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Dept/Site : All		Doc Ref: EWC-D-002	Author: Ginny Marley
Revision: 1	Issue Date: 07/10/22	Authorised by: Martyn Hammond	Review interval: 1 year

Estimated GFR (eGFR)

In line with the recommendations of the National Service Framework (NSF) for Renal Services, Clinical Biochemistry reports 'estimated GFR.' The calculation is based on the serum creatinine, age, gender, and ethnicity of the patient.

The Internationally Agreed Classification of Chronic Kidney Disease (CKD)

Stage	Description	GFR (ml/min/1.73 m ²)	Population prevalence
1	Kidney damage with normal or increased GFR*	> 90	3.3%
2	Kidney damage with mildly decreased GFR*	60 - 89	3.0%
3	Moderately decreased GFR	30 - 59	4.3%
4	Severely reduced GFR	15 - 29	0.2%
5	Kidney failure (established renal failure)+	< 15	0.2%

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*The diagnosis of Stage 1 and 2 CKD requires the presence of kidney damage for ≥ 3 months, manifest by pathological abnormalities of the kidney, or abnormalities in the composition of urine such as haematuria or proteinuria, or abnormalities in imaging tests.

It is recommended that proteinuria be determined as protein:creatinine ratio or albumin:creatinine ratio (NICE recommendation). These tests require a random sample of urine in a plain (white top) universal container.

+ In the NSF for Renal Services, the term 'kidney failure' in the National Kidney Foundation Classification has been replaced by 'established renal failure' (ERF), defined as 'chronic kidney disease which has progressed so far that renal replacement therapy is needed to maintain life'.