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The KDIGO Clinical Practice Guideline for Acute Kidney Injury (AKI) presents a comprehensive framework for the diagnosis, assessment, and management of individuals at risk for or suffering from AKI. It outlines the definition and classification of AKI, including the relationship with chronic kidney disease (CKD) and acute kidney disease (AKD), emphasizing the importance of early detection and intervention. The guideline is informed by extensive literature review and consensus from various healthcare stakeholders, including nephrologists and critical care specialists, to ensure evidence-based recommendations that enhance patient outcomes. We're fetching your file...Please wait a moment while we retrieve your file from its home on the internet 0 ratings0% found this document useful (0 votes)22 viewsThe document is the KDIGO Clinical Practice Guideline for Acute Kidney Injury published in the Official Journal of the International Society of Nephrology. It provides comprehensive guidelin...SaveSave KDIGO 2012 AKI Guideline English For Later0%0% found this document useful, undefined Master KDIGO 2012 AKI Guideline Kidney Health Treatment & Support Transplantation For Professionals Take Action Ways to Give About NKF 0 ratings0% found this document useful (0 votes)140 viewsThis document provides guidelines for the diagnosis, prevention and management of acute kidney injury (AKI) from the Kidney Disease: Improving Global Outcomes organization. It defines AKI ba...Al-enhanced title and descriptionSaveSave Master KDIGO-2012-AKI-Guideline For Later0%0% found this document useful, undefined Back Acute Kidney Injury (AKI) KDIGO is in the process of developing the Clinical Practice Guideline for Acute Kidney Injury (AKI) and Acute Kidney Disease (AKD). This guideline will be an update to the 2012 Clinical Practice Guideline for Acute Kidney Injury, accompanied by the conclusions from the KDIGO 2019 Controversies Conference on Acute Kidney Injury and the 2020 Consensus Conference on Harmonizing Acute and Chronic Kidney Disease Definitions and Classification. The guideline aims to provide guidance for healthcare providers managing people with AKI and AKD. Matthew James, MD, PhD (Canada), and Marlies Ostermann, MD (United Kingdom), are co-chairing the guideline update. The goal is to ensure that feedback from all stakeholders of this global guideline is duly considered before a formal systematic review of the literature is undertaken. Any ideas and suggestions on how to make this guideline as valuable to your practice as possible are greatly appreciated. The AKI/AKD Guideline is intended to include adult, pediatric, and neonatal populations, those cared for in the hospital setting, in the community, and in care facilities. The guideline is also intended to be relevant to people at high risk of AKI and AKD, including those with multimorbidity, complex healthcare needs, and chronic conditions that often accompany AKI and AKD, including CKD, liver disease, heart failure, and congenital heart disease. The guideline will support decision-making in the care of people in high-, middle-, and low-resource countries. Click to download the KDIGO AKI/AKD Guideline Update Scope of Work. DISCLAIMER: USE OF THE CLINICAL PRACTICE GUIDELINES This Clinical Practice Guideline is based upon the best information available at the time of publication. The recommendations are designed to provide information and assist decision-making. They are not intended to define a standard of care, and should not be construed as one. Neither should they be interpreted as prescribing an exclusive course of management. Variations in practice will inevitably and appropriately occur when clinicians take into account the needs of individual patients, available resources, and limitations unique to an institution or type of practice. Every health care professional making use of this Guideline is responsible for evaluating the appropriateness of applying them in the setting of any particular clinical situation. The recommendations for research contained within this document are general and do not imply a specific protocol.