Surgery Name Chronic Kidney Disease Review

Review Status: No CKD stage specified Current EMIS Status: No EMIS CKD entry

Results Overview

Patient Information

NHS Number: 692372Age: 47 | Gender: Male

CKD Overview

• Stage: Normal Function | ACR criteria: A1

• Albumin-Creatinine Ratio (ACR): 0.01 mg/mmol

• Creatinine:

Current: 122 μmol/L | Date: 2023-07-10
 3 Months Prior: 125 μmol/L | Date: 2023-04-10

eGFR:

Current: 63 ml/min/1.73m² | Date: 2023-07-10
 3 Months Prior: 61 ml/min/1.73m² | Date: 2023-04-10

• Anaemia Overview:

• Haemoglobin: 133 g/L | Date: 2023-04-10

• Current Status: Normal

• Anaemia Management: No Action Needed

Electrolyte and Mineral Bone Disorder (MBD) Management

• Potassium: 4.6 mmol/L | Status: Normal | Date: 2023-04-10

• Phosphate: 1.53 mmol/L | Status: Hyperphosphatemia | Date: 2023-04-10

• Calcium: 2.3 mmol/L | Status: Normal | Date: 2023-04-10

• MBD Status: Check CKD-MBD

Vitamin D Level: 36 ng/mL | Date: 2023-04-10

• Vitamin D Status: Normal

Blood Pressure

Classification: Normal | Date: 2023-04-10
 Systolic / Diastolic: 125 / 78 mmHg

• Target BP: <130/80 | BP Status: On Target

Kidney Failure Risk

2-Year Risk: N/A%5-Year Risk: N/A%

The patient's 2- and 5-year kidney failure risk scores estimate the likelihood that their kidney disease will progress to kidney failure within the next 2 or 5 years. These scores are calculated based on the patient's current kidney function and other risk factors such as age, blood pressure, and existing health conditions. Understanding these risk scores helps in predicting disease progression and planning appropriate treatment strategies.

Care & Referrals

Multidisciplinary Care: Not Indicated
 Modality Education: Not Indicated
 Nephrology Referral: Not Indicated

• Persistent Proteinuria: No Referral Needed

Medication Review

• Current Medication: Dapagliflozin 10mg, Ibuprofen 200mg, Omeprazole 20mg, Lisinopril 10mg

• Review Medications: No adjustments needed

• Contraindicated Medications: No contraindications

• **Suggested Medications:** Statin (e.g., Atorvastatin, Rosuvastatin, Simvastatin), ACE inhibitors (if not contraindicated) for proteinuria (if indicated), Lifestyle modifications

• Statin Recommendation: Not on Statin

Diabetes and HbA1c Management

• HbA1c Level: 46 mmol/mol | Date: 2023-04-10

• HbA1c Management: On Target

Lifestyle and Preventative Advice

Lifestyle Recommendations: Encourage general kidney health practices: a balanced, low-sodium diet; regular
physical activity within comfort levels; smoking cessation; weight management; and regular health check-ups to
monitor kidney function. Avoid over-the-counter NSAIDs and consult a healthcare provider for any new symptoms.

NICE Guideline Recommendations

Recommendations for Normal Kidney Function:

- **General Health Maintenance:** Encourage a balanced diet and regular physical activity. Avoid excessive use of NSAIDs and other nephrotoxic agents. Regular monitoring is not required unless risk factors are present.
- **Risk Factor Management:** Monitor blood pressure and maintain within normal ranges. Screen for diabetes and manage blood glucose levels if necessary.
- Preventive Measures: Encourage smoking cessation and limit alcohol intake. Stay hydrated and maintain a healthy weight.

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