

# CLINICAL GUIDELINES

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<b>Topic</b> <i>(Examples: Diabetes, Asthma, COPD, Women's Health, etc.)</i>	Chronic Kidney Disease (CKD)		
<b>Guideline Source</b> <i>(Examples: ADA, USPSTF, HTW, NHLBI, etc.)</i>	<b>Source:</b> American College of Physicians (ACP) <b>Title:</b> "Screening, Monitoring, and Treatment of Stage 1 to 3 Chronic Kidney Disease: A Clinical Practice Guideline from the American College of Physicians"		
<b>Guideline Link</b>	<a href="http://annals.org/article.aspx?articleid=1757302">http://annals.org/article.aspx?articleid=1757302</a>		
<b>Guideline Original Date</b>	December 2013		
<b>Guideline Most Recent Revision Date</b>	No revision since December 2013		
<b>Quality Measures</b> <i>(for the year of QCEC review)</i>	N/A		
<b>HCC Documenting and Coding Tips</b> <i>(for the year of QCEC review)</i>	<p><u>ICD-9:</u> Chronic Kidney Disease (CKD) 585.xx            CKD Stage 1 = 585.1            CKD Stage 2 = 585.2            CKD Stage 3 = 585.3  <b>CKD Stage 4 = 585.4</b>  <b>CKD Stage 5 = 585.5</b>  <b>End Stage Renal Disease (ESRD) = 585.6</b></p> <p>If both a stage of CKD and ESRD are documented, assign only the code for <b>ESRD 585.6</b></p> <p><u>CKD and Kidney Transplant Status:</u> Patients who have undergone kidney transplant may still have some form of CKD because the kidney transplant may not fully restore kidney function. Therefore, the presence of CKD alone does not constitute a transplant complication. Assign the appropriate 585 code for the patient's stage of CKD and code V42.0. If there are complications of a kidney transplant, such as transplant failure or rejection, use code 996.81.</p> <p><u>CKD with Hypertension:</u> Assign codes from category 403 and pair with a code from category 585. Hypertensive CKD Unspec. 403.9x does not risk adjust but <b>Hypertensive CKD stage 5 or ESRD 403.91</b> does. Be sure to document/code the <b>CKD Stage 5 585.5</b> or <b>ESRD 585.6</b>.</p> <p><u>CKD with Diabetes Mellitus:</u> When reporting these conditions together, document/code <b>DM with Renal Manifestation 250.4x</b> and pair with a code from category CKD 585.x (or other renal diagnosis). Although CKD Stages 1-3 (585.1-3) no longer risk adjust, the <b>DM with Renal 250.4x</b> must be paired with a renal diagnosis to be validated.</p> <p><u>ICD-10:</u> Chronic Kidney Disease (CKD) <b>N18</b>            CKD Stage 1 = <b>N18.1</b>            CKD Stage 2 = <b>N18.2</b>            CKD Stage 3 = <b>N18.3</b>  <b>CKD Stage 4 = N18.4</b>  <b>End Stage Renal Disease (ESRD)= N18.6</b>            If both a stage of CKD and ESRD are documented, assign code <b>N18.6</b> only.</p> <p><u>CKD and Kidney Transplant Status:</u> Patients who have undergone kidney transplant may still have some form of CKD because the kidney transplant may not fully restore kidney function. Therefore, the presence of CKD alone does not constitute a transplant complication. Assign the appropriate <b>N18</b> code for the patient's stage of CKD and code <b>Z94.0</b>, kidney transplant status.</p> <p><u>CKD with Hypertension:</u> Assign codes from category <b>I12</b>, Hypertensive chronic kidney disease, when both hypertension and a condition classifiable to category <b>N18</b>, CKD, are present. The appropriate code from category <b>N18</b> should be used as a secondary code to identify the stage of CKD.            Hypertensive CKD Stage 1 through stage 4 = <b>I12.9, N18.x</b>  <b>Hypertensive CKD with CKD Stage 5 = I12.0, N18.5</b></p> <p><u>CKD with Diabetes Mellitus:</u> Assign codes from category <b>E08-E13</b> and assign code from category <b>N18</b> to identify the stage of CKD  <b>Diabetes with CKD stage 4 = E11.22 , N18.4</b></p>		
<p>Legend:</p> <p>ICD-9 Codes</p> <p>ICD-10 Codes</p> <p><b>Bolded = Risk Adjusting Code</b></p>			

**Guideline Summary**  
(Summarize guideline and updated information)

**Description:** The American College of Physicians (ACP) developed this guideline to present the evidence and provide clinical recommendations on the screening, monitoring, and treatment of adults with stage 1 to 3 chronic kidney disease.

**Background:** CKD is categorized into 5 stages that are based on disease severity defined by GFR; stages 1-3 are considered to be early-stage CKD.

CKD Stage	Definition
1	Kidney damage with GFR $\geq$ 90 ml/min/1.73 m <sup>2</sup>
2	Kidney damage with GFR of 60-89 ml/min/1.73 m <sup>2</sup>
3	GFR of 30-59 ml/min/1.73 m <sup>2</sup>

**Risk Factors for CKD:** Major: diabetes, hypertension, and cardiovascular disease. Minor: older age, obesity, family history, and African American, Native American, or Hispanic ethnicity.

This guideline grades the evidence and recommendations by using the ACP's clinical practice guideline grading system.

**Recommendations:**

1. ACP recommends against screening for chronic kidney disease in asymptomatic adults without risk factors for chronic kidney disease. (Grade: weak recommendation, low quality evidence)
2. ACP recommends against testing for proteinuria in adults with or without diabetes who are currently taking an angiotensin-converting enzyme inhibitor or an angiotensin II-receptor blocker. (Grade: weak recommendation, low quality evidence)
3. ACP recommends that clinicians select pharmacologic therapy that includes either an angiotensin-converting enzyme inhibitor (moderate-quality evidence) or an angiotensin II-receptor blocker (high-quality evidence) in patients with hypertension and stage 1 to 3 chronic kidney disease. (Grade: strong recommendation)
4. ACP recommends that clinicians choose statin therapy to manage elevated low-density lipoprotein in patients with stage 1 to 3 chronic kidney disease. (Grade: strong recommendation, moderate quality evidence)