

Evidence Discussion – Annual Surveillance (AB-4.4)

Plain x-ray is cost-effective and readily available for surveillance of radiopaque stones. Ultrasound is preferred for most patients with radiolucent stones. One year imaging interval is recommended for stable patients, but this may be tailored on stone activity or clinical signs.

References

1. Fulgham PF, Assimos DG, Pearle MS, et al. Clinical Effectiveness Protocols for Imaging in the Management of Ureteral Calculous Disease: AUA Technology Assessment. *The Journal of Urology*. 2013;189(4):1203-1213
2. Assimos D, Krambeck A, Miller NL, et al. Surgical Management of Stones: American Urological Association/Endourological Society Guideline, PART I. *Journal of Urology*. 2016;196(4):1153-1160. doi:10.1016/j.juro.2016.05.090.
3. Pearle MS, Godfarb DS, Assimos DG. Medical management of kidney stones: AUA guideline. American Urological Association (AUA). 2019.