## **Adverse Drug Event Adjudication Form: Kidney Insufficiency**

1. Subject Number:				
2. Date event/symptom/abnormal lab fir	est noted:			
3. Describe symptoms noted at time AD	E reported (fever,	etc):		
4. Serum creatinine levels:				
	CRE (mg/dL)	Date		
Baseline (from CIRT EDC Lab)				
Maximum				
Recovery (when discharge)				
Follow up (from CIRT EDC Lab)				
<ul><li>5. Was imaging performed at or around</li><li>5a. If yes, what is the result:</li></ul>	the time of the AD	DE:	☐ Yes ☐ Normal ☐ A	□ No bnormal
6. Pathology report:			☐ Yes	□ No
6a. If yes, what is the result:			_ 100	_ 113
ou. If yes, what is the result.				
7. Dialysis:			☐ Yes	□ No
8. Evidence of recovery:	☐ Full recovery	☐ Partial recovery	☐ No available L	ab data
9. Presume cause of acute kidney injury	·:			
,				
No Likelihood codes and			_	
Severity codes and definitions for	er Kidney insuffici	iency related ADEs	(KDIGO guideline	<u>e)*</u>
☐ Mild (any el	evation from basel	ine <b>-1.9 times</b> baseli	ne of serum creatin	ine)
☐ Moderate (2.	<b>0-2.9 times</b> baselin	ne of serum creatinin	e)	
☐ Severe (≥ 3 ti	imes baseline of se	rum creatinine )		

<sup>\*</sup>Kidney Disease: Improving Global Outcomes (KDIGO). Acute Kidney Injury Work Group. KDIGO clinical practice guidelines for acute kidney injury. Kidney Int Suppl 2012; 2:1.