recommended Labs	Recommended Imaging	Timing for Recommended Info
Testicular Mass	< 1 week	Urgent referral to Urology: Call RAAPID	CBC, lytes, creatinine, LFTs, Ca, INR, B-HCG, LDH, AFP	Scrotal US, CXR	< 3 months
Testicular Microlithiasis	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form		Scrotal US	< 6 months
Testicular Pain, (orchalgia)	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form	U/A, urine culture	Scrotal US	< 3 months
Urethral Disorder (Female)	< 6 months	Refer to SAIU using Urology Central Intake Form	U/A, urine culture		< 3 months
Urethral Disorder (Male)	< 6 months	Refer to SAIU using Urology Central Intake Form	U/A, urine culture	KUB US	< 3 months
Recurrent Urinary Tract Infections (UTIs)	< 6 months	Refer to SAIU using Urology Central Intake Form	Creatinine, U/A, urine culture	KUB US	< 3 months
Varicocele	< 6 months	Call Specialist LINK for non-urgent advice or refer to SAIU using Urology Central Intake Form		Scrotal US	< 6 months
Vasectomy Reversal	< 6 months	Refer to SAIU using Urology Central Intake Form			

Additional reference

Patient Information Brochures from the Canadian Urology Association: <https://www.cua.org/en/patient>

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