

Appendix 1: GLOSSARY OF ABBREVIATIONS

ADPKD: Autosomal dominant polycystic kidney disease

AKI: Acute kidney injury

CKD: Chronic Kidney disease

CVD: Cardiovascular disease

ESRD: End stage renal disease

ESRF: End Stage Renal Failure

FSGS: Focal segmental glomerulosclerosis

HTN: Hypertension

htTKV: Height adjusted total kidney volume

ICA: Intracranial aneurysms

MCD: Minimal Change Disease

MN: Membranous nephropathy

NS: Nephrotic syndrome

NSAID: non-steroidal anti-inflammatory drug

PKD: polycystic kidney disease

SLE: Systemic lupus erythematosus

SRNS: Steroid resistant nephrotic syndrome

TKV: total kidney volume

UTI: Urinary tract infection

Appendix 2: Patient resources

- A full range of patient resources, free to download for a range of kidney conditions from Kidney care UK

[Patient information booklets | Kidney Care UK](#)

- The National Kidney federation, the national kidney charity run by kidney patients for kidney patients, offers a helpline dedicated to kidney patients and leaflets (including a patient support pack)

[Helpline Information & Leaflets | National Kidney Federation](#)

- Kidney education, offers health information in 40 different languages

[Kidney Education Foundation](#)

Appendix 3: Renal disease: Summary of symptoms and examinations / investigations^{3, 25, 34, 46}

Renal disease	Key signs and symptoms	Assessments
Polycystic kidney disease	<ul style="list-style-type: none"> Family history of ADPKD or end-stage renal disease Family history of cerebrovascular event Hypertension Abdominal/ flank pain Palpable kidneys Haematuria (microscopic and macroscopic) Proteinuria, increased urinary albumin excretion Headaches Dysuria, suprapubic pain, fever Renal cysts 	<ul style="list-style-type: none"> History and physical examination, including blood pressure Urinalysis Renal ultrasound
Nephrotic syndrome	<ul style="list-style-type: none"> Oedema (starts in legs) and can involve entire body) and foamy urine Urine PCR>300mg/micromol diagnostic 	<ul style="list-style-type: none"> History and physical examination Proteinuria (urine PCR) random urine specimen Urinalysis with microscopy to check for cellular casts – send for urine protein electrophoresis Serological studies including auto-immune screen, protein electrophoresis, serum free light chains, syphilis serology, hepatitis B and C serology, HIV - consider genetic panel in children/young adults to investigate possible mutations Renal biopsy
Acute kidney injury	<ul style="list-style-type: none"> Nausea and vomiting, diarrhoea, or suspected dehydration (reduced urine output/changes to urine colour), confusion, fatigue or drowsiness. A rise in 26 micromol/L or greater (compared with baseline creatinine) within 48 hours OR a 50% or greater rise (more than 1.5 times the baseline) known to or presumed to have occurred within past 7 days. Check for hyperkalaemia 	<ul style="list-style-type: none"> History and physical examination <ul style="list-style-type: none"> Fluid intake/loss Pulse/blood pressure Peripheral perfusion Changes in urine output, when last passed urine Lung auscultation – crackles (fluid overload) Peripheral oedema Palpable bladder Serum creatinine value Renal function and serum potassium levels
Glomerulonephritis	<ul style="list-style-type: none"> Oedema and hypertension are signs of chronic disease. Nausea, malaise, anorexia are all part of a generalised vasculitic picture Sore throat precedes renal symptoms by 2 weeks in post-streptococcal GN - fever and abdominal pain may also present Microscopic haematuria, proteinuria 	<ul style="list-style-type: none"> History and physical examination, including blood pressure Urinalysis and renal function tests