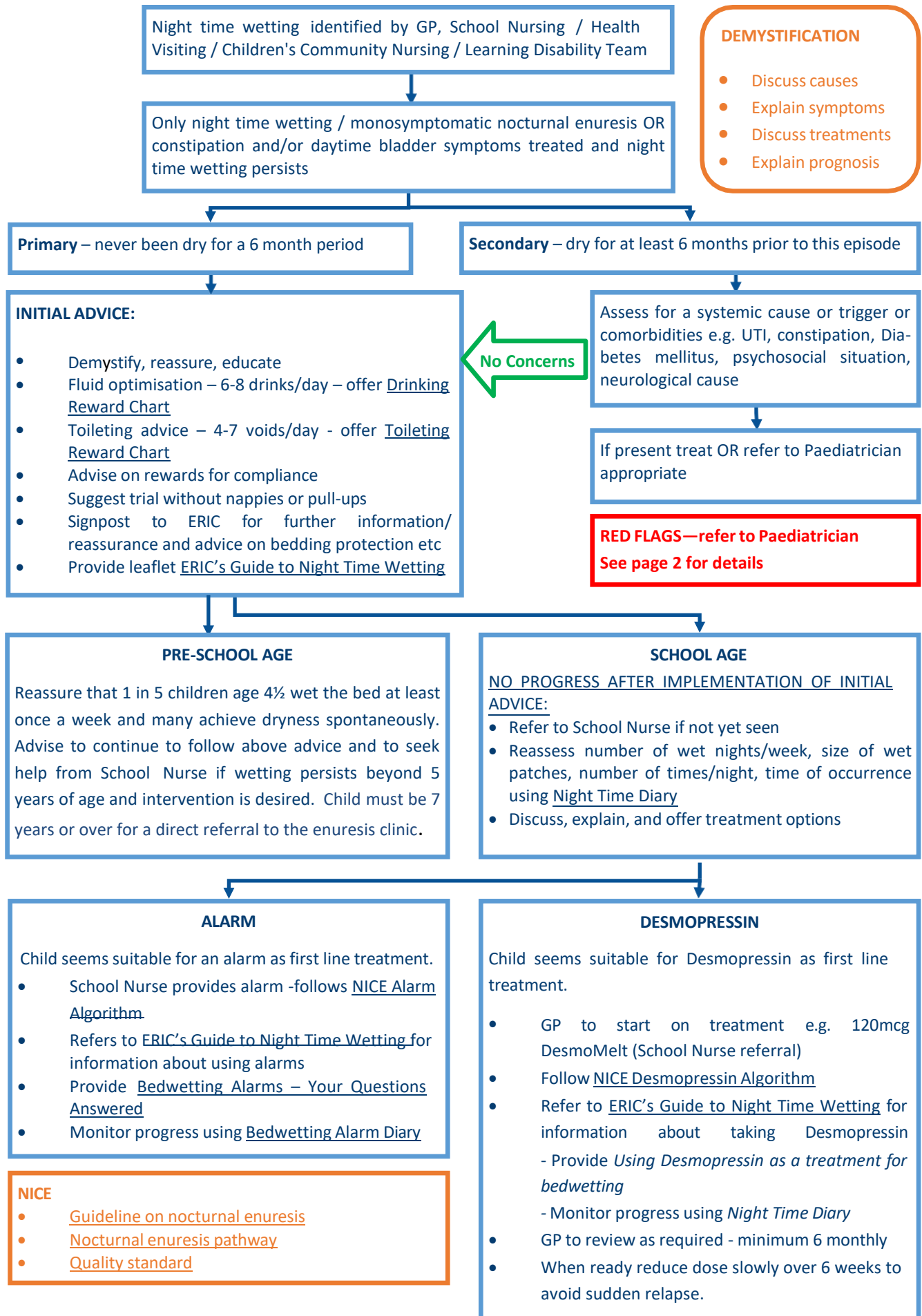


Pan-Dorset Flowchart - Nocturnal Enuresis / Bedwetting

Every child must be fully assessed. If night time wetting (nocturnal enuresis / bedwetting) is identified, follow the flowchart below to ensure the child receives the correct assessment, treatment and management.



RED FLAG ADVICE

Always remember to consider an acute cause or trigger – is there an infection or constipation?

Could there be underlying neurological issues or diabetes? If so treat these or refer as appropriate.

Red flag reasons for referral:

- Daytime frequency – passing lots of urine**
- Dysuria – pain when passing urine**
- Daytime wetting or urgency**
- Poor urinary stream or straining to pass urine**
- Leaking**
- Polydipsia – drinking lots**
- Poor growth or loss of weight**
- High blood pressure**
- Odd appearance to spine or sacral area**
- Recurrent UTIs**
- Suspicion of renal problems – Family history or antenatal concerns**

Consider referral to paediatrics if any of the above are present or:

- Persistent wetting with failure of enuresis alarm/medication
- Other medical problems such as diabetes, neurological problems