

NAME OF THE HOSPITAL: _____

2. Nephrotic Syndrome 4 days stay: Renal Biopsy M8T2.3

1. Name of the Procedure: Nephrotic Syndrome 4 days stay

2. Select the Indication from the drop down of various indications provided under this head:

Renal Biopsy
Complication due to nephrotic Syndrome

3. Does the patient presented with swelling of feet and face: Yes/No

4. If the answer to question 3 is Yes then is the patient having proteinuria more than 3+ demonstrated on dipstick: Yes/No (Upload Report)

5. If the answer to question 4 is Yes, then perform following investigations: Haemogram, Urine RE/ME, 24 hour urine protein estimation, serum urea, serum creatinine, serum albumin, lipid profile and USG KUB: Yes/No (Upload Investigation Reports)

6. If the answer to question 5 is Yes and if the age is more than 13 years, then is the 24 hour urine protein more than 3.5 gms (a lower cut-off can be taken if patient has serum albumin < 3.5gm/L) If the age is less than 13 years, then is the urine protein 50mg/kg/day or 40mg/m²/hr: Yes/No

7. If the answer to question 6 is yes, does the patient has normal size kidneys and normal coagulation parameters (Platelet count/ PT/PTTK): Yes/No (Upload reports)

For eligibility for renal biopsy in case of Nephrotic Syndrome the answer to question 7 should be Yes

I hereby declare that the above furnished information is true to the best of my knowledge.

Treating Doctor Signature with Stamp

NAME OF THE HOSPITAL: _____

3. Nephrotic Syndrome 4 days stay: Complication due to nephrotic Syndrome M8T2.3

1. Name of the Procedure: Nephrotic Syndrome 4 days stay
2. Select the Indication from the drop down of various indications provided under this head:

Renal Biopsy
Complication due to nephrotic Syndrome

3. Does the patient presented with swelling of feet and face: Yes/No
4. If the answer to question 3 is Yes then is the patient having
 - a. Proteinuria more than 3+ demonstrated on Urine RE/ME (Upload Urine RE/ME report)
AND/OR
 - b. 24 hours urinary protein more than 3.5 gm/24 hrs (a lower cut-off can be taken if patient has serum albumin < 3.5gm/L): Yes/No (Upload 24 hours urinary protein levels)
[If the age is less than 13 years, then is the urine protein 50mg/kg/day or 40mg/m2/hr: Yes/No]
5. If the answer to question 4a AND/OR 4b is Yes, then does the patient has generalized edema, oliguria, hyperlipidemia, severe hypoalbuminemia or asymmetric limb swelling or any other thrombotic complications or infections or raised BUN/Scr: Yes/No (Upload the report)

For eligibility for Nephrotic Syndrome 4 days stay: Complication due to nephrotic syndrome the answer to question 5 should be Yes.

I hereby declare that the above furnished information is true to the best of my knowledge.

Treating Doctor Signature with Stamp
