Urinalysis

Subject

Instructions for evaluating and reporting urine results in the context of the Canadian immigration medical examination (IME).

Goal/Objective

These instructions are provided to ensure that panel physicians (PPs) follow a consistent and appropriate process for the following:

- reporting of the urinalysis and
- completion and grading of an IME for a client with abnormal urinalysis findings.

Instructions

Although a urinalysis has always been included in the IME, with the implementation of eMedical, the IME form (IMM5419 Laboratory Requisition and Report) has led to some changes in the way the urinalysis is conducted and reported.

A urinalysis is mandatory for all clients above the age of 5 years. For children under the age of 5, a urinalysis is required if they present with history of diabetes, hypertension, kidney disease or symptoms of urinary tract infection. The urinalysis can be performed either by dipstick or microscopy.

Additional Investigation

<u>Dipstick:</u> If any of the fields (blood, protein or glucose) = +2 or +3 then a

mandatory repeat microscopy urinalysis (where available) is required. If microscopy is not available, a repeat dipstick will be accepted.

<u>Microscopy:</u> If any of the fields (blood, protein or glucose) are abnormal then a repeat microscopy is required. Microscopy should be reported as abnormal in the following cases:

- protein is greater than 0.30 mg/L
- RBC above 10 RBC/HPF
- glucose is present

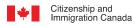
If repeat urinalysis (dipstick or microscopy) is abnormal, then serum creatinine is mandatory.

Reporting

- Abnormal results of initial testing must be attached to the IME.
- All reports of repeat testing (including serum creatinine if available) must







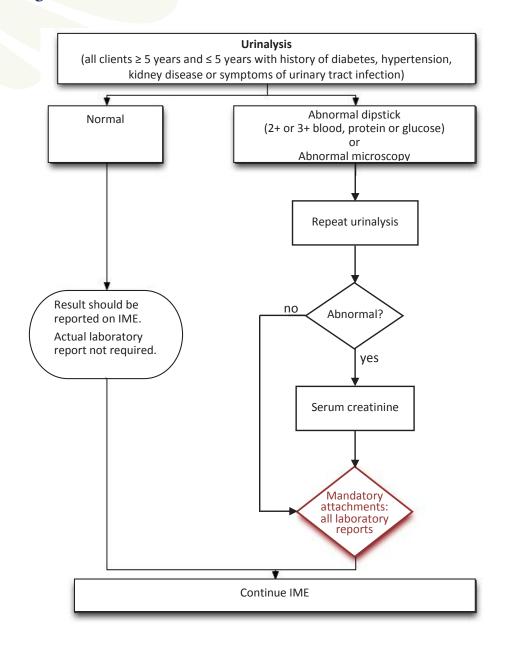
Urinalysis

be attached to the IME.

Grading

All IMEs must be B graded if the repeat urinalysis results are abnormal.

Algorithm





References

http://www.lifelabs.com/lifelabs_bc/patients/medicalconditions/urinalysis.asp

HB Approval and Authority

Director General, NHQ, Health Branch, CIC

Implementation Date

2012/11/01

Revision Date(s)

2013/11/01