The Australian Creatinine Consensus Working Group 2005 recommends that an estimated GFR be calculated with every serum/plasma creatinine test performed on patients 18 years or older to detect asymptomatic renal disease. The eGFR value is calculated by the CKD-EPI equation. For further information, see: http://www.kidney.org.au.

### eGFR result ≥ 60 mL/min/1.73 m²

**Stage 1:** Normal or increased GFR
- Further investigation for CKD may be indicated in those at increased risk due to hypertension, smoking, diabetes, or family history of kidney disease.
- Aboriginal and Torres Strait Islander people: assessment of proteinuria, urinalysis, blood pressure, cardiovascular risk reduction.

### eGFR result 30–60 mL/min/1.73 m²

**Stage 2:** Mildly reduced GFR
- Monitor eGFR progression every 3 months.
- Treat kidney and cardiovascular risks: blood pressure, cholesterol, blood sugar, smoking, and obesity.
- Antiproteinuria drugs: Angiotensin converting enzyme inhibitors and/or angiotensin receptor blockers, if appropriate.
- Avoid nephrotoxic drugs.
- Address anaemia, acidosis, and hyperparathyroidism.
- Referral to a nephrologist is often not required.

### eGFR result 15–30 mL/min/1.73 m²

**Stage 3:** Moderately reduced GFR, moderate kidney failure
- Treatment as above, plus referral to a nephrologist is usually required for preparation for dialysis (e.g. access to surgery, education) or transplant.

### eGFR result < 15 mL/min/1.73 m²

**Stage 4:** Severely decreased GFR, severe kidney failure
- Treatment as above, plus referral to a nephrologist.

### Limitations of eGFR

The eGFR is known to be unreliable and/or misleading for:
- Patients under 18 years of age.
- Rapidly changing renal function or patients already on dialysis.
- Exceptional dietary intake (e.g. vegan, creatine supplements).
- Extremes of body size.
- Variations in skeletal muscle (e.g. paraplegia, amputees).
- Severe liver disease.

Furthermore, the CKD-EPI eGFR has not been validated in pregnancy or in the following racial groups:
- Aboriginal or Torres Strait Islander.
- Asian (including Japanese, Chinese, or Vietnamese).
- Maori or Pacific Islander.

The CKD-EPI eGFR is not recommended for drug-dose calculations; the Cockcroft-Gault equation should continue to be used for this purpose (supply the patient’s weight in kilograms and request a GFR calculated by Cockcroft-Gault.)