

[Date]

To: Dr. [Primary Care Physician Full Name]

[Primary Care Physician Contact Information]

RE: [Patient Full Name and DOB]

Dear Doctor [Primary Care Physician Last Name],

Thank you for asking me to assist in the care of this patient, who I recently saw in my office for chronic kidney disease.

**Our patient's estimated glomerular filtration rate (eGFR) is now <20ml/min/1.72m<sup>2</sup>. I have started to discuss kidney replacement therapy (KRT) options during our office visits. I cannot be certain if or when our patient may need KRT.** However, I think this is the right time to begin thinking about these possible options, as they may be indicated in the future:

- |   |  |
|---|--|
| <input type="checkbox"/> In-center hemodialysis | <input type="checkbox"/> Kidney transplant   |
| <input type="checkbox"/> Home hemodialysis      | <input type="checkbox"/> Continued medical management with no dialysis or transplant |
| <input type="checkbox"/> Peritoneal dialysis    |  |

As our patient thinks about options for KRT he or she may choose, I will initiate the appropriate work up and necessary referrals. I also usually manage the following aspects of care marked below, but if you would like to take a more primary role, please let me know:

- |  |   |
|--|---|
| <input type="checkbox"/> Blood pressure management | <input type="checkbox"/> Electrolyte and acid/base management |
| <input type="checkbox"/> Lipid management          | <input type="checkbox"/> Calcium and phosphate management     |
| <input type="checkbox"/> Anemia management         | <input type="checkbox"/> Hepatitis B vaccination              |
|  | <input type="checkbox"/> Uric acid / gout management          |

Here are some other goals of care we can both strive for to help preserve our patient's kidney function as much as possible and prepare for the prospect of future KRT:

- Avoiding nephrotoxic agents (i.e., NSAIDs, Cox-2 Inhibitors, Intravenous contrast dyes, aminoglycosides)
- Minimizing or avoiding procedures, including blood draws, on the patient's non-dominant arm to preserve veins for possible future vascular access. Blood draws on the dorsum of the hands are allowed.

I have enclosed a copy of my most recent clinic note. Please do not hesitate to contact me if you have any questions or concerns. Also, if you want more information about current practice guidelines for managing chronic kidney disease, the National Kidney Disease Education Program (NKDEP) website is an excellent resource among others for patients and professionals (web address: <http://nkdep.nih.gov/identify-manage.shtml>).

I look forward to continuing working with you in the care of our mutual patient.

Sincerely,

Dr. [Nephrologist Full Name]

**Additional Notes:**