

East Jefferson General Hospital



Acute Tubular Necrosis (ATN)

June 2020

It is estimated that one third of AKI in hospitalized patients is attributed to ATN
ATN is frequently under documented and reported

Causes may include:

- Prolonged hypotension and/or shock
- Sepsis
- Hypovolemia
- Rhabdomyolysis
- Exposure to nephrotoxins such as antimicrobial medications, contrast dye.

Consider ATN when:

- Acute kidney injury last for more than 3-4 days after fluid resuscitation.

Query recommended when AKI >3 days

- Urinalysis findings:
 - Significant proteinuria
 - Muddy brown casts or epithelial cells
 - Fractional excretion of Sodium (FENa) > 2%
 - Urine sodium > 40

Documentation Considerations:

ATN may be reported as an ICD-10 code when documented as possible, probable or suspected in the discharge summary when it has been:

- Treated
- Monitored and/or
- Evaluated

Ex: Acute renal failure *secondary to probable* ATN

Impact on severity of illness:

Azotemia, dehydration	No impact
Acute Renal Failure	Moderate impact
Acute Kidney Failure due to ATN	Maximum impact

Reminder: Please remember to check your Cerner Message Center daily for any queries, and please contact any CDI specialist if you have documentation questions or concerns.



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