Wessex Adult Acute Kidney Injury Care Pathway for Primary Care



Wessex Strategic Clinical Networks

What is AKI?

AKI refers to any sudden decline in kidney function and is most often seen during episodes of acute illness. It is defined in terms of the proportional rise in serum creatinine from baseline and staged by severity as follows:

- AKI Stage 1: Increase in serum creatinine 1.5 1.9 times baseline
 Or increase by ≥26µmol/l in <48 hours
- AKI Stage 2: Increase in serum creatinine 2 3 times baseline
- **AKI Stage 3:** Increase in serum creatinine >3 times baseline or to >354

Risk Assessment
Consider who is at risk.

General factors

- Age >65
- CKD at baseline
- History of previous AKI
- Falls with long-lie

Comorbid illnesses

- Diabetes
- Vascular disease
- Heart / liver disease
- Malignancy

Medications/ toxins

- ACE / ARBs
- NSAIDs
- Diuretics
- Recent contrast

Code all confirmed AKI episodes in primary care records to highlight risk

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Prevention

In all at risk patients.

- Review need for nephrotoxic medications and consider safer alternatives.
- Educate the patient and carer about risk of dehydration during acute illness.
- Educate patients to seek help/advice early in the event of acute illness.
- During acute illness:
 - Review medication that could be adjusted or temporarily stopped if clinically appropriate, e.g. diuretics, ACE inhibitors, NSAIDs, etc.
 - Check hydration and consider checking serum creatinine and electrolytes.
 - Monitor for deterioration.

Beware of sepsis and intervene early in at risk patients

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Management

When AKI is suspected either clinically or through an e-alert.

- Continue to apply above measures.
- Perform urine dipstick and send MSU.
- Patients with AKI stage 1 may not need admission but repeat bloods in 24-48 hours to assess progress.

Think **STOP**

Sepsis
Toxicity
Obstruction
Parenchymal disease

Seek Help / Advice

Discuss with the local Medical Assessment Unit:

- All unwell patients who warrant admission regardless of AKI stage.
- All patients with AKI stage 2 and 3 episodes.
- All patients with urine dipstick positive for blood and protein in the absence of UTI regardless of AKI stage.



Think Kidneys: www.thinkkidneys.nhs.uk

Acute kidney injury NICE clinical guideline 169: www.nice.org.uk/guidance/cg169

Wessex Strategic Clinical Networks: www.wessexscn.nhs.uk