

Asymptomatic Microscopic Hematuria

Patient Information · Tiny amounts of blood in the urine, found on a test

WARWIKI

Microscopic hematuria means there is a **small amount of blood in your urine that can only be seen under a microscope** — not with the naked eye. “Asymptomatic” means it was found on a test while you felt fine. Most causes are not serious, but because it can occasionally be an early sign of something important, it is worth a check.

What It Means

A urine test can detect red blood cells that are far too few to change the color of your urine. Finding them is common and, on its own, is not a diagnosis — it is a **signal to look a little further**. Your team will usually first confirm it is truly present on a proper urine test (a dipstick alone is not enough).

What Causes It

There are many possible causes, most of them harmless:

- **Common, benign:** vigorous exercise, a recent infection, menstruation, or recent sexual activity
- **Treatable causes:** a urinary stone, an enlarged prostate, or a kidney condition
- **Less commonly,** it can be the first clue to a growth in the bladder or kidney — which is why a check matters

Often, no specific cause is found, which is reassuring.

LEARN THE TERMS

Hematuria

Blood in the urine.

Microscopic

Seen only under a microscope, not with the eye.

Asymptomatic

Found without any symptoms.

Urinalysis

A urine test that confirms and measures the blood.

Cystoscopy

A look inside the bladder with a thin camera.

CT urogram

A detailed X-ray scan of the kidneys and urinary tract.

Risk-based check

How much testing is needed depends on your personal risk.

SHOULD I BE WORRIED? Usually not — most people turn out to have a harmless cause or none at all. The check is a sensible precaution, not a sign your team expects something serious. How much testing you need is matched to your personal risk, so not everyone needs every test.

How It's Checked

Your team weighs your **risk** — things like your age, whether you smoke (a key risk factor), and how much blood was found — and recommends testing to match:

- 1 **Confirm** it is really present, and review your history and any symptoms.
- 2 **Imaging** of the kidneys and urinary tract — an **ultrasound** or a **CT urogram**.
- 3 A **cystoscopy** — a quick look inside the bladder — for higher-risk patients.
- 4 Blood/urine tests if a **kidney** cause is suspected.

What Happens Next

- If a cause is found, your team **treats it**.
- If nothing is found, you may simply have **follow-up urine tests** over time.

Good to Know

- **Quitting smoking** is the single best thing you can do for urinary-tract health.
- Tell your team if you take a **blood thinner** — it doesn't excuse skipping the check.
- Mention recent exercise, menstruation, or a recent infection, which can explain a test.

Call your team if you have:

- **Visible blood** in the urine (pink, red, or tea-colored), with or without clots
- Pain in the side or lower belly, or burning when urinating
- A fever, or trouble urinating

THREE THINGS TO REMEMBER

1. Microscopic hematuria is a tiny amount of blood found on a urine test — most causes are harmless, but it's worth checking.
2. Testing is matched to your personal risk and may include imaging and a quick bladder look; not everyone needs every test.
3. Don't skip the check, especially if you smoke. Call right away if you ever see **visible** blood in the urine.