**NICE Quality Standard QS76 for AKI and Think Kidneys Resources**

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| **NICE Quality Standard** | **Think Kidneys Resource** |
| **Statement 1** People who are at risk of acute kidney injury are made aware of the potential causes. | The Think Kidneys programme aims to increase awareness of the prevention, detection and treatment of acute kidney injury. This includes providing information for the public on how to prevent AKI and how to reduce their risk. The following leaflets have been developed by Think Kidneys in partnership with BKPA, and there is one for people at risk and another for those who have experienced an episode of AKI:[**Info leaflet for patients at risk of AKI**](http://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BKPA-Patient-at-Risk-Leaflet_Web.pdf) [**Info leaflet for patients who have had AKI**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/11/BKPA-RCGP-A4-Printout-Leaflet_v4.pdf)The team have also made a short film about the kidneys as part of the public awareness campaign for the summer of 2016. This can be found here: [**Animated infographic**](https://www.thinkkidneys.nhs.uk/aki/videos/almost-everything-need-know-kidneys/) Think Kidneys worked with the CPPE to develop a learning campaign on acute kidney injury in the autumn of 2015. The aim is to support pharmacy professionals in every sector to help their patients prevent AKI. Details of the campaign can be found here:[**https://www.cppe.ac.uk/therapeutics/aki**](https://www.cppe.ac.uk/therapeutics/aki)Think Kidneys worked with Care Homes to develop guidance and an educational pack to highlight and prevent AKI in this sector. Full details can be found on the website: [**https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/**](https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/) Think Kidneys have worked closely with BKPA to develop patient leaflets and other resources. This is the link to the BKPA website:[**http://www.britishkidney-pa.co.uk/**](http://www.britishkidney-pa.co.uk/)Think Kidneys worked with NHS England to develop an AKI CQUIN for 2015/16. Details can be found here:[**https://www.england.nhs.uk/wp-content/uploads/2015/03/9-cquin-guid-2015-16.pdf**](https://www.england.nhs.uk/wp-content/uploads/2015/03/9-cquin-guid-2015-16.pdf)Think Kidneys supports a positive approach to accurate and effective discharge which we recognise can have a big impact on patient safety and outcomes. The team developed a list of the minimum data content required for a patient being discharged after an episode of AKI. It can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Discharge-summary-minimum-data-content-for-AKI.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Discharge-summary-minimum-data-content-for-AKI.pdf)Many medications are cleared via the kidneys, so have the potential to accumulate during an episode of AKI. The result of this may be a further deterioration in kidney function, or there may be other adverse effects. Hence it is necessary to review the use of these medications and amend the doses appropriate to the level of the patient’s renal function. Think Kidneys have produced a number of documents that can help with management a patient who has had AKI or is at risk of AKI and their medications:The following is a publication detailing guidance for patients at risk of AKI: [**Sick Day Guidance Statement**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/07/Think-Kidneys-Sick-Day-Guidance-v8-131115.pdf)The following is a publication for GPs, advising about restarting medications which may have been stopped when the patient was in hospital with an episode of AKI: [**When to restart drugs stopped during AKI**](http://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/When-to-restart-drugs-stopped-during-AKI-final.pdf)The following is a publication detailing how to optimise medications to limit further damage to the kidneys: [**Medicines Optimisation for AKI**](https://www.thinkkidneys.nhs.uk/aki/medicines-optimisation-for-aki/)The following is a publication detailing drugs prescribed in primary care which may be problematic: [**Quick Guide to Potentially Problematic Drugs and Actions to Take in Primary Care**](http://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Potentially-Problematic-Drugs-and-Actions-to-Take-in-Primary-Care.pdf) |
| **Statement 2** People who present with an illness with no clear acute component and 1 or more indications or risk factors for acute kidney injury are assessed for this condition. | Think Kidneys have developed a guidance template of minimal requirements for care bundles for acute kidney injury detected within hospital and which also allows additional tailoring according to local needs. It is primarily aimed at those hospitals without an AKI care bundle but gives those with existing packages a framework to ensure these meet national recommendations. Full details can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf)**Think Kidneys have developed a suite of guidance specifically for primary care:**[**Best Practice Guidance - Responding to AKI Warning Stage Test Results in Primary Care**](http://www.thinkkidneys.nhs.uk/aki/resources/primary-care/responding-aki-warning-stage-test-results-primary-care/)Highlighting key factors to consider when responding to results for adults in primary care, covering for example the stages of AKI, history of acute illness, co-morbidities and risk factors.Table 1. This at-a-glance resource explains what actions to take when, when to treat or when to refer.[**Recommended Response Times to AKI Warning Stage Test Results for Adults in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recommended-response-times-aki-warning-stage-test-results-adults-primary-care-table-1/) Understanding cause, possible medication factors, fluid volume status and options forreview:[**Recognising and Responding to AKI in Primary Care – Table 2**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recognising-responding-aki-primary-care-table-2/) Guidance for potentially problematic medicines: [**Quick Guide to Potentially Problematic Drugs and Actions to Take in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Potentially-Problematic-Drugs-and-Actions-to-Take-in-Primary-Care.pdf)Think Kidneys have developed some guidance for clinicians about Sick Days: [**Statement on ‘Sick Day Guidance ’ from Think Kidneys**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/07/Think-Kidneys-Sick-Day-Guidance-v8-131115.pdf)Think Kidneys document detailing communities at risk of AKI: [**Communities at Risk of Developing AKI – publication detailing those most at risk of AKI**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/07/Communities-at-risk-v14.pdf)Advice for primary care on re-starting medicines which have been stopped:[**When or if to re-start drugs after an episode of AKI**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/When-to-restart-drugs-stopped-during-AKI-final.pdf)Advice to monitoring of pharmacotherapy in clinically stable patients - changes in kidney function and serum potassium during ACEI/ARB/diuretic treatment in primary care:[**Changes in kidney function and serum potassium during ACEI/ARB/diuretic treatment in primary care**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Changes-in-kidney-function-during-ACEI-ARB-diuretic.pdf)Points to note and factors to consider in the medicines management of patients either with, or at risk of AKI. For example, which medications should or should not be suspended, which may be used with caution and alternative therapeutic options: [**Guidelines for Medicines Optimisation in Patients with AKI**](https://www.thinkkidneys.nhs.uk/aki/medicines-optimisation-for-aki/) Think Kidneys worked with the CPPE to develop a learning campaign on acute kidney injury in the autumn of 2015. The aim is to support pharmacy professionals in every sector to help their patients prevent AKI. Details of the campaign can be found here:[**https://www.cppe.ac.uk/therapeutics/aki**](https://www.cppe.ac.uk/therapeutics/aki)Think Kidneys worked with Care Homes to develop guidance and an educational pack to highlight and prevent AKI in this sector. Full details can be found on the website: [**https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/**](https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/) Think Kidneys are developing a secondary care risk matrix. Full details will be published on the Think Kidneys website in January 2017.Think Kidneys have worked with Mental Health colleagues to develop guidance specifically for clinicians working with this patient group. Full details can be found here: [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Guidance-for-mental-health-patients-version-v18.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Guidance-for-mental-health-patients-version-v18.pdf)Table 1. This at-a-glance resource explains what actions to take when, when to treat or when to refer:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Mental-Health-Recommended-response-times-to-AKI-Warning-Stage-Test-Results-for-Adults-in-Primary-Care-Table-1.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Mental-Health-Recommended-response-times-to-AKI-Warning-Stage-Test-Results-for-Adults-in-Primary-Care-Table-1.pdf)Table 2. Understanding cause, possible medication factors, fluid volume status and options for review:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/MH-Recognising-and-Responding-to-Acute-Kidney-Injury-in-Primary-Care-Table-2.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/MH-Recognising-and-Responding-to-Acute-Kidney-Injury-in-Primary-Care-Table-2.pdf)Think Kidneys have worked with paediatricians to develop guidance specifically for clinicians working with this patient group. Full details can be found here: [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance\_for\_paediatric\_patients\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance_for_paediatric_patients_FINAL.pdf)The BAPN guidance as a stand alone document can be found here: [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN\_AKI\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN_AKI_FINAL.pdf) |
| **Statement 3** People in hospital who are at risk of acute kidney injury have their serum creatinine level and urine output monitored. | Think Kidneys are developing a secondary care risk matrix. Full details will be published on the Think Kidneys website in January 2017.The installation of the NHS England AKI detection algorithm should be regarded as one part of a trust-wide approach to tackle Acute Kidney Injury. The installation of the algorithm will primarily be the role of laboratory staff but other elements of the pathway will require a multispecialty approach, including appropriate clinical engagement and senior executive buy in. Think Kidneys have developed Best Practice Guidance to help with the installation, testing and introduction of AKI detection into clinical practice. Full details can be found here**:** [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2014/12/AKI-Warning-Algorithm-Best-PracticeGuidance-10.03.16.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2014/12/AKI-Warning-Algorithm-Best-PracticeGuidance-10.03.16.pdf) Table 1. This at-a-glance resource explains what actions to take when, when to treat or when to refer: [**Recommended Response Times to AKI Warning Stage Test Results for Adults in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recommended-response-times-aki-warning-stage-test-results-adults-primary-care-table-1/) Table 2 - Understanding cause, possible medication factors, fluid volume status and options for review[**Recognising and Responding to AKI in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recognising-responding-aki-primary-care-table-2/)Think Kidneys have developed a guidance template of minimal requirements for care bundles for acute kidney injury detected within hospital and which also allows additional tailoring according to local needs. It is primarily aimed at those hospitals without an AKI care bundle but gives those with existing packages a framework to ensure these meet national recommendations. Full details can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf)Think Kidneys supports a positive approach to accurate and effective discharge which we recognise can have a big impact on patient safety and outcomes. The team developed a list of the minimum data content required for a patient being discharged after an episode of AKI. It can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Discharge-summary-minimum-data-content-for-AKI.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Discharge-summary-minimum-data-content-for-AKI.pdf)Think Kidneys have developed some guidance for clinicians about Sick Days: [**Statement on ‘Sick Day Guidance ’ from Think Kidneys**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/07/Think-Kidneys-Sick-Day-Guidance-v8-131115.pdf)The following is a publication detailing drugs prescribed in primary care which may be problematic: [**Quick Guide to Potentially Problematic Drugs and Actions to Take in Primary Care**](http://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Potentially-Problematic-Drugs-and-Actions-to-Take-in-Primary-Care.pdf)The Think Kidneys programme aims to increase awareness of the prevention, detection and treatment of acute kidney injury. This includes providing information for the public on how to prevent AKI and how to reduce their risk. The following leaflets have been developed by Think Kidneys in partnership with BKPA, and there is one for people at risk and another for those who have experienced an episode of AKI:[**Info leaflet for patients at risk of AKI**](http://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BKPA-Patient-at-Risk-Leaflet_Web.pdf) [**Info leaflet for patients who have had AKI**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/11/BKPA-RCGP-A4-Printout-Leaflet_v4.pdf)Advice to monitoring of pharmacotherapy in clinically stable patients - changes in kidney function and serum potassium during ACEI/ARB/diuretic treatment in primary care:[**Changes in kidney function and serum potassium during ACEI/ARB/diuretic treatment in primary care**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Changes-in-kidney-function-during-ACEI-ARB-diuretic.pdf) |
| **Statement 4** People have a urine dipstick test performed as soon as acute kidney injury is suspected or detected. | Think Kidneys worked with Care Homes to develop guidance and an educational pack to highlight and prevent AKI in this sector. Full details can be found on the website: [**https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/**](https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/) Table 2 - Understanding cause, possible medication factors, fluid volume status and options for review[**Recognising and Responding to AKI in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recognising-responding-aki-primary-care-table-2/)Think Kidneys are developing a secondary care risk matrix. Full details will be published on the Think Kidneys website in January 2017.Think Kidneys supports a positive approach to accurate and effective discharge which we recognise can have a big impact on patient safety and outcomes. The team developed a list of the minimum data content required for a patient being discharged after an episode of AKI. It can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Discharge-summary-minimum-data-content-for-AKI.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Discharge-summary-minimum-data-content-for-AKI.pdf)Key factors to consider when responding to results for adults in primary care, covering for example the stages of AKI, history of acute illness, co-morbidities and risk factors.[**Best Practice Guidance - Responding to AKI Warning Stage Test Results in Primary Care**](http://www.thinkkidneys.nhs.uk/aki/resources/primary-care/responding-aki-warning-stage-test-results-primary-care/)The Think Kidneys programme aims to increase awareness of the prevention, detection and treatment of acute kidney injury. This includes providing information for the public on how to prevent AKI and how to reduce their risk. The following leaflets have been developed by Think Kidneys in partnership with BKPA, and there is one for people at risk and another for those who have experienced an episode of AKI:[**Info leaflet for patients at risk of AKI**](http://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BKPA-Patient-at-Risk-Leaflet_Web.pdf) [**Info leaflet for patients who have had AKI**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/11/BKPA-RCGP-A4-Printout-Leaflet_v4.pdf)Think Kidneys have worked with Mental Health colleagues to develop guidance specifically for clinicians working with this patient group. Full details can be found here: [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Guidance-for-mental-health-patients-version-v18.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Guidance-for-mental-health-patients-version-v18.pdf)Table 1. This at-a-glance resource explains what actions to take when, when to treat or when to refer:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Mental-Health-Recommended-response-times-to-AKI-Warning-Stage-Test-Results-for-Adults-in-Primary-Care-Table-1.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Mental-Health-Recommended-response-times-to-AKI-Warning-Stage-Test-Results-for-Adults-in-Primary-Care-Table-1.pdf)Table 2. Understanding cause, possible medication factors, fluid volume status and options for review:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/MH-Recognising-and-Responding-to-Acute-Kidney-Injury-in-Primary-Care-Table-2.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/MH-Recognising-and-Responding-to-Acute-Kidney-Injury-in-Primary-Care-Table-2.pdf)Think Kidneys have worked with paediatricians to develop guidance specifically for clinicians working with this patient group. Full details can be found here: [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance\_for\_paediatric\_patients\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance_for_paediatric_patients_FINAL.pdf)The BAPN guidance as a stand alone document can be found here: [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN\_AKI\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN_AKI_FINAL.pdf) |
| **Statement 5** People with acute kidney injury have the management of their condition discussed with a nephrologist as soon as possible, and within 24 hours of detection, if they are at risk of intrinsic renal disease or have stage 3 acute kidney injury or a renal transplant. | The following is a publication detailing how to optimise medications to limit further damage to the kidneys: [**Medicines Optimisation for AKI**](https://www.thinkkidneys.nhs.uk/aki/medicines-optimisation-for-aki/)Think Kidneys worked with Care Homes to develop guidance and an educational pack to highlight and prevent AKI in this sector. Full details can be found on the website: [**https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/**](https://www.thinkkidneys.nhs.uk/aki/resources/care-homes/) Think Kidneys have developed a guidance template of minimal requirements for care bundles for acute kidney injury detected within hospital and which also allows additional tailoring according to local needs. It is primarily aimed at those hospitals without an AKI care bundle but gives those with existing packages a framework to ensure these meet national recommendations. Full details can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf)**T**able 1. This at-a-glance resource explains what actions to take when, when to treat or when to refer: [**Recommended Response Times to AKI Warning Stage Test Results for Adults in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recommended-response-times-aki-warning-stage-test-results-adults-primary-care-table-1/) Table 2 - Understanding cause, possible medication factors, fluid volume status and options for review[**Recognising and Responding to AKI in Primary Care**](https://www.thinkkidneys.nhs.uk/aki/resources/primary-care/recognising-responding-aki-primary-care-table-2/)The Think Kidneys programme aims to increase awareness of the prevention, detection and treatment of acute kidney injury. This includes providing information for the public on how to prevent AKI and how to reduce their risk. The following leaflets has been developed by Think Kidneys in partnership with BKPA for those who have experienced an episode of AKI:[**Info leaflet for patients who have had AKI**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/11/BKPA-RCGP-A4-Printout-Leaflet_v4.pdf)Think Kidneys have worked with Mental Health colleagues to develop guidance specifically for clinicians working with this patient group. Full details can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Guidance-for-mental-health-patients-version-v18.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Guidance-for-mental-health-patients-version-v18.pdf)Table 1. This at-a-glance resource explains what actions to take when, when to treat or when to refer:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Mental-Health-Recommended-response-times-to-AKI-Warning-Stage-Test-Results-for-Adults-in-Primary-Care-Table-1.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/Mental-Health-Recommended-response-times-to-AKI-Warning-Stage-Test-Results-for-Adults-in-Primary-Care-Table-1.pdf)Table 2. Understanding cause, possible medication factors, fluid volume status and options for review:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/MH-Recognising-and-Responding-to-Acute-Kidney-Injury-in-Primary-Care-Table-2.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/MH-Recognising-and-Responding-to-Acute-Kidney-Injury-in-Primary-Care-Table-2.pdf)Think Kidneys have worked with paediatricians to develop guidance specifically for clinicians working with this patient group. Full details can be found here**:** [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance\_for\_paediatric\_patients\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance_for_paediatric_patients_FINAL.pdf)The BAPN guidance as a stand alone document can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN\_AKI\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN_AKI_FINAL.pdf) |
| **Statement 6** People with acute kidney injury who meet the criteria for renal replacement therapy are referred immediately to a nephrologist or critical care specialist. | Think Kidneys have worked with paediatricians to develop guidance specifically for clinicians working with this patient group. Full details can be found here**:** [**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance\_for\_paediatric\_patients\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/05/Guidance_for_paediatric_patients_FINAL.pdf)The BAPN guidance as a stand alone document can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN\_AKI\_FINAL.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2016/02/BAPN_AKI_FINAL.pdf)Think Kidneys have developed a guidance template of minimal requirements for care bundles for acute kidney injury detected within hospital and which also allows additional tailoring according to local needs. It is primarily aimed at those hospitals without an AKI care bundle but gives those with existing packages a framework to ensure these meet national recommendations. Full details can be found here:[**https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf**](https://www.thinkkidneys.nhs.uk/aki/wp-content/uploads/sites/2/2015/12/AKI-care-bundle-requirements-FINAL-12.07.16.pdf) |