January 5, 2021 Objectives

Hematuria/stones, Dr. Dahl

1. Define asymptomatic microscopic hematuria and give a differential diagnosis.
2. Know the percentage of patients with microscopic hematuria and gross hematuria that have urinary tract malignancy.
3. Explain why a urine dipstick positive for blood is inadequate to diagnose hematuria. What things other than hematuria can a urine dipstick positive for blood mean? Describe reasons for a false negative dipstick test and a false positive dipstick test.
4. Describe the five categories of kidney stones and their prevalence.
5. Know the clinical presentation and evaluation of the patient with suspected kidney stone, and its medical management and role of the urology consultant in the management of kidney stones.

Urinalysis cases, Dr. Dahl

1. Describe the appropriate urine specimen collection and storage in ambulatory patients and hospitalized patients with Foley catheters in order to accurately interpret the urinalysis.
2. List the possible causes of urine that is cloudy, orange, brown, or red.
3. Complete the urinalysis table:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Normal value | High(causes) | Low value (causes) |
| Specific gravity | 1.003-1.030 | DehydrationGlycosuriaSIADH | Well hydratedDiuretic useDiabetes insipidus |
| pH | 5.5-6.5 |  |  |
| RBC/hematuria | 0-2/HPF |  |  |
| Proteinuria | <150 mg/24 hours |  |  |
| Albuminuria | <30 mg/24 hours |  |  |
| Glucosuria | None |  |  |
| Ketonuria | None |  |  |
| Nitrites | None |  |  |
| Leukocyte esterase | None |  |  |

1. Describe the conditions associated with the following urine casts: Hyaline, Erythrocyte, Leukocyte, Epithelial, Granular, Fatty.

Hypertension, Dr. Dahl

1. Define normal blood pressure, pre-hypertension, stage 1 and stage 2 hypertension. Describe the end-organ injuries that occur due to long-standing hypertension.
2. Describe the patient(s) who should be evaluated for secondary causes of hypertension and the preferred diagnostic strategy for each identifiable cause.
3. Identify the medications which are first-line anti-hypertensives for non-black patients and black patients *without* DM and CKD and *with* DM and CKD.
4. Identify the BP targets for patients aged ≥ 60 years old, < 60 years old, patients with chronic kidney disease and patients with diabetes.
5. Define hypertensive urgency and emergency and the indications for admission to the hospital and ICU treatments.