**Supplementary Table 1: Definitions of Acute Kidney Injury, Chronic Kidney Disease and Acute Kidney Disease**

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| **Acute Kidney Injury** | **Functional Criteria** | **Structural Criteria** |
| Increase in sCr by 50% within 7 days, OR increase in sCr by 0.3 mg/dl (26.5 µmol/l) within 2 days, OR oliguria | No criteria |
| **Chronic Kidney Disease** | GFR <60 ml/min per 1.73 m² for >3 months | Kidney damage for >3 months |
| **Acute Kidney Disease** | AKI, OR GFR <60ml/min per 1.73m² for <3 months, OR decrease in GFR by ≥35% or increase in sCr by >50% for <3 months | Kidney damage for <3 months |
| **No Known Disease** | GFR ≥60ml/min per 1.73m² stable sCr | No damage |

GFR assessed from measured or estimated GFR. Estimated GFR does not reflect measured GFR in AKI as accurately as in CKD. Kidney damage assessed by pathology, urine or blood markers, imaging, and—for CKD—presence of a kidney transplant. NKD indicates no functional or structural criteria according to the definitions for AKI, AKD, or CKD. Clinical judgment is required for individual patient decision-making regarding the extent of evaluation that is necessary to assess kidney function and structure.

AKD, acute kidney diseases and disorders; AKI, acute kidney injury; CKD, chronic kidney disease; GFR, glomerular filtration rate; NKD, no known kidney disease; SCr, serum creatinine.

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