Kidney Health®
Australia

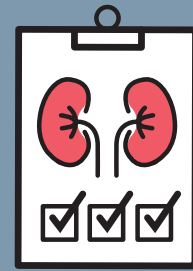# How to...
Kidney Health Check with MBS

This 'How to...' guide is designed to help you detect chronic kidney disease in your practice, highlighting the opportunities to claim MBS item numbers at various points throughout the Kidney Health Check process.

1 Who should have a Kidney Health Check?

2 What is a Kidney Health Check?

3 Additional investigations

4 Next steps

1 in 10 adult Australians have signs of CKD, only **10%** of these people know they have it!

People can lose up to **90%** of their kidney function before experiencing any symptoms. A Kidney Health Check is recommended best practice for early detection of kidney disease.

1   Who should have a Kidney Health Check?

Diabetes   **Established cardiovascular disease**   **Hypertension**   **Current or former smoker**   **Obesity (body mass index) >30 kg/m²**

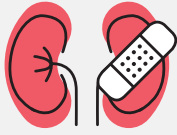721 & review 729   *

723 & review 731   *

10997

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701, 703, 705, 707, 715

History of an acute kidney injury   **Family history of kidney failure**   **Over 60 years of age**   **First Nations Australians** (18+)

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701, 703, 705, 707, 715

Key:

- **GPMP** (* if complications exist)
- **TCA** (* if complications exist)
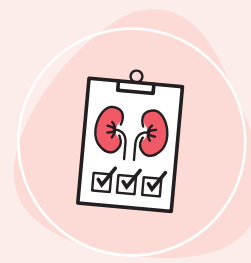- **Nurse attendance** (only eligible if person has existing GPMP item 721 for any chronic condition)
- **Heart Health Check**
- **Health Assessments**

You can also complete a Kidney Health Check in a normal consult. There are no MBS restrictions on the frequency of Urine ACR testing in people at risk of CKD.

2   What is a Kidney Health Check?

Blood Pressure Check
(Maintain below BP goals)
Record result in person's notes

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Urine ACR Test
(Albumin/Creatinine Ratio (ACR)
to check for albuminuria)

+

Blood Test
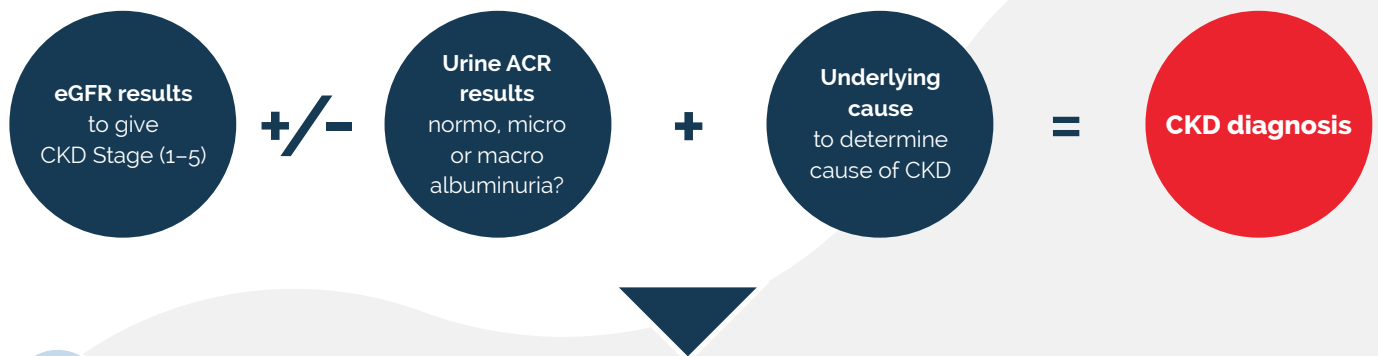(eGFR calculated from
serum creatinine)

3   Additional investigations

Appropriate recording of CKD in the patient record should include the eGFR stage, albuminuria level and underlying cause. After confirming a diagnosis of CKD there are further investigations that are recommended to help determine the underlying pathology and other comorbidities.

These investigations may include:

- **Blood tests**: Full blood count (FBC); electrolytes, urea and creatinine (EUC); fasting lipids; fasting glucose or HbA1c, erythrocyte sedimentation rate, C-reactive protein.

- **Urine microscopy** for dysmorphic red cells, red cell casts or crystals, infection.

- **Renal ultrasound**.

eGFR results to give CKD Stage (1–5)

+/−

Urine ACR results normo, micro or macro albuminuria?

+

Underlying cause to determine cause of CKD

=

CKD diagnosis

4   Next steps

- Once CKD diagnosis is confirmed, code CKD stage, ACR, and underlying conditions in practice software.

- A person newly diagnosed with CKD needs timely information about CKD.
  Connect them with **Kidney Health Australia** - refer via **1800 454 363**.

- Ensure the person understands their CKD diagnosis, including the need for regular monitoring and review.

- People should have a **Kidney Health Check** every 1-2 years if they are at increased risk.
  Add person to a register and recall for a Kidney Health Check.

Use practice software to assist in identifying and detecting people with CKD

Resources
and information

Systematically recall patients who need a Kidney Health Check

Promote awareness of Kidney Health Checks

Health Professional Hub

- Practice Tool Kit
- Sample practice invitation letter
- Risk assessment cards
- Risk assessment posters
- CKD education modules
- Scan to sign up

SCAN ME

kidney.org.au/ckdhandbook

mbsonline.gov.au/internet/ mbsonline/publishing.nsf/ Content/Home

kidney.org.au/resources

Kidney Helpline
1800 454 363
kidney.helpline@kidney.org.au

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Connect with us:
Freecall 1800 454 363
kidney.org.au