

## Emergencies

**Septic ureteral obstruction :** *drainage and antibiotherapy*

**Ureteral obstruction on solitary kidney:**  
*drainage +/- ureteroscopy*

**Simultaneous bilateral ureteral obstruction :**  
*drainage +/- ureteroscopy*

**Ureteral obstruction (Pregnancy, transplanted kidney, impaired kidney function):**  
*drainage +/- ureteroscopy*

**Hyperalgesic renal colic that does not respond to medical treatment :**  
*drainage +/- ureteroscopy*

**COVID + suspect patient with hyperalgesic renal colic, or related to a stone with low chance for rapid spontaneous elimination (>5mm and not localized in the distal part of the pelvic ureter) :**  
*drainage*

## To be scheduled

**Symptomatic ureteral obstruction**

**Ureteral stone >10 mm**

**Urteral stone <10mm without complication except pelvic or ureteral dilation and without spontaneous passage after 4 weeks of survey**

**Kidney obstruction by a complex or staghorn stone**

**Infected renal stone**

**Double J stent not tolerated or incrustated:**  
*changing +/- ureteroscopy*

Within 2 weeks

## Postponed and survey

**Not infected non obstructing renal stones :**  
*evaluation at 3 months*

**Non symptomatic ureteral stone <10mm :**  
*evaluation at 4 weeks*

**Renal colic without complication that responds to the medical treatment or related to a stone with high chance for rapid spontaneous elimination (<5mm or localized in the distal part of the pelvic ureter) :**  
*evaluation at 4 weeks*

**COVID + patient (except emergencies)**

