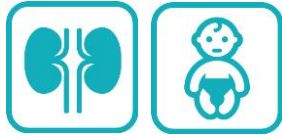


Dialyzing Wisely - Care Pathway



PEDIATRIC PATHWAY

April 2024

Purpose

The Dialyzing Wisely pediatric pathway is for clinicians in pediatric intensive care units (ICUs) to improve the delivery of acute dialysis to critically ill patients (under 18) in Alberta.

Monitor & Screen for Acute Kidney Injury (AKI)

- 1 Trend serum creatinine and urine output
- 2 Determine staging
- 3 Report results on daily rounds

AKI Recognition & Management

- AKI is a sudden decrease in kidney function.
- Early clinical recognition is key to providing appropriate management.
- Monitor serum creatinine (SCr) and urine output for early identification of an AKI.

Renal Replacement Therapy (RRT) Initiation

Considerations for RRT initiation for pediatric patients with AKI:

1. Benefits to therapy should outweigh the risks.
2. Indications for RRT should be reviewed and documented:
 - Fluid overload
 - +/- impaired oxygenation based on the Oxygenation Index or P/F ratio
 - Furosemide stress test ≥ 1 mg/kg within 12 hours with perception of inadequate clinical response
 - Metabolic acidosis
 - Hyperkalemia

[References & Resources](#)



Dialyzing Wisely is a care pathway, not an order set. Clinicians using this care pathway should, in consultation with the patient and family, use independent medical judgement in the context of individual clinical circumstances to direct care.

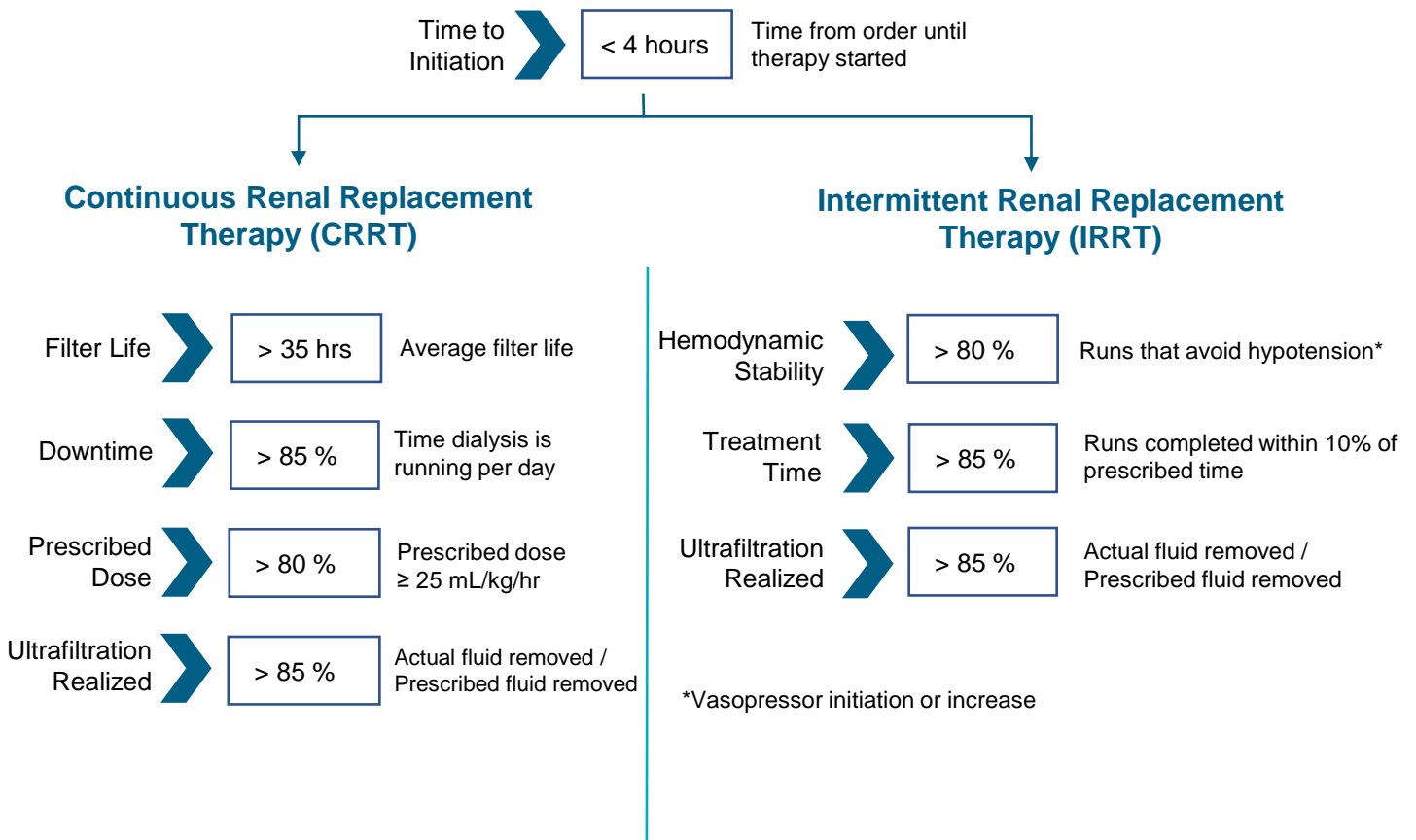


PEDIATRIC PATHWAY

Manage RRT & Monitor Key Performance Indicators (KPIs)

Consider the most appropriate mode of dialysis based on hemodynamic stability and available site resources

Includes chronic dialysis. Excludes overdose.



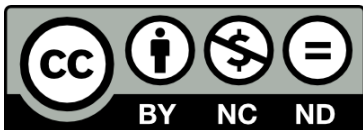
Optimize Acute Dialysis

- Anticoagulation
- Recirculation
- Alarm management
- Access

Refer to local and provincial practice guidelines for more guidance on these interventions.

For general inquiries contact: dialyzingwisely.ccsn@ahs.ca

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