

## MINNESOTA UROLITH CENTER QUANTITATIVE UROLITH ANALYSIS FORM

LAB USE ONLY
Date Rec'd\_\_\_\_\_\_\_
# Submitted\_\_\_\_\_\_

PLEASE SUBMIT STONES **DRY** IN **UNBREAKABLE** CONTAINER (FOR PLUGS SEE BELOW)

\*\*Please copy this form\*\*

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Date submitted	If yes, date of detection:	
DOCTOR NAME:	Mineral composition?	
CLINIC NAME:	Was the urine cultured before/during stone retrieval?	
ADDRESS:	Yes	No
	Bacterial growth? Yes	No
	Isolates:	
PHONE NUMBER:	Were antibiotics given prior to stone retrieval?	
FAX NUMBER:	Yes	No
Owner's Name	Type/dosage:	
Patient's Name/ID#	Wana ania a a di Gana an alladini ana	-i
Species	Were urine acidifiers or alkalinizers retrieval?	
Breed		Yes No
Birth Date	Type/dosage:	
Gender: (circle one) M MC F FS Unk	Was allopurinol given prior to stone	retrieval?
Source: (check all areas samples obtained from)	Yes	No
<u>Upper Urinary Tract</u> <u>Lower Urinary Tract</u>	Dosage and duration:	
() Kidneys () Bladder	Previous illness or injury:	
() Ureters () Urethra () Voided	Dx:	
Other	Dx:	; Date
Other	FOR FELINE URETHRA	J PLUGS ONLY
Date retrieved or voided What brand of diet was fed prior to urolith retrieval/diagnosis?	Preferred method for plug submission	
what brand of diet was fed prior to drondi fed leval/diagnosis?	1/2 dry, 1/2 in formalin	
How long was this diet fed?	How was the plug preserved? (checonomic 1. No preservative	;k) ( )
Was a prescription diet fed? Yes No	2. 10% buffered formalin	
If yes, which one? (check one)	3. Other If sample is very small, please subm	it dry.
c/d(s) dry () canned ()	MAIL TO:	
c/d <sup>oxl</sup> dry () canned () k/d dry () canned ()	MINNESOTA UROLITH CENTER	
1/d dry () canned ()	Dr. Carl Osborne	
s/d dry () canned () u/d dry () canned ()	Dept. of Small Animal Clinical Sciences College of Veterinary Medicine	
u/d dry () canned () w/d dry () canned ()	Univ. of Minnesota, 1352 Boyd Avenue	
z/d dry () canned ()	St. Paul, MN 55108	
Other	612/625-4221 FAX 612/624	-0751
How long was this diet fed?		
Previous Uroliths? Yes No Unk		

## MINNESOTA UROLITH CENTER

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## WHAT PREVENTATIVE MEASURES SHOULD I TAKE UNTIL I RECEIVE QUANTITATIVE MINERAL ANALYSIS RESULTS?

Urolith formation is a process that typically takes several weeks (eg. infection induced struvite), to months (eg. calcium oxalate) rather than days. The most common "cause" of rapid recurrence of uroliths is incomplete removal at the time of surgery.

Until quantitative mineral analysis on the urolith is completed, we recommend the following steps.

- -Perform post-operative radiographs of patients with multiple urocystoliths. Double contrast cystography may be necessary if the urocystoliths were not easily observed on preoperative survey films.
- -If small stones are detected on post-operative films, they may be able to be removed non-surgically either by catheter retrieval<sup>1</sup>, or voiding urohydropropulsion<sup>2</sup> after healing takes place.
- -Feed a diet unlikely to enhance urolith formation. We typically feed a diet that avoids mineral excess, and promotes a neutral urine pH. We often feed a diet designed for mild to moderate renal insufficiency. If possible, feed a canned diet to promote dilute urine. Once urolith results are received, refer to accompanying recommendation sheets.
- -Obtain cystocentesis urine samples to monitor for, and prevent secondary urinary tract infections.

<sup>&</sup>lt;sup>1</sup>Osborne CA, Lulich JP, Unger LK: Nonsurgical retrieval of uroliths for mineral analysis. In Current Veterinary Therapy XI. pp 886-889, 1992.

<sup>&</sup>lt;sup>2</sup>Lulich JP, Osborne CA, Unger LK, et al: Nonsurgical removal of urocystoliths by voiding urohydropropulsion. In Journal of the American Veterinary Medical Association. Vol 203, pp. 660-663, 1993.

Osborne CA, et al.: Canine and Feline Urolithiases: Relationship of Etiopathogenesis to Treatment and Prevention. In Canine and Feline Nephrology and Urology, Osborne and Finco 1995, pp 798-888