

Care Bundle Development

AKI 8 – Care Bundle for suspected/ confirmed Acute Kidney Injury

Please complete the care bundle and affix/file within the patient's clinical notes

- Assess for volume status/ sepsis, consider iv fluids/ antibiotics
- STOP** nephrotoxic medications (eg 'prils, 'sartans, NSAIDs, diuretics)
- Perform a urine dip for **Blood/Protein/Leucocytes/Nitrites**
Absent in most pre-renal AKI, present in infection (**BPLN – request urine culture**), nephritis (**BP – send for urine PCR**) and some cases of obstruction (**B**)
- Manage hyperkalaemia as per intranet guidelines
- Check acid-base balance (venous bicarbonate +/- ABGs)
- Consider additional tests eg serum calcium/CK/CRP/ autoimmune and myeloma screen, and renal USS (**avoid** radiocontrast if possible)
- Monitor fluid balance/ specify frequency of NEWS assessments and repeat blood tests
- Contact renal registrar (#6581) or consultant if AKI Stage 3 +/- hyperkalaemia, fluid overload and metabolic acidosis, plan repeat tests/ review escalation of care/ inform patient or family as appropriate

In the patient **DISCHARGE SUMMARY**, to comply with AKI CQUIN please state:

1. **HIGHEST stage of AKI** during the admission
2. **Medication changes made** – state YES or NO/ if YES, explain ALL changes, stating whether **DUE TO AKI** and whether or not medication is to be **RESTARTED** and **WHEN**
- 3/4. **Blood tests required** post-discharge – state both **TYPE** and **FREQUENCY**

Date and time of completion:

Signature and bleep:

Simplified wording



Some interventions are not always appropriate - we added an N/A to allow for full completion



AKI 8 Care Bundle for suspected/ confirmed Acute Kidney Injury

Care bundle commenced: Date: Time:

Please complete the care bundle and affix/file within the patient's clinical notes

Initial action when completed

1. Assess for volume status/ sepsis, consider iv fluids/ antibiotics	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
2. Review medication and consider stopping nephrotoxic medications (eg 'prils, 'sartans, NSAIDs, diuretics)	Yes <input type="checkbox"/>
3. Perform and review urine dip for Blood/Protein/Leucocytes/Nitrites. Absent in most pre-renal AKI, present in infection (BPLN – request urine culture), nephritis (BP – send for urine PCR) and some cases of obstruction (B)	Yes <input type="checkbox"/>
4. Manage hyperkalaemia	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
5. Check acid-base balance (venous bicarbonate +/- ABGs)	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Consider additional tests eg serum calcium/CK/CRP/ autoimmune and myeloma screen, and renal USS (avoid radiocontrast if possible)	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
7. Monitor fluid balance/ specify frequency of NEWS assessments and repeat blood tests	Yes <input type="checkbox"/>
8. Contact renal registrar (#6581) or consultant if AKI Stage 3 hyperkalaemia, fluid overload and metabolic acidosis; plan repeat tests/ review escalation of care/ inform patient or family.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

Signatures register - Initial and add name when completing each bundle element			
Name	Initial	Name	Initial

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Bradford Teaching Hospitals **NHS**
NHS Foundation Trust

Affix Patient Information Label

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3. Perform and review urine dip for Blood/Protein/Leucocytes/Nitrites. Absent in most pre-renal AKI, present in infection (BPLN – request urine culture), nephritis (BP – send for urine PCR) and some cases of obstruction (B)	Yes <input type="checkbox"/>
4. Manage hyperkalaemia	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
5. Check acid-base balance (venous bicarbonate +/- ABGs)	Yes <input type="checkbox"/>
6. Consider additional tests eg serum calcium/CK/CRP/ autoimmune and myeloma screen, and renal USS (avoid radiocontrast if possible)	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
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MID Ref: 16083107 - BFD0213
1016083107

Staff wanted the bundle to stand out in the notes

Staff wanted the bundle to look simpler – we put non bundle interventions outside the border

The full MDT can contribute to completing the bundle – we added a box to allow for each item to be signed off individually

