

Acute Kidney Injury After Computed Tomography A Meta Analysis

This book is the first to cover the field of contrast media from basic sciences through to clinical practice. Textbook of Contrast Media provides the first exhaustive account of the use of contrast media in clinical practice. Edited by distinguished figures in the field, the book is divided into five main sections: history and background, X-ray contrast agents, MR contrast agents, ultrasound contrast agents, and future developments. Each chapter is fully referenced and benefits from the extensive use of high quality radiographs and illustrations.

Background and Goal of Study: Acute kidney injury (AKI) after coronary artery bypass grafting (CABG) is one of the main complication that increases morbidity and mortality. The serum creatinine which is frequently used as a marker of renal function does not reflect the status of kidney function during acute changes. The aim of this study is to assess the correlation between three urinary biomarkers [Microalbumine (MA), Neutrophil gelatinase-associated lipocalin (NGAL), Kidney injury molecule-1(KIM-1)] and AKI in CABG patients.**Materials and Methods:** All patients >18 years of age, underwent with cardiopulmonary bypass between February 2016 and July 2016 were enrolled in the prospective study. The primary outcome was AKI, defined as $\geq 25\%$ decrease in glomerular filtration rate. The GFR was calculated as creatinine clearance rates with 24-hour urine collection. The single urine samples for MA and NGAL were obtained at postoperative 2-h and for KIM-1 at 24-h.**Results and Discussion:** A total of 70 patients were included in this study. AKI was identified in 18 (25.7%) patients while other 52 patients (74.3%) were classified as non-AKI. The MA and NGAL were significantly higher in AKI patients than in non-AKI patients (median [IQR], MA: 37.87 [15.81-78.94] $\mu\text{g}/\text{ml}$, $p=0.022$; MA/Cr: 150.77 [65.91-535.08] $\mu\text{g}/\text{mg}$, $p=0.05$; uNGAL 33.35 [7.3-67.58] $\mu\text{g}/\text{mg}$, $p=0.023$; uNGAL/Cr: 81.66 [47.84-274.95] $\mu\text{g}/\text{mg}$, $p=0.023$). The 2-h NGAL /Cr values correlated with length of stay in hospital ($p=0.042$) and 2-h MA/ Cr measurements correlated with length of ICU stay ($p=0.02$). **Conclusion(s):** Single measurements of urine NGAL and MA in 2-h after CABG may be useful for predicting the occurrence of AKI while, urine KIM-1 which was measured in postoperative 24-hour was not associated with AKI.

Acute Kidney Injury (AKI) is a complex syndrome that is prevalent among hospitalized patients. In recent years, occurrence of AKI events has risen due to a growing susceptibility of fragile and elderly subjects and an increase in the use of complex procedures such as cardiovascular surgery and imaging techniques. Exposure to potentially nephrotoxic drugs, such as new chemotherapeutic agents, is also proving to be a cause of AKI. This book summarizes recent advances in various settings. A reappraisal of current definitions and staging classifications for AKI in the literature is followed by a description of new criteria for identifying patients at risk and characterizing early kidney damage by using biomarkers. Other important topics include the sequelae of AKI and AKI in special populations such as children, the elderly, and those with cancer. The effects of AKI and its consequences on healthcare expenditures are also addressed from several perspectives. AKI management requires the

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cooperation of different specialists to optimize outcomes. This book is thus a perfect tool not only for nephrologists, but for every specialist involved in the complicated endeavor of improving patient care.

Comprehensive and clinically relevant, the 3rd Edition of Critical Care Nephrology provides authoritative coverage of the latest advances in critical care procedures for patients with renal diseases or disorders. Using common guidelines and standardized approaches to critically ill patients, this multidisciplinary reference facilitates better communication among all physicians who care for critically ill patients suffering from kidney disease, electrolyte and metabolic imbalances, poisoning, severe sepsis, major organ dysfunction, and other pathological events. Offers detailed discussions of different forms of organ support, artificial organs, infections, acute illness occurring in chronic hemodialysis patients, and much more. Places a special emphasis on therapeutic interventions and treatment procedures for a hands on clinical reference tool. Presents information clearly, in a format designed for easy reference – from basic sciences to clinical syndromes to diagnostic tools. Covers special populations such as children, diabetic patients, and the elderly. An exceptional resource for nephrologists, intensivists, surgeons, or critical care physicians – anyone who treats critically ill renal patients. Shares a combined commitment to excellence lead by Drs. Claudio Ronco, Rinaldo Bellomo, John Kellum, and Zaccaria Ricci – unparalleled leaders in this field. Addresses key topics with expanded coverage of acute kidney injury, stress biomarkers, and sepsis, including the latest developments on mechanisms and management. Provides up-to-date information on extracorporeal therapies from new editor Dr. Zaccaria Ricci.

Pediatric Urology is an up-to-date, clinical reference that provides detailed descriptions of the best approaches for the functional, biological, and morphological aspects of the urinary tract before and after birth. John G. Gearhart, Richard C. Rink, and Pierre D. E. Mouriquand cover all areas of the field, including pediatric surgery, radiology, nephrology, endocrinology, biochemistry, and obstetrics. Access the latest research through new chapters on tissue engineering, acute scrotum, and more. The appealing new full-color design, streamlined approach make this an invaluable resource to pediatric urologists, pediatric surgeons, residents and fellows worldwide. Provides detailed descriptions of the best approaches for the functional, biological, and morphological aspects of the urinary tract before and after birth. Includes new chapters on tissue engineering, acute scrotum and disorders of the penis, and perinatal urological emergencies to cover the most up-to-date research in the field. Presents comprehensive coverage in a short, readable, and succinct format so that the material is easy to locate and disseminate. Provides cutting edge coverage from editors at the forefront of the specialty so you know the best available approaches. Eases reference and visual understanding through an all-new full-color design.

This issue of Radiologic Clinics of North America focuses on Cardiac CT Imaging, and is edited by Drs. Suhny Abbara and Prabhakar Rajiah. Articles will include: Calcium scoring for cardiovascular CT: how, when and why?; Coronary CTA: acquisition, interpretation and state of the evidence; TAVR and TCMVR; Cardiac masses; Nonischemic cardiomyopathies; Acute and chronic myocardial infarcts, spectrum of manifestations; Pericardial disease; Relevant Adult Congenital Heart Disease; Congenital aortic disease; Cardiac Valves (excluding TAVR); Acute coronary and acute aortic syndromes; Acquired aortic disease (excluding acute

aortic syndromes); Cardiac Trauma; Post Cardiovascular surgery findings; and more!

Chronic kidney disease (CKD) is a major global public health problem, affecting nearly one in seven adults in the United States alone. It is a disease that integrates chronic illness at several levels, and the progressive condition is associated with high rates of co-morbidity. This text provides a comprehensive, current state-of-the-art review of this field, serving as a valuable resource for primary care providers and non-nephrology clinicians that treat patients with CKD. It is comprised of 24 chapters focused on specific aspects of the disease. The first 2 chapters provide a bit of background on the disease, describing the anatomy and physiology of the kidney as well as the definition and epidemiology of the disease. The following 3 chapters discuss the detection, prevention and progression of the disease. The next 6 chapters describe the relationship of the disease with other conditions and most common co-morbidities such as diabetes and hypertension. The chapters, that follow focus on the CKD associated complications and the CKD within special populations such as the elderly and minorities as well as dietary restrictions and drug dosing. The book concludes with discussion on preparation for renal replacement therapy and preemptive organ transplantation as an alternative to dialysis in the management of the advanced CKD. Written by experts in the field, Approach to Chronic Kidney Disease is a comprehensive guide for clinicians, especially primary care providers including residents and fellows in training, who take care of chronic kidney disease patients. It is also a useful tool for researchers dealing with this challenging field.

"There is a significant shortage of critical care physicians across the US. For this reason, advanced practice providers (including advanced practice registered nurses and physician assistants) are being utilized more and more to bridge this clinical resource gap. However, APPs are trained as generalists and have limited specialization and exposure to the unique needs of perioperative critically-ill patients. Concepts in Surgical Critical Care is the only single resource designed specifically for APPs caring for this population. Featuring a user-friendly organization designed to quickly find what you're looking for, Concepts in Surgical Critical Care is the ultimate resource regarding the care of critically-ill perioperative patients. It starts with foundational critical care topics across all surgical specialties followed by the specifics within 12 - including the neurologic system, the cardiovascular system, the respiratory system, the vascular system, etc. The use of checklists, bold and italicized text, key concepts, clinical pearls, focus questions, case studies, simulations, illustrations, tables and figures to display complex topics, practice questions, chapter summaries, and suggested readings for further study aid in mastery of the subject matter"--

Part I "Serum Cystatin C (sCy C)" - Serum creatinine level does not increase in patients with acute kidney injury (AKI), until moderate to severe reduction in glomerular filtration rate (GFR) occurs. Thus its use for estimating GFR in early AKI delays detection of kidney damage and making important therapeutic decisions. Moreover, serum cystatin C is not affected by · Gender, · Age, · Race, · Muscle mass and also does not suffer from lag period for its rise in early AKI. Several healthy subjects were studied and AKI patients over a period of 2 years at one of tertiary care hospital. Serum creatinine and serum cystatin C were studied and analyzed in relevance to early AKI. It was found that 56.2% of patients of AKI group had normal levels of serum creatinine in early phase, while all patients had elevated serum cystatin C at same time. Multiple logistic regression analysis revealed cystatin C-based GFR reflecting decline in GFR with worsening AKI in better than creatinine-based GFR. An attempt has been made in this Booklet in Part I, to include evidence-based study of serum creatinine and serum cystatin C

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levels in AKI to establish its relevance in the early period of AKI and possible favorable outcome. Part II Further, in Part II I have endeavored to include the study to assess changes in Cystatin C (CyC) after 48 h post contrast media exposure, and to know whether it was a reliable indicator of acute kidney injury and the validity of a risk scoring tool for contrast-induced acute kidney injury (CI-AKI). Dr. H. K. Saboowala.

This book is the first title that focuses exclusively on kidney disease and its impact in the cardiac catheterization laboratory. The increasing prevalence of vascular risk factors such as diabetes, obesity and hypertension coupled with increased longevity has resulted in a worldwide epidemic of cardiovascular and chronic kidney disease (CKD). Never has the impact of one organ system on the other been so profound, as in the current context of cardio-renal interactions. The cross talk between the heart and kidneys is highly relevant in the field of interventional cardiology, given the increasing number of trans-catheter procedures being performed in patients with underlying kidney disease. These procedures also have a significant impact on kidney function and require thoughtful interdisciplinary planning by a cardiorenal team, to achieve optimal outcomes This book assembles the collective expertise of several international leaders in the field of interventional cardiology and nephrology to summarize this complex interface. The book is divided into seven sections to comprehensively cover the topic, including sections on best practices with reduction of contrast associated acute kidney injury, cutting edge techniques to minimize kidney risk with complex interventions, impact of transcatheter valvular procedures on kidney function and the utility of cardio-nephrology teams . Less recognized complications with high morbidity such as athero-embolic renal disease are featured prominently, to increase awareness in the interventional cardiology and nephrology communities. This book is a valuable resource for interventional and structural cardiologists, general cardiologists and nephrologists dealing with the significant overlap areas between these two specialties. It is also relevant to medical students, trainee physicians in nephrology and cardiology, advanced care practitioners and nursing personnel in both specialties . Given the major impact of kidney function on outcomes in patients undergoing cardiac procedures, this textbook serves as a focal point to integrate relevant clinical data from both specialties and help interventional cardiologists achieve optimal outcomes, especially in patients with (or at risk for) kidney disease. .

Preceded by: Clinical clerkship in inpatient medicine / Sanjay Saint. 3rd ed. c2010.

Comprehensive, concise, and readable, Textbook of Critical Care, 7th Edition, brings you fully up to date with the effective management of critically ill patients, providing the evidence-based guidance you need to overcome a full range of practice challenges. Drs. Jean-Louis Vincent, Edward Abraham, Frederick A. Moore, Patrick Kochanek, and Mitchell P. Fink are joined by other international experts who offer a multidisciplinary approach to critical care, sharing expertise in anesthesia, surgery, pulmonary medicine, and pediatrics. This highly acclaimed text offers ICU clinicians a new understanding of the pathophysiology of critical illness and new therapeutic approaches to critical care.

Consult this title on your favorite e-reader, conduct rapid searches, and adjust font sizes for optimal readability. Features a wealth of tables, boxes, algorithms, diagnostic images, and key points that clarify important concepts and streamline complex information for quick reference. coagulation, , telemedicine, extracorporeal membrane oxygenation (ECMO), and more. Offers new coverage of biomarkers, bedside ultrasound, and the management of increasingly complex critically ill patients. Provides new approaches to sepsis, acute kidney injury, and management of acute respiratory distress syndrome (ARDS), and other forms of respiratory failure.

A timely update Acute kidney injury (AKI) is a serious and as yet incompletely understood disorder in which sudden impairment of kidney function occurs secondary to one or more of a variety of underlying conditions. This disorder is very common in (elderly) ICU patients and is

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associated with very high mortality. Many of those who survive suffer from permanent kidney failure and other long-term morbidities, which may include cardiovascular disease and immune dysfunction. Epidemiologic evidence suggests that AKI is not a single disease, but a syndrome comprised of multiple, often coexisting, etiologies. Being usually part of multiorgan failure syndrome, it calls for multiple organ support therapy. The publication at hand contains sections on prerenal azotemia syndromes, dying of or with AKI, pathophysiology of sepsis-induced acute kidney injury, developments in prevention / treatment / rehabilitation, and renal support. Reporting the latest recommendations from experts, it provides valuable information for those that are interested in understanding the disorder and its treatment options.

This book is a comprehensive and richly-illustrated guide to cardiac CT, its current state, applications, and future directions. While the first edition of this text focused on what was then a novel instrument looking for application, this edition comes at a time where a wealth of guideline-driven, robust, and beneficial clinical applications have evolved that are enabled by an enormous and ever growing field of technology. Accordingly, the focus of the text has shifted from a technology-centric to a more patient-centric appraisal. While the specifications and capabilities of the CT system itself remain front and center as the basis for diagnostic success, much of the benefit derived from cardiac CT today comes from avant-garde technologies enabling enhanced visualization, quantitative imaging, and functional assessment, along with exciting deep learning, and artificial intelligence applications. Cardiac CT is no longer a mere tool for non-invasive coronary artery stenosis detection in the chest pain diagnostic algorithms; cardiac CT has proven its value for uses as diverse as personalized cardiovascular risk stratification, prediction, and management, diagnosing lesion-specific ischemia, guiding minimally invasive structural heart disease therapy, and planning cardiovascular surgery, among many others. This second edition is an authoritative guide and reference for both novices and experts in the medical imaging sciences who have an interest in cardiac CT.

This book presents up-to-date information on the clinical-pathophysiological features of acute renal injury and discusses the KDIGO diagnostic criteria, as well as novel experimental findings, including in the area of regenerative medicine. It also highlights the clinical-pathophysiological importance of AKI in clinical settings, including differential diagnoses and management of AKI. In the past, the pathology associated with sudden renal impairment was characterized as acute renal failure (ARF). However, in the 2000s, the joint efforts of specialists in fields including nephrology, intensive care medicine, and cardiovascular medicine led to the introduction of a novel concept known as acute kidney injury (AKI). As medical care progressed, patients such as high-risk elderly subjects who were not deemed to be candidates for invasive therapy came to be treated in intensive care units (ICUs). As a result, kidney injury as a subset of multiple organ failure was re-considered as AKI, especially in intensive care medicine. AKI was then proposed as a novel disease concept to emphasize the importance of early diagnosis and early intervention to improve prognosis. Presenting novel features, such as the definition of AKI, risk factors and management; biomarkers, such as neutrophil gelatinase-associated lipocalin (NGAL) and L-type fatty acid-binding protein (L-FABP); long-term outcomes of AKI; as well as renal regeneration using iPS cell, manipulation of embryonic genes, and Xenotransplanted embryonic kidney, this book is of interest to all physicians and researchers in this field around the globe.

Ultrasound imaging techniques are an indispensable complement to physical examination, which is often frustrating, if not useless, for diagnosing kidney problems. The application of ultrasound techniques in clinical routine helps clinicians to rule out, at first glance, some serious pathological conditions and to concentrate on the accurate diagnosis of the patient. Moreover, sonography can extend the spectrum of diagnostic criteria in acute kidney diseases. It makes it possible to determine morphological parameters without potentially toxic contrast media while exploring functional aspects with contrast enhanced or Doppler ultrasound techniques. This publication meets a growing demand

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for current information among physicians and nurses in the field. With a focus on the daily practice of diagnosing kidney disease, it is an important resource for both beginner and advanced users of ultrasound imaging techniques.

Through case presentations and a question and answer format, *Clinical Decisions in Nephrology, Hypertension and Renal Transplantation* provides a state of the art, updated reference for the optimal management of patients with diseases of the kidneys, and hypertension. This volume starts with the assessment of the patient, focusing on history and physical examination. Subsequently, cases depicting various clinical syndromes and/or diseases are presented, with questions centering on the appropriate diagnostic and treatment strategy. This sets the stage for a 'Socratic approach' to learning between the attending physician and the house staff or medical student. This is the only book featuring problem-oriented true to life clinical cases in this format to cover nephrology, hypertension and kidney transplantation. Written by renowned actively practicing clinicians, this unique reference is both comprehensive and concise and will be of great value to hospitalists and internists, as well as students, and interns/residents rotating in nephrology and internal medicine. Clinical practitioners, in the fields of critical care and hypertension specialists would also find this of value.

This book is the first title that focuses exclusively on kidney disease and its impact in the cardiac catheterization laboratory. The increasing prevalence of vascular risk factors such as diabetes, obesity and hypertension coupled with increased longevity has resulted in a worldwide epidemic of cardiovascular and chronic kidney disease (CKD). Never has the impact of one organ system on the other been so profound, as in the current context of cardio-renal interactions. The cross talk between the heart and kidneys is highly relevant in the field of interventional cardiology, given the increasing number of trans-catheter procedures being performed in patients with underlying kidney disease. These procedures also have a significant impact on kidney function and require thoughtful interdisciplinary planning by a cardiorenal team, to achieve optimal outcomes. This book assembles the collective expertise of several international leaders in the field of interventional cardiology and nephrology to summarize this complex interface. The book is divided into seven sections to comprehensively cover the topic, including sections on best practices with reduction of contrast associated acute kidney injury, cutting edge techniques to minimize kidney risk with complex interventions, impact of transcatheter valvular procedures on kidney function and the utility of cardio-nephrology teams. Less recognized complications with high morbidity such as athero-embolic renal disease are featured prominently, to increase awareness in the interventional cardiology and nephrology communities. This book is a valuable resource for interventional and structural cardiologists, general cardiologists and nephrologists dealing with the significant overlap areas between these two specialties. It is also relevant to medical students, trainee physicians in nephrology and cardiology, advanced care practitioners and nursing personnel in both specialties. Given the major impact of kidney function on outcomes in patients undergoing cardiac procedures, this textbook serves as a focal point to integrate relevant clinical data from both specialties and help interventional cardiologists achieve optimal outcomes, especially in patients with (or at risk for) kidney disease.

Because of the increase in serious kidney diseases, including end-stage renal disease, your role as a nephrologist, intensivist,

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surgeon, or critical care physician is quickly expanding. Well received in its 1st edition, this 2nd edition continues to provide comprehensive coverage of the latest advances in critical care procedures for the adult or pediatric patient with renal diseases or disorders. Presents a common language and standardized guidelines to help multi-disciplinary physicians caring for the critically ill communicate more effectively. A new US editor, detailed discussions of different forms of organ support, artificial organs, infections, acute illness occurring in chronic hemodialysis patients, and much more make this book an exceptional resource for anyone who treats critically ill renal patients. And, as an Expert Consult title, this meticulously updated 2nd edition comes with access to the complete contents online, fully searchable. Presents a multi-disciplinary and international approach to critical renal care for a thorough and integrated presentation of how to care for critically ill patients with renal disease or complications. Addresses the full range of renal problems, from epidemiology to monitoring and diagnostic procedures to pathophysiology of organ systems in relation to kidney failure. Provides details on different forms of organ support, including liver, lung, and cardiac therapy. Defines common guidelines in nephrology and critical care medicine for better communication among clinicians. Places a special emphasis on therapeutic interventions and treatment procedures for a hands on clinical reference tool. Features a new US editor, Dr. John Kellum, who incorporates his expertise in critical care medicine to the 2nd edition and extends the breadth of coverage with a North American perspective. Includes access to the complete fully searchable contents online for convenient referencing. Discusses new techniques in the field providing you with a comprehensive review of the experimental and clinical work being done. Features a new 2-color design and shorter, more focused chapters to help you access key facts quicker. Your purchase entitles you to access the web site until the next edition is published, or until the current edition is no longer offered for sale by Elsevier, whichever occurs first. If the next edition is published less than one year after your purchase, you will be entitled to online access for one year from your date of purchase. Elsevier reserves the right to offer a suitable replacement product (such as a downloadable or CD-ROM-based electronic version) should access to the web site be discontinued.

This book focuses on the diagnostic impact of CT scans in severe abdominal trauma and in non-traumatic acute abdomen, the two clinical entities that constitute the main reasons for referrals for this imaging technique from the intensive care unit. The concept behind it is that emergency surgeons and physicians not only need the clinical knowledge to manage the different pathological conditions, but that they must also have a full understanding of diagnostic imaging modalities. To this end, each chapter includes a description of a specific acute abdominal disorder. In addition to the clinical presentation and the diagnosis and management guidelines, there is a special focus on imaging studies with clear and concise descriptions, high-quality images and the evolution grading scale to aid interpretation. This easy-to-read book is an ideal source of practical information for acute care surgeons, radiologists and for all the members of the emergency team.

Grundlæggende lærebog om CT og MRI og disses anvendelse iforbindelse med undersøgelser af kroppens organer. Først beskrives principperne bag CT-teknik og MRI, og derefter gennemgås undersøgelser af kroppens organer systematisk. Bogen beskriver både normale og abnorme fund med tekst og billeder og giver instruktioner i, hvorledes man optimerer billedkvalitet,

-analyse, og -fortolkninger, samt undgår de mest almindelige fejlfortolkninger.

Acute kidney injury (AKI) is a serious disorder in which sudden impairment of kidney function occurs secondary to one or more of a variety of underlying conditions and exposures. It is very common in (elderly) ICU patients and associated with very high mortality. Many of those who survive suffer from permanent kidney failure and other long-term morbidities. Renowned experts from around the world have contributed to this new publication, creating a succinct yet complete review of the most controversial aspects of AKI. The topics range from epidemiology and basic science to pathophysiology and clinical issues. It is intended as a concise reference work for physicians and nurses who deal with AKI in clinical nephrology and intensive care wards on a daily basis.

The mortality from ischemic heart disease has decreased in recent years. The better understanding of risk factors associated with development of coronary artery disease has significantly contributed to this decline. Improvements in medical and interventional therapy have reduced the complications associated with acute myocardial infarction as well as revascularization. After the introduction of imaging modalities, the noninvasive characterization of regional function, perfusion and metabolism allowed for more sophisticated tissue characterization to identify reversible dysfunction with high diagnostic and prognostic accuracy. We now can legitimately claim that computed tomography angiography (CTA) of the coronary arteries is available. In the evaluation of patients with suspected coronary artery disease, many guidelines today consider CTA an alternative to stress testing. However the nuclear technique most frequently used by cardiologists is myocardial perfusion imaging (MPI). The combination of a nuclear camera with CTA allows for the attainment of coronary anatomic, cardiac function and MPI from one piece of equipment.

Assessing cardiac viability is now fairly routine with these enhancements to cardiac imaging. Traditional coronary angiography presents a variety of limitations related to image acquisition, content, interpretation, and patient safety. Barriers to such improvements include the paucity of clinical outcomes studies related to new imaging technology, the need for physician and staff member training, and the costs associated with acquiring and effectively using these advances in coronary angiography. This issue is full of important information that every cardiologist needs to now.

A different approach to contrast media, discussed primarily from the point of view of the radiologist. Comprehensive sections are devoted to iodinated contrast media and to the contrast media employed in magnetic resonance imaging and ultrasonography. The latest agents available receive due attention, as do adverse reactions. A final section considers the use of contrast media in nuclear medicine.

Designed specifically for nephrologists and trainees practicing in the ICU, Handbook of Critical Care Nephrology is a portable critical care reference with a unique and practical nephrology focus. Full-color illustrations, numerous algorithms, and intuitively arranged contents make this manual a must-have resource for nephrology in today's ICU.

Acute kidney injury (AKI) is a frequent clinical syndrome among hospitalized patients, independently associated with both short- and long-term mortality. Previous investigations attempted to identify effective interventions to prevent AKI or promote kidney function recovery in patients with AKI. Most were unsuccessful. Hence, additional studies are required in the field of AKI research. In this Special Issue, we are

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making a call to action to stimulate researchers and clinicians to submit their studies on AKI conducted in nephrology, internal medicine, critical care, and other disciplines that will provide additional knowledge and skills in the field of AKI research, ultimately to improve patient outcomes.

Kidney disease and cancer are frequent comorbidities that require specialized knowledge and expertise from both the nephrologist and the oncologist. Written by three pioneers in this growing subspecialty, Onco-Nephrology provides authoritative, definitive coverage of the mechanism and management of these two life-threatening diseases. This unique, single-volume resource covers current protocols and recommends management therapies to arrest kidney failure and allow oncologic treatments to continue and succeed. Addresses acute and chronic kidney diseases that develop from a variety of cancers. This includes direct kidney injury from the malignancy, paraneoplastic effects of the cancer, and various cancer agents used to treat the malignancy. Discusses key issues regarding kidney disease in patients with cancer, including conventional chemotherapeutic regimens and new novel therapies (targeted agents and immunotherapies) or the malignancies themselves that may promote kidney injury; patients with chronic kidney disease who acquire cancer unrelated to renal failure; and kidney transplantation, which has been shown to carry an increased risk of cancer. Contains dedicated chapters for each class of the conventional chemotherapeutic agents, targeted cancer agents, and cancer immunotherapies including the basic science, pathogenic mechanisms of injury, clinical manifestations, and treatment. Includes special chapters devoted to the individual classes of chemotherapies that relate to kidney disease for quick reference. Discusses increasingly complex problems due to more numerous and specialized anti-cancer drugs, as well as increased survival rates for both cancer and renal failure requiring long-term patient care. Covers anti-VEGF (antivascular endothelial growth factor) agents and cancer immunotherapies – treatments that are being recognized for adverse kidney effects. Utilizes a clear, logical format based on the ASN Core Curriculum for Onco-Nephrology, making this reference an excellent tool for board review, as well as a practical resource in daily practice.

Coronary artery disease (CAD) and its consequences are most important morbidity and mortality reasons in the developed and developing countries. To prevent hard end-points, early definitive diagnosis and optimum therapy play significant role. Novel advanced diagnostic tests which are biomarkers of inflammation, cell adhesion, cell activation and imaging techniques provide to get the best result in the detection and characterization of calcified or uncalcified atherosclerotic plaques. In spite of last developments in the imaging methods, coronary catheterization is still frequently performed. Following the first cardiac catheterization performed in 1844, date by date historical developments and the mechanics of cardiac catheterization techniques, risks associated with coronary angiography, and also, preventions and treatments of possible complications have been presented in this book. Other important issue is radiation exposure of patients and staff during coronary angiography and scintigraphy. Radiation dose reduction techniques, general radiation protection principles have been discussed in related chapters.

This monograph provides in-depth information on exercise-induced acute renal failure after short-term anaerobic exercise, which causes severe pain in the loin and patchy renal ischemia with no sign of rhabdomyolysis. This complete clinical reference book includes characteristics of the disease, diagnosis, treatment and prognosis, and corresponding preventive measures. It also includes important information on gene analysis and etiology.

In the past decade, CRRT has moved from a niche therapy within specific specialty centers to the standard of care for management of critically ill patients with acute renal failure. Continuous Renal Replacement Therapy provides concise, evidence-based, to-the-point bedside

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guidance about this treatment modality, offering quick reference answers to clinicians' questions about treatments and situations encountered in daily practice. Organized into sections on Theory; Practice; Special Situations; and Organizational Issues, Continuous Renal Replacement Therapy provides a complete view of CRRT theory and practice. Generous tables summarize and highlight key points, and key studies and trials are listed in each chapter.

This textbook provides a practical and board-driven resource to describe and define the emerging field of cardiorenal medicine. Covering all aspects of the topic with depth and relevance, this groundbreaking reference brings together experts at the nexus between cardiovascular and renal medicine to provide an exception reference to educate in this critical area of modern medicine. It describes how the heart and kidneys are inextricably linked via hemodynamic, neural, hormonal and cellular signaling systems and, concentrating on disease-based coverage, goes on to review emerging concepts in epidemiology, pathogenesis, screening, diagnosis and the management of cardiorenal syndromes, all extensively illustrated and containing features to support scholarship in the field. Textbook of Cardiorenal Medicine provides consistent chapter organization, clear design and engaging text to define the diagnosis, treatment, intervention and surgical aspects of the full range of conditions encountered within this area of medicine. It is therefore an essential resource to all involved in the management of cardiorenal disease.

Here's the essential information you need to know in critical care nursing — all in one concise text! Using a to-the-point, reader friendly approach, Introduction to Critical Care Nursing, 5th Edition, provides authoritative, real-world information on the important concepts of critical care nursing and the assessment and technical skills associated with the management of critically ill patients. The latest content on the technology makes it easy to learn and understand how to use the equipment you'll use in the field. Nursing care chapters are organized according to the nursing process framework, and you'll find detailed nursing care plans in every management chapter. Case studies and critical thinking questions challenge you to apply what you've learned, and user-friendly features throughout the text (updated pharmacology tables, clinical and laboratory alerts, and evidence-based practice boxes) help you bridge the gap between concepts and clinical practice. Nursing Care Plans provide nursing diagnoses, expected patient outcomes, and interventions with rationales to prepare you for clinical practice. Case Studies challenge you to apply concepts from the book to real-life patient situations to test their critical thinking skills. Streamlined and updated Pharmacology Tables detail the actions, indications, dosages and routes, and side effects of commonly used critical care drugs. Clinical Alerts promote optimal patient safety and outcomes by highlighting potential problems and concerns in the clinical setting. Laboratory Alerts discuss both common and cutting-edge tests and procedures, emphasizing the importance of laboratory test results to critical nursing care. Critical Thinking Questions in every chapter encourage you to use and reinforce the concepts presented throughout the chapter. Now full-color throughout, new, vibrant artwork and anatomical images are in true-to-life color. A new chapter on end-of-life care covers ethical and legal matters, palliative care, withholding of therapies, and communication issues — all essential concerns confronting today's critical care nurse. New features on evidence-based practice, genetics, transplantation, and geriatric considerations offer realistic, easy-to-understand information on some of the most important and rapidly changing topics in critical care today.

This book answers key questions asked by emergency clinicians faced with complex gastrointestinal and abdominal pain presentations. Instead of a traditional format that includes epidemiology, pathophysiology, diagnosis, and treatment options, this book takes an approach that mirrors the way clinicians interact with patients – by asking and answering specific clinical care questions. The book is organized into sections by presentation – gastrointestinal bleeding, for example – each of which contains chapters on specific questions, such as “What is

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the best clinical risk score for low risk GIB patients?” Each clinical question comes with a detailed, evidence-based response and a summary that gives best practices, recommendations, and references. Additionally, at the end of each section is a chapter titled “Expert Corner,” which asks the same clinical questions to a surgical or gastrointestinal specialist and includes key pearls these experts have for emergency medicine practitioners. *Gastrointestinal Emergencies: Evidence-Based Answers to Key Clinical Questions* is an essential guide for emergency medicine physicians, residents, and medical students who want to review and improve their care of acute gastrointestinal emergencies.

This issue of *Radiologic Clinics of North America* focuses on Imaging the Hospitalized Patient, and is edited by Drs. Travis S. Henry and Vincent M. Mellnick. Articles will include: Imaging of bowel wall thickening in the hospitalized patient; Imaging of acute hepatobiliary dysfunction; Imaging of GI tract perforation; Imaging of abdominal postoperative complications; Imaging of acute renal failure in the hospital setting; Imaging of diffuse lung disease in the ICU patient; Perioperative complications of cardiothoracic surgery; Approach to abnormal chest CT contrast enhancement in the hospitalized patient; Imaging of the misplaced venous catheter; Altered mental status in the hospitalized patient; Neuroimaging in the ICU patient: Pearls and pitfalls; Imaging of cardiovascular support; and more!

This comprehensive guide covers the causes, characteristics, and presentations of acute kidney injury (AKI), as well as prevention and treatment. The first part of the book features chapters on the epidemiology and diagnosis of AKI. This is followed by sections on pathophysiology, clinical syndromes and patient management. Authored by leading clinicians, epidemiologists, basic scientists, and clinical trialists, this book captures the latest evidence and best practices for treating patients with AKI.

Acute Kidney Injury and Regenerative Medicine Springer Nature

This comprehensive book provides practical guidance on the care of the critical patient in the emergency department. It focuses on the ED physician or provider working in a community hospital where, absent the consulting specialists found in a large academic center, the provider must evaluate and stabilize critically ill and injured patients alone. Structured in an easily accessible format, chapters present fundamental information in tables, bullet points, and flow diagrams. Emergency medicine scenarios covered across 38 chapters include acute respiratory failure, spinal cord injuries, seizures and status epilepticus, care of the newborn, and end-of-life care. Written by experts in the field, *Emergency Department Critical Care* is an essential resource for practicing emergency physicians and trainees, internists and family physicians, advance practice nurses, and physician's assistants who provide care in emergency departments and urgent care centers. Based on the most current evidence and best practices, *Perioperative Medicine: Managing for Outcome, 2nd Edition*, is an easy-to-follow, authoritative guide to achieving optimal outcomes in perioperative care. Written and edited by recognized authorities in anesthesiology and surgical critical care, this fully updated edition helps you think critically about complex, long-term issues surrounding the care of the surgical patient, providing decision trees that define strategies to enhance the medical outcome of care. Focuses on what anesthesiologists, surgeons, and intensivists need to know in order to improve outcomes through evidence- and outcome-based approaches. Provides practical guidance on potential risks to all major organ systems, the etiology of particular organ dysfunctions, preoperative and intraoperative risk factors, and perioperative protection strategies to minimize potential complications. Features a consistent chapter format - with even more color-coded algorithms, summary tables, and boxes – that enables you to quickly explore and determine the best management approaches. Includes six all-new chapters: Perioperative Fluid Management; Delirium and POCD; Role of Palliative Care/ICU; Value-Based Care: The UK Model; CFO Perspective on Value; Hospital to Home (Perioperative Transitions of Care) Discusses timely topics such as quality

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improvement, pay-for-performance, preexisting disease and comorbid conditions in anesthesiology, and the team-based model of care. Features two new editors, surgeon Clifford Ko, MD, and Perioperative Summit leader, Michael (Monty) Mythen, MD.

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