End-Stage Renal Disease

The patient should not be seeking dialysis or renal transplant. Patients who refuse dialysis or transplant are generally appropriate for hospice services if they fit dialysis criteria.

1. Lab criteria for renal failure (both must be present):
   a. Creatine clearance of <10 cc/min (15 cc/min for diabetics)
   b. Serum creatinine > 8.0 mg/dl (> 6.0 mg/dl for diabetics)

2. Signs and syndromes associated with renal failure:

   ___uremia
   ___confusion, obtundation
   ___intractable nausea and vomiting
   ___generalized pruritis
   ___restlessness
   ___oliguria (urine output <400 cc/24 hours)
   ___intractable hyperkalemia (persistent serum potassium > 7.0 not responsive to medical management)
   ___uremic pericarditis
   ___hepatorenal syndrome
   ___intractable fluid overload

3. In hospitalized patients with Acute Renal Failure, these comorbid conditions predict early mortality:

   ___mechanical ventilation
   ___malignancy
   ___chronic lung disease
   ___advanced cardiac disease
   ___advanced liver disease
   ___sepsis
   ___immunosuppression
   ___albumin < 3.5 gm/dl
   ___cachexia
   ___platelet count < 25,000
   ___age > 75
   ___disseminated intravascular coagulation
   ___gastrointestinal bleeding