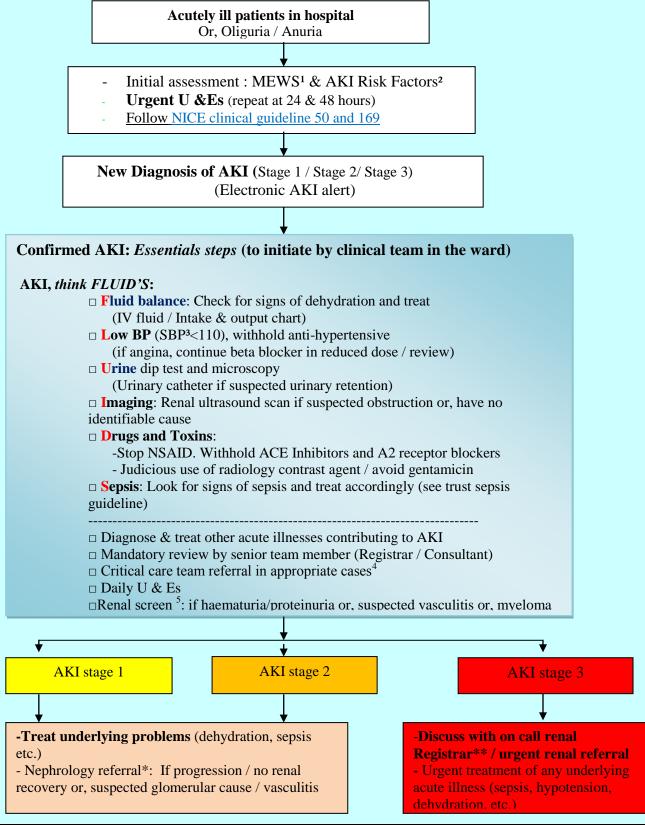
Cheshire and Mersey Acute Kidney Injury (AKI) Guideline



*****CONTACTINFORMATION*****			
Main Kidney Unit	Kidney Referral Contacts	On Call Contacts	
Royal Liverpool Uni. Hospital	Fax: 0151 706 5439 / ICE referral: 9am – 5 pm / Weekdays	Renal SpR at RLUH on bleep through RLUH switch board (0151 706 2000): 24 hours	

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AKI Definition: New abnormal renal function; serum creatinine rise ≥ 26 umol/L or 1.5 times from baseline or oliguria (<0.5 mL/kg/hour for > 6 consecutive hours)

**Table 1 : Definition/Staging system for acute kidney injury			
Stage	Serum creatinine (SCr) criteria	Urine output criteria	
1	increase ≥ 26 μmol/L within 48hrs or increase ≥ 1.5 to 1.9 X reference SCr	<0.5 mL/kg/hr for > 6 consecutive hrs	
2	increase ≥ 2 to 2.9 X reference SCr¹	<0.5 mL/kg/ hr for > 12 hrs	
3	increase ≥ 3 X reference SCr <u>or</u> increase 354 μ mol/L <u>or</u> commenced on renal replacement therapy (RRT) irrespective of stage	<0.3 mL/kg/ hr for > 24 hrs or anuria for 12 hrs	
KDIGO staging system for acute kidney injury; ¹reference SCr = baseline SCr			

²AKI risk Factors:

Drugs with nephrotoxic potential (NSAID/ ACEI/ARB/Diuretics/Opiates/ Iodinated contrast agents)

⁴Critical Care Referral:

Multi organ failure

Hypotension requiring inotropic support
Sepsis with high lactate and oliguria

Severe acidosis (<7.2)
Respiratory Failure

⁵Renal screen: ANCA, Anti-GBM Ab, Serum Immunoglobulin & paraprotein, urine Bence Jones Protein, Urine albumin creatinine ratio

¹MEWS: Modified Early Warning Score (systolic blood pressure, heart rate, respiratory rate, body temperature, level of consciousness) ³SBP- systolic blood pressure

NICE Acute kidney injury (CG169) - NICE Guidance. guidance.nice.org.uk/cg169

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The Royal Liverpool and Broadgreen University Hospitals

^{*}Oliguria = urine output less than 0.5 ml/kg/hour

^{&#}x27;NICE' Clinical Guideline 50: http://guidance.nice.org.uk/CG50/QuickRefGuide/pdf/English