

Chronic Kidney Disease (CKD) Assessment Algorithm

Identification and Referral

Emergency
Room
Visit

Is patient at risk for CKD?

- Age > 60 years
- High blood pressure
- Urinary stones
- Exposure to drugs/contrast
- Urinary tract infection
- Lower urinary tract obstruction
- Systemic infections
- Drug toxicity
- Diabetes
- Family history of CKD
- Autoimmune diseases
- Hx acute renal failure

Yes

Evaluate patients at increased risk for CKD

Consider:

- Serum creatinine to determine estimated eGFR
- Assessment of proteinuria
- Urinalysis for presence of white & red blood cells

Does patient have abnormal eGFR?

http://www.kidney.org/professionals/kdoqi/gfr_calculator.cfm

Yes

Is eGFR 45 – 60?

Refer patient to primary
care physician or internist
for follow-up

Is eGFR < 45?

Refer patient to
nephrologist for follow-up

Provide Patient Education on Preserving Kidney Function

Avoid all NSAIDS
Avoid Milk of Magnesia
Avoid oral & enema sodium phosphate products
Avoid needle punctures and blood pressures in non-dominant arm
Avoid subclavian central lines
Avoid gadolinium-based contrast if eGFR < 30 or acute kidney injury
CAUTIOUS USE OF IV/MRI CONTRAST DYE—CONSULT NEPHROLOGY