

## **EARLI Consult Template**

BASED ON THE ACUTE KIDNEY INJURY NETWORK CRITERIA, THIS PATIENT MAY HAVE DEVELOPED EARLY SIGNS OF KIDNEY INJURY. THIS RESEARCH NOTE IS GENERATED AS PART OF STUDYING THE IMPACT OF EARLY RENAL CONSULT ON SEVERE SUBSEQUENT RENAL INJURY. THE CURRENT CONSULTANT WILL LEAVE RECOMMENDATIONS FOR THE PRIMARY TEAM PERTAINING TO THE RENAL CARE OF THIS PATIENT, BUT WILL NOT BE INVOLVED IN ANY SUBSEQUENT CARE. IF THE HELP OF NEPHROLOGY IS FURTHER NEEDED, PLEASE PLACE A NEW CONSULT TO THE IN-PATIENT NEPHROLOGY CONSULT SERVICE

History of present illness:

Baseline creatinine: (date: )

Admit creatinine: (date: )

Satisfied criteria for AKI with creatinine of: on date:

Concomitant chronic illnesses and relevant past history: (medical/surgical/social):

Pertinent additional review of systems:

Review of meds:

Review of labs:

Focused physical exam: BP= , t. max= , I/O=

Gen appearance:

H&N:

CV:

Lungs:

Abdomen:

Ext/skin:

Volume status:

Other:

ASSESSMENT: (Most likely cause of AKI)

RECOMMENDATIONS-CONSIDER THE FOLLOWING:

-DIAGNOSTIC: (specific tests and how to interpret them...)

-THERAPEUTIC: (if fluids: specify rate and type, specific medication adjustments, procedures...)

-PREVENTATIVE: (specific medication caution, contrast prophylaxis...)

We will be available for questions pertaining to these recommendations. If the help of nephrology is needed subsequently, or if the patient's kidney injury worsens, do not hesitate to place a consult and call the in-patient nephrology team.