Referral pathway for Acute Kidney Injury

**NOTES: If patient is acutely unwell referral should be directly to local AMU/ED**

**Nephrology on call available 24/7 via QA Switchboard 02392286000**

**Acute Kidney Injury**

**AKI 3**

**Patient clinically unwell**

**Potassium >6**

**Acidosis**

**Significant hypotension**

**Oligo/anuria**

**Referral to AMU/ED at local hospital**

**AKI with associated new blood and protein in urine**

**AKI 2 or 3 Discuss with nephrology on call**

**AKI 1 Urgent nephrology Op referral AND repeat blood in 5 to 7 days**

**Improving- Recheck blood in 2 weeks**

**Unchanged- Op referral to Nephrology**

**Worsening- discuss with Nephrology on call**

**Patient clinically well**

**AKI 1-2**

**Modifiable factors (drugs, hydration)**

**NO new blood and protein in urine**

**Repeat bloods in 5 to 7 days**

**Request Op USS**

**New acute rise in creatinine**

**Review historic results**

**Stop any nephrotoxic drugs**

**Clinical assessment of patient ?Urinary retention ? Dehydrated**

**Dip urine in all cases to look for blood and protein**