

NAME OF THE HOSPITAL: _____

PATIENT NAME: _____

19). PCNL: Renal Stone removal more than 2 cm (S9H4.2)-A

1. Name of the Procedure: PCNL
2. Select the Indication from the drop down of various indications provided under this head:

Renal Stone removal approximately 2cm or more than 2 cm
Stone removal in special condition like Calyceal diverticulum, Horse shoe kidney, Pelvic kidney (laproscopic assisted), Morbidly obese patient

3. Does the patient have history of Pain/fever/hematuria: Yes/No
4. If the answer to question 3 is Yes then is there evidence of
 - a. Stone demonstrated on IVP provided Sr. Creatinine is normal: Yes/No (Upload IVP film)
 - OR
 - b. Stone demonstrated on CT Scan Abdomen & Pelvis pre/post contrast provided Sr.Creatinine is normal: Yes/No (Upload CT-Scan film)

If serum creatinine is raised USG KUB AND/OR Plain CT to find out status of opposite kidney and put DJ Stent/PCN on both sides, see if serum creatinine comes down, if serum creatinine does not decrease, evaluate for CKD and get informed consent and proceed for surgery.

5. If the answer to questions 4a OR 4b is Yes is there evidence of
 - a. Simultaneous PUJ obstruction which needs to be addressed: Yes/No
 - b. Infundibular stenosis with calyceal calculi which can be addressed simultaneously by open surgery for stone removal: Yes/No
 - c. Small stones amenable for ESWL (relative contraindication): Yes/No

For eligibility for PCNL, the answer to all questions 5a, 5b & 5c must be No.

I hereby declare that the above furnished information is true to the best of my knowledge.

Treating Doctor Signature with Stamp

NAME OF THE HOSPITAL: _____

PATIENT NAME: _____

20). PCNL: Stone removal in special condition like Calyceal diverticulum, Horse shoe kidney, Pelvic kidney (laproscopic assisted), morbidly obese patient (S9H4.2)-B

1. Name of the Procedure: PCNL

2. Select the Indication from the drop down of various indications provided under this head:

Renal Stone removal approximately 2cm or more than 2 cm
Stone removal in special condition like Calyceal diverticulum, Horse shoe kidney, Pelvic kidney (laproscopic assisted), Morbidly obese patient

3. Does the patient have history of Pain/ fever/ hematuria: Yes/No

4. If the answer to question 3 is Yes then is there evidence of

a. Stone demonstrated on IVP provided Sr. Creatinine is normal: Yes/No (Upload IVP film)

OR

b. Stone demonstrated on CT Scan Abdomen & Pelvis pre/post contrast provided Sr.Creatinine is normal: Yes/No (Upload CT-Scan film)

If serum creatinine is raised USG KUB AND/OR Plain CT to find out status of opposite kidney and put DJ Stent/PCN on both sides, see if serum creat comes down, if serum creat does not decrease, evaluate for CKD and get informed consent and proceed for surgery.

5. If the answer to questions 4a OR 4b is Yes is there evidence of

a. Simultaneous PUJ obstruction which needs to be addressed: Yes/No

b. Infundibular stenosis with calyceal calculi which can be addressed simultaneously by open surgery for stone removal: Yes/No

c. Small stones amenable for ESWL (relative contraindication): Yes/No

For eligibility for PCNL, the answer to all questions 5a, 5b & 5c must be No.

I hereby declare that the above furnished information is true to the best of my knowledge.

Treating Doctor Signature with Stamp
