

THE UROLOGY GROUP

www.urologygroupvirginia.com

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BLOOD IN THE URINE IN CHILDREN (PEDIATRIC HEMATURIA)

NAME: _____ **DOB:** _____

Welcome to The Urology Group. Please answer the questions below as completely as possible in order to learn more about your child's blood in the urine (hematuria).

How old is your child? _____ When did the blood in the urine start? _____

How many days did the blood in the urine last? _____

Was the urine (circle) pink red tan brown Were there clots? _____ How big? _____

Is the blood associated with anything? (e.g., activity, antibiotics, anti-inflammatories)? _____

Any urinary symptoms? (circle) frequent urination bladder pain back pain

Any prior illnesses/infections? (circle) respiratory throat skin

Any respiratory symptoms? (circle) cough coughing up blood

Any trauma to the kidneys, bladder or genitals? _____

Any history of kidney stones in the patient or in the family? _____ Who in the family? _____

Any hearing problems in the child? _____ In the family? _____ Who? _____

Any family syndromes? (e.g., Benign familial hematuria, Alport syndrome, polycystic kidney disease, sickle cell disease) _____