A 71-year-old woman was evaluated for abnormal urination, which occurred 2 weeks after left hip arthroplasty. Abdominal examination revealed suprapubic distention despite urethral catheterization with an 18F Foley catheter. Initially, a computed tomographic scan of the pelvis without intravenous contrast material indicated a grossly distended urinary bladder (image A, arrow). Hand irrigation of the Foley catheter was unable to resolve the suprapubic distention with minimal production of urine. A normal bladder without extravasation was appreciated with cystoscopy but incompletely filled during irrigation. A cystogram (image B) revealed a 15-cm pelvic hematoma (arrow) with compression of the bladder (star). Percutaneous drain was placed for the hematoma, and the patient was discharged to home 3 days later in stable condition. Kluger et al and Abdulwahab et al describe similar instances of urinary obstruction from pelvic hematomas. Physicians should consider pelvic hematomas in the differential diagnosis when treating patients with pelvic fractures. (doi:10.7556/jaoa.2013.073)

References

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