



Resource impact statement

Resource impact

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No significant resource impact is anticipated

We do not expect this update to the existing NICE guideline on acute kidney injury: prevention, detection and management, which originally published as NICE guideline CG169 in August 2013 to have a significant impact on resources; that is:

- the resource impact of implementing any single guideline recommendation will be less than £1 million per year in England (or £1,800 per 100,000 population) **and**
- the resource impact of implementing the whole guideline in England will be less than £5 million per year (or £9,000 per 100,000 population).

The updated guideline reviewed the relative effectiveness and cost effectiveness of different oral fluids and different oral fluid regimes, both with and without oral N-Acetylcysteine, at preventing contrast-induced acute kidney injury. There may be savings from a reduction in outpatient procedures because people will not need to be admitted to hospital to be given intravenous fluids for volume expansion before they are given a contrast agent. Where clinical practice does change as a result of this update, there is unlikely to be a significant change in resource use.

Scans requiring the use of contrast media are commissioned by clinical commissioning groups and NHS England. Acute kidney injury services are commissioned by clinical commissioning groups. Providers are NHS hospital trusts.