

**Department of Clinical Biochemistry**  
Core Clinical Services Directorate

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Dear Colleague

**Re: Acute Kidney Injury reporting to primary care from North Bristol NHS Trust**

As part of the national 'Think Kidneys' programme to improve the recognition and early detection of Acute Kidney Injury (AKI), laboratories in the UK have been asked to introduce electronic reporting systems for the automatic detection and reporting of AKI. The aim of these systems is to make changes in creatinine easier to spot, provide standardised definitions of the stages of AKI and improve its diagnosis and management.

AKI reporting in NBT is carried out in the ICE order-communications system. This has previously only been implemented for creatinine requests from secondary care, but from 23 January 2016, AKI results in ICE will also be generated from blood tests taken in primary care.

Please note that it is currently not possible for AKI reports to be sent to GP systems, as the AKI result is generated in ICE after the creatinine result has already been reported by the laboratory. This is an interim position because of the recent replacement of the laboratory computer system (LIMS). Once sufficient historical creatinine data has built up in the LIMS (by October 2017) AKI reports will be generated by the laboratory computer and reported to GP systems.

In the meantime the laboratory will continue to highlight significant changes in creatinine that may indicate AKI and comment on or telephone clinically significant creatinine results where appropriate. In line with national guidelines for management of AKI, creatinine results that have doubled since the previous result (potentially indicating stage 2 AKI) will be telephoned within routine working hours. Results that may indicate stage 3 AKI (a three-fold increase in creatinine or an acute increase resulting in a creatinine greater than 354umol/L) will be telephoned urgently (including out of hours). The AKI stage can be viewed by looking up the patient's results in ICE.

Further information on AKI including resources for primary care is available from the Think Kidneys website: <https://www.thinkkidneys.nhs.uk/aki/resources/primary-care>

Yours sincerely



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