



Incontinence, urine, pediatric / enuresis

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Rationale

Enuresis is the involuntary passage of urine in a child. The majority of children with enuresis have primary nocturnal enuresis. Daytime and secondary enuresis are much less common, but require differentiating between underlying diseases and stress-related conditions.

Causal Conditions

(list not exhaustive)

- Primary enuresis (e.g., family history)
- Secondary enuresis (e.g., urinary tract infection, vesicoureteral reflux)

Key Objective

In a child five years of age or older, determine whether a physical abnormality is causing the involuntary passage of urine.

Enabling Objectives

Given a patient with enuresis, the candidate will

- list and interpret critical clinical findings, including
 - a. an appropriate history and physical examination to
 - determine whether medical reasons underlie the enuresis;
 - determine whether a stressful event preceded the occurrence of enuresis (e.g., birth of a sibling);
- list and interpret critical clinical and laboratory findings, including
 - a. urinalysis and urine culture;

- construct an effective management plan, including
 - a. counselling, education, and reassurance of the parents of a child with primary nocturnal enuresis, including treatment options;
 - b. counselling and reassurance of the child to improve self-esteem;
 - c. in the case of secondary enuresis, treatment of the underlying cause;
 - d. determining if the patient needs to be referred to a specialist.