**PRESERVE FEASIBILITY QUERY INSTRUCTIONS**

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| Date Issued: | 16 Nov 2021 |
| Query title: | PRESERVE Feasibility v0.2 |
| Query information: | This is v0.2 of the feasibility query associated with the Preserving Kidney Function in Children with Chronic Kidney Disease (PRESERVE) project.  The feasibility query is designed to evaluate cohort and key variable definitions in the PCORnet CDM with a view to informing more detailed study-specific data quality analyses. Row level data will be generated in the local directory, whereas aggregate data which should be returned the PRESERVE CC via OneDrive will be generated in the output directory. Aggregate data may include counts <11 (including counts of 1). Raw fields are included in limited instances to investigate potentially unmapped records (counts of <3 patids/providerids for raw fields are removed). Please review content of output datasets and log file according to local policy before returning to the PRESERVE CC. |
| Data source: | The most recently approved PCORnet dataset at your institution (ideally PCORnet 6.0, Cycle 10, Refresh 2).  If your most recently approved version is not PCORnet 6.0, Cycle 10, Refresh 2, please let us know. |
| Requested data: | The query generates the following:  **(1) An attrition table for the mild-moderate chronic kidney disease phenotype, implemented as follows:**  0. Patients with >=1 visit between January 2009 and December 2021  1. Patients with >=1 in-person visit between January 2009 and December 2021  2. Patients with >=1 serum creatinine measurement  3. Patients aged >=1 and < 18 at time of >=1 serum creatinine measurement  4. Patients with height measurement available <=90 days of serum creatinine value (aged >=1 and < 18)  5. Patients with >=1 eGFR value >=30 and <=89 mL/min/1.73m2 (aged >=1 and < 18)  6. Patients with >=2 eGFRs >=30 and <=89 mL/min/1.73m2 which are >=90 days apart (aged >=1 and < 18)  7. Patients with >=2 eGFRs >=30 and <=89 mL/min/1.73m2 which are >=90 days apart, without an intervening eGFR value >= 90 mL/min/1.73m2 (aged >=1 and < 18)  8. Exclude patients with no in-person visits with a nephrology provider at any time between January 2009 and December 2021  9. Exclude patients with >=1 chronic dialysis procedure on or before cohort entry date  10. Exclude patients with >=1 kidney transplant procedure on or before cohort entry date  *Notes:*   * *The cohort entry date (CED) is defined as the date of the first eGFR of the earliest pair of eGFRs >=30 & <=89 mL/min/1.73m2 aged >=1 and < 18, separated by >=90 days, without an intervening eGFR >=90* * *The Revised Bedside Schwartz formula is used to compute eGFR, with a 90 day look-around for height measurements.*   **(2) Additional chronic kidney disease cohorts**  This cohort generated via the attrition table above is compared to two additional cohorts:   * Patients with >= 1 chronic kidney disease stage 2 or 3 diagnosis, aged >=1 and <18 years * Patients with >=2 serum creatinine measurements which are >= 1.5\*the upper limit of normal, separated by >=90 days, aged >=1 and <18 years   **(3) Distributions of key variables**  For the union of the three chronic kidney disease cohorts, distributions are output for the following key variables:   * Demographic characteristics: year of birth, year of cohort entry date, calendar year of cohort entry date, follow-up, race, ethnicity, sex * Encounter: encounter type, length of follow-up * Vital measurements: heights, weights, blood pressures * Conditions: chronic kidney disease stage 2 and 3, conditions associated with kidney transplant, conditions associated with kidney dialysis * Medications: Angiotensin-converting-enzyme inhibitors, angiotensin II receptor blockers, beta blockers, calcium channel blockers, loop diuretics, thiazides * Procedures: Kidney transplant, kidney dialysis * Labs: serum creatinine, serum cystatin, urine protein to creatinine ratios, urine creatinine, urine protein (qualitative), urine protein (quantitative)   **(4) Potentially unmapped raw field investigations**  Summaries for potentially unmapped raw fields:   * Serum creatinine measurements * Urine creatinine measurements * Urine protein measurements * Nephrology providers   *A complete list of output files is included in preserve\_feasibility\_v02\_output\_list.docx in the admin directory of the query.* |
| Procedure: | For this query, please run against the recently approved PCORnet dataset at your institution (ideally PCORnet 6.0, Cycle 10, Refresh 2). Note that the log is output to "preserve\_feasibility\_v02.log" in the output directory and can be viewed periodically as the query runs to check query progress and for errors.   1. Uncompress package containing query files. 2. Edit the user inputs in file master.sas in the sasprograms directory. 3. Execute master.sas. 4. Review content of output datasets and log file according to local policy. Note that aggregate data may include counts <11 (including counts of 1) and that raw fields are included in limited instances to investigate potentially unmapped records (counts of <3 patids/providerids for raw fields are removed). 5. Compress contents of output directory (datasets and log) into a zip rar archive. 6. Return results to PEDSnet DCC using your institution-specific "Feasibility Query Results" One Drive directory, per the email communication with the PRESERVE CC. |
| Response deadline: | 24 Nov 2021 |
| Response mechanism: | When execution completes, review content of output datasets and log file according to local policy and upload the compressed contents of output directory (datasets and log) to your institution-specific "Finalized Query Results" OneDrive directory. |
| Technical support / Troubleshooting: | Please email [preserve@chop.edu](mailto:preserve@chop.edu) |