

## Ascend Clinical offers a variety of adequacy panels in LabCheck.

HEMODIALYSIS	
Kt/V Jindal (Not K/DOQI Recommended	<ul> <li>Jindal calculation</li> <li>Does not require draw information</li> <li>Includes Pre BUN, Post BUN, URR and Kt/V Jindal</li> </ul>
Kt/V Natural Log, URR	<ul> <li>Daugirdas II calculation</li> <li>Requires draw information: pre-weight, post-weight, treatment time</li> <li>Includes Pre BUN, Post BUN, URR, UFR and Kt/V Natural Log</li> <li>CMS requirement for patients dialyzing 3 times per week</li> </ul>
Kt/V Natural Log, URR, nPN/ (3x/wk)	
Kt/V Standard, URR (<>3x/wk)	<ul> <li>Leypoldt calculation</li> <li>Requires draw information: pre-weight, post-weight, treatment time, number of treatments per week</li> <li>Includes Pre BUN, Post BUN, URR, UFR and Kt/V Standard</li> <li>CMS requirement for patients dialyzing 2 or 4-6 times per week</li> </ul>
Kt/V Residual	<ul> <li>Kt/V Residual calculated when Residual Urea Clearance ordered together with Kt/V Natural Log or Kt/V Standard; assesses total adequacy and is included on a patient report up to 90 days.</li> <li>Requires draw information: 24-hr urine collection time, urine volume, dry weight, height</li> <li>Includes Pre BUN, KrU, Urine Urea Nitrogen, Kt/V Residual</li> </ul>

PERITONEAL DIALYSIS		
PD Adequacy No Urine	<ul> <li>Volume of Distribution (V): Hume and Weyers for Adult; Friis-Hansen for Peds &lt;16 years</li> <li>Body Surface Area (BSA): Dubois and Dubois for Adult; Haycock for Peds &lt;16 years</li> <li>Protein Nitrogen Appearance (PNA): Bergstrom</li> <li>Requires draw information: dry weight, height, 24-hr total drain volume</li> <li>Includes Blood BUN, Blood Creatinine, Fluid Glucose, Fluid Urea Nitrogen, Fluid Creatinine, Weekly Dialysate Kt/V, Weekly Dialysate CrCl, nPNA</li> </ul>	
PD Adequacy With Urine	<ul> <li>Volume of Distribution (V): Hume and Weyers for Adult; Friis-Hansen for Peds &lt;16 years</li> <li>Body Surface Area (BSA): Dubois and Dubois for Adult; Haycock for Peds &lt;16 years</li> <li>Protein Nitrogen Appearance (PNA): Bergstrom</li> <li>Requires draw information: dry weight, height, total urine collection time, urine volume, 24-hr total drain volume</li> <li>Includes Blood BUN, Blood Creatinine, Fluid Glucose, Fluid Urea Nitrogen, Fluid Creatinine, Urine Urea Nitrogen, Urine Creatinine, Weekly Dialysate Kt/V, Weekly Residual Kt/V, Weekly Total Kt/V, Weekly Dialysate CrCl, Weekly Residual GFR, Weekly Total CrCl, Weekly Residual CrCl, and nPNA</li> </ul>	

## FORMAL UREA KINETIC MODELING (UKM)

Formal Kinetic Modeling is also available in LabCheck for hemodialysis patients dialyzing 2-3 times per week. Per KDOQI, formal kinetic modeling provides a quantitative method for developing a treatment prescription for a specific patient. Formal UKM can be used to calculate the exact treatment time required to deliver a particular hemodialysis dose at specified blood and dialysate flows with a particular dialyzer.

## RESOURCES

AJKD: <u>https://www.ajkd.org/article/S0272-6386(15)01019-7/fulltext</u> CMS: <u>https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Dialysis.html</u> KDOQI: https://www.kidney.org/sites/default/files/docs/12-50-0210 jag dcp guidelines-hd oct06 sectiona ofc.pdf