## SIGNIFICANCE STATEMENT

Because postoperative AKI (PO-AKI) is associated with increased risks of death and persistent renal failure, an externally validated risk index is needed to identify at-risk patients before noncardiac surgery. In this retrospective cohort study of patients who underwent noncardiac surgery at two Korean tertiary hospitals, researchers developed the Simple Postoperative AKI Risk (SPARK) index (on the basis of the sum of risk scores for age, sex, baseline eGFR, albuminuria, and seven other variables). They also identified cut-off points in the index to define four risk classes, and demonstrated in a validation cohort that these classes fairly reflected risk of PO-AKIrelated outcomes. Although further validation is needed for generalized use, clinicians may consider using the index before noncardiac surgery to stratify patients' PO-AKI risks.