Dehydration or Acute Kidney Injury

Exclusion Criteria

- Unstable vital signs: (SBP<90, HR>120 or <50, RR>24, O2 sat <91% RA)
- Severe systemic illness or sepsis
- Severe renal insufficiency:
  - CR>2 without history of renal disease
  - CR>2.5 with history of renal disease
- Severe lab abnormality (Na<125 or >155, K+<2.5 or >5.5, Bicarb <14)
- Severe rhabdomyolysis (Cr>10000)
- ESRD on dialysis
- Immuno compromised (CD4<200, transplant, hemato logic malignancy, or solid organ malignancy with chemotherapy within last 14 days)
- Requiring broad spectrum antibiotics (Vancomycin, Piperacillin/Tazobactam, Meropenem, Ceftazapime)

No

- Obtain labs
- Obtaining imaging studies if appropriate
- Start fluid hydration
- Correct electrolyte abnormalities

Meets inclusion criteria?

- Clinical picture consistent with dehydration/mild AKI
- Anticipated length of stay > 8hrs and < 24 hrs

No

Discharge

Yes

CDU admission orders

- Vital signs q 4 hrs
- Diet
- Fluid hydration
- Electrolyte replacement if needed
- Symptomatic treatment (Tylenol, Ibuprofen, Zofran)
- FBS if diabetic
- Repeat lab work/UA if appropriate

Improving/ Stable Vital Signs?

- Stable vitals
- Able to tolerate PO’s without difficulty
- Improvement in labs/UA

No

Admit for further evaluation/treatment

Yes

Discharge home with PCP follow-up

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