

Supplementary Appendix

This appendix has been provided by the authors to give readers additional information about their work.

Supplement to: Abboud H, Henrich WL. Stage IV chronic kidney disease. *N Engl J Med* 2010;362:56-65.

Web Table 1 Preparation of Patients with Advanced CKD for Renal Replacement Therapy

- Regular clinic visits to monitor the patient's overall condition, blood pressure and kidney function
- Strict control of blood pressure and treatment to slow progression, including ACEI or ARB
- Prevention of malnutrition/assessment and adjustment of diet
- Prevention of cardiovascular disease/treatment of hypertension, anemia, hyperlipidemia and other cardiovascular risk factors
- Routine monitoring (and treatment where indicated) for electrolyte and metabolic disturbances particularly hyperkalemia, anemia, renal osteodystrophy, metabolic acidosis, side effects of medications
- Routine monitoring for hepatitis B, hepatitis C, HIV and other chronic infections such as tuberculosis
- Immunization against pneumococcal pneumonia, hepatitis B and Influenza
- Counseling, decision on the therapeutic modality and early preparation of the patient accordingly

Modified from Reference 53.

Chronic Kidney Disease Epidemiology Collaboration Formula (CKD-EPI Formula): Cited in Reference 4

The CKD-EPI equation, expressed as a single equation, is $GFR = 141 \times \min(Scr/\kappa, 1)^\alpha \times \max(Scr/\kappa, 1)^{-1.209} \times 0.993^{Age} \times 1.018$ (if female) $_ 1.159$ (if black), where Scr is serum creatinine, κ is 0.7 for females and 0.9 for males, α is -0.329 for females and -0.411 for males, min indicates the minimum of Scr/ κ or 1, and max indicates the maximum of Scr/ κ or 1.

The CKD-EPI equation performed better than the MDRD (Modification of Diet in Renal Disease Study) equation, especially at higher GFR, with less bias and greater accuracy.