

Adfinitas Health Rehabilitative Services Clinical Guidelines

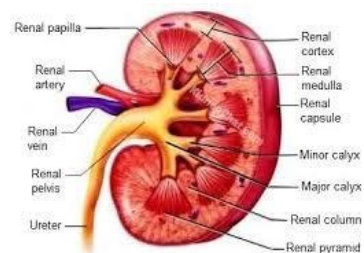
Guideline Title: Kidney Disease Documentation

Purpose: To assist with proper documentation of kidney disease.

Guideline is intended to help inform clinical practice and is not intended nor should it be utilized to establish a standard of care. In addition, it is understood that every patient and every clinical circumstance is unique and individualized. Therefore, the provider should apply their own clinical judgment to the specific factors presented in determining the most appropriate care to be delivered to any particular patient.

Scope: Post-Acute Clinicians

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Kidney Disease Documentation

Please do not use the term Renal Insufficiency

1. Acute Kidney Injury (AKI)
 - Increase in serum creatinine by 0.3mg/dL or more within 48 hours **or**
 - Increase in serum creatinine to 1.5 times baseline or more within the last 7 days **or**
 - Urine output less than 0.5 mL/kg/h for 6 hours
2. Acute Kidney Failure (ARF)
 - Threefold increase in serum creatinine level, decrease in GFR by 75%, **or**
 - Serum creatinine level ≥ 4 mg/dL with acute increase of >0.5 mg/dL; UO <0.3 mL/kg/h for 24 hours, **or**
 - Anuria for 12 hours
3. Chronic Kidney Disease (CDK): as indicated in chart below

		GFR
At Increased Risk	Risk Factors: DM, HTN, age, ethnic group, et.	>90
Stage 1	Kidney Damage: protein in urine & normal GFR	>90
Stage 2	Kidney Damage: protein in urine & mild ↓ in GFR	60-89
Stage 3	Moderate Decrease in GFR	30-59
Stage 4	Severe Decrease in GFR	15-29
Stage 5	Kidney Failure or on Dialysis	<15