Tab. 1 Study characteristics of included studies

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
F.I. Albeladi, et al. 2017 [1]	*General ICU*	- Septic shock n=34 - cardiogenic shock n=20 - postoperative hypotension n=16 - trauma n=5	75 - AKI 21 - no AKI 54	17	N/A	50.7	51.6 (18-89)	**APACHE II** 24.6 (10-47) **SOFA** 9.8 (4-16)	- AKI 156.6 - no AKI 99.7 [µmol/L]	RIFLE - normal kidney function 33.3% - Risk 38.7% - Injury 24.0% - Failure 4.0% - Loss 0% - End-stage renal disease 0%	- ICU 21.3% - Hospital 53.3%
J. L. Alge, et al. 2013 [2]	*Cardiac surgery*	Patients after cardiac surgery	97	AKIN stage 1 n=0 AKIN stage 2 n=0 AKIN stage 3 n=9 (47%)	10 days	AKIN stage 1 n=42(71%) AKIN stage 2 n=14 (74%) AKIN stage 3 n=13 (68%)	AKIN stage 1 65.8±10,8 AKIN stage 2 64,5±10,0 AKIN stage 3 68,5±11,9	N/A	AKIN stage 1 1.7±0.4 AKIN stage 2 2.0±0.7 AKIN stage 3 2.5±0.8	AKIN stage 1 n=59 AKIN stage 2 n=19 AKIN stage 3 n=19	AKIN stage 2 n=2 (11%) AKIN stage 3 n=6 (32%)
S. M. Bagshaw, et al. 2010 [3]	*ICU* Patients with AKI and expected stay in ICU of ≥24h	AKI and - sepsis (cases; n=43) - no sepsis (controls; n=40)	83	n=13 (15,6%)	5 days	total 60.2% - sepsis 46% - no sepsis 54%	total 64.4 (±16.6) - sepsis 67.9 (±16.3) -no sepsis 60.6 (±16.3)	**APACHE II** - total 21.4 (±7.6) - sepsis 23.5 (±5.4) - no sepsis 19.2 (±8.9) **SAPS II** - sepsis 47.6 (±10.8) - no sepsis 35.4 (±18.3) **SOFA** - sepsis 8.2 (±3.1) - no sepsis 6.3 (±3.4)	- sepsis 142 (94-191) [µmol/L] - no sepsis 102 (84-136) [µmol/L]	**RIFLE** - RISK (%) -- sepsis 60.5 -- no sepsis 70 - INJURY (%) -- sepsis 23.3 -- no sepsis 17.5 - FAILURE (%) -- sepsis 16.3 -- no sepsis12.5	Hospital death (%) - sepsis 44.2 - no sepsis 15.0

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K. Cemil, et al. 2014 [4]	*Emergency Department*	Patients with uremic symptoms, divided into 2 groups: Group 1 (indications for emergency dialysis) Group 2 (no indic. for emerg. dialysis)	total: n=60 Group 1 n=30 Group 2 n=30	n=30 (Group 1)	N/A	Group 1 53.3% Group 2 0.4%	Group 1 68.29±16.9 Group 2 66.47±14.2	N/A	Group 1 7.37±5.6 Group 2 4.04±2.6	N/A	N/A
W. Chun, et al. 2017 [5]	*Patients with burn injuries*	Patients with > 20% TBSA burned	76 - Survivors n=54 - Non survivors n=22	- Survivors n=1 (1.9%) - Non survivors n=19 (86.4%)	N/A	- Survivors 87.0% - Non survivors 86.4%	- Survivors 46±13 - Non survivors 54±15	N/A	N/A	N/A	28.9%
J. M. Constantin, et al. 2010 [6]	*ICU*	patients admitted for medical/surgical reasons - total 1.44 - group 1 (NGAL <155 ng/mL) 1.39 - group 2 (NGAL > 155 ng/mL) 1.5	total 88 - group 1 n=43 - group 2 n=45	total n=7 (8%) - group 1 n=0 - group 2 n=7 (15%)	'during ICU stay'	N/A	57(±16)	**SAPS II** - total 45±17 - group 1 39±14 - group 2 50±19 **SOFA** - total 7±3 - group 1 5±3 group 2 8±4	RIFLE 0-0: 0.83 ± 0.34; RIFLE 0-1: 0.81 ± 0.33; RIFLE 1-1: 3.6 ± 2.36; RIFLE 1-0: 1.36 ± 0.4;	RIFLE 0-0: 36 RIFLE 0-1: 20 RIFLE 1-1: 22 RIFLE 1-0: 10	Mortality in ICU - total 19% - group 1 9% - group 2 28%

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D. N. Cruz, et al. 2009 [7]	*ICU*	*total* - medical 54.6% - elective surgery 8.3% - emergency surgery 37.1% *no AKI* - medical 50.6% - elective surgery 8.3% - emergency surgery 41.1% *AKI* - medical 59.4% - elective surgery 8.3% - emergency surgery 32.3%	total n=301 - no AKI n=168 - AKI n=133	n=15 (5%)	during ICU stay	total 68.8% - no AKI 67.3% - AKI 70.7%	total 64 (45-74) - no AKI 58 (37-70.5) - AKI 69 (61-76.5)	**SAPS II** - total 41±15 - no AKI 38±15 - AKI 45±14 **APACHE II** - total 18±7 - no AKI 16±7 - AKI 20±7 **SOFA** - total 5 (5-7) - no AKI 5 (4-6) - AKI 5 (5-8)	total 1.0 (0.8-1.4) - no AKI 0.9 (0.8-1.1) - AKI 1.3 (1.0-2.0)	RIFLE - Risk 30.6% - Injury 5.6% - Failure 8.0%	ICU mortality - total 17.3% - no AKI 8.9% - AKI 27.8%
H.R. de Geus, et al. 2011 [8]	*ICU*	700 consecutive general ICU patients. Diagnostic group: - Postoperativ 30,4% - Medical 21,9% - Neurologic 15,1% - Neurotrauma 4,8% - Multitrauma 5,9% - LTX 4,6% - Sepsis 6,8% - CPR 4,3% - Hemorrhagic shock 3% - MOF 3,3%	632 -Non-AKI (n=461) -RIFLE R (n=67) -RIFLE I (n=48) -RIFLE F (n=56)	RIFLE R: n=28	7 days	-Non-AKI 57% -RIFLE R 69% -RIFLE I 60% -RIFLE F 54%	-Non-AKI 58 (43,68) -RIFLE R 59 (45,70) -RIFLE I 61.5 (53,75) -RIFLE F 62 (50,68)	**APACHE II:** -Non-AKI 16 (13,22) -RIFLE R 19 (15,28) -RIFLE I 24 (20,29) -RIFLE F 25 (22,28) **SOFA score:** -Non-AKI 4 (2,6) -RIFLE R 7 (4,9) -RIFLE I 8 (6,11) -RIFLE F 11 (8,13)	-Non-AKI 58 0.75 (0.61,0.91) -RIFLE R 1.10 (0.82,1.39) -RIFLE I 1.30 (0.82,1.64) -RIFLE F 2.09 (1.31,2.86)	-Non-AKI (n=461) -RIFLE R (n=67) -RIFLE I (n=48) -RIFLE F (n=56)	**ICU mortality:** -Non-AKI 8% -RIFLE R 15% -RIFLE I 19% -RIFLE F 46% **Hospital mortality:** -Non-AKI 11% -RIFLE R 30% -RIFLE I 33% -RIFLE F 54%

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H. Dihazi, et al. 2016 [9]	*medical/anaesthesiological ICU*	medical (myocardial infarction, sepsis, pneumonia…) and anaesthesiological (trauma…) patients	120 - dialysis 52 - non-dialysis 68	52	N/A	- dialysis 65 - non-dialysis 62	- dialysis 68.2 ± 2.1 - non-dialysis 70.3 ± 1.5	**SAPS-II** **- dialysis 34 (9-72)** **- non-dialysis 28 (6-59)**	- dialysis 2.9 ±0.2 - non-dialysis 2.1 ± 0.1	**AKIN** - dialysis -- stage 1 n=0 -- stage 2 n= 0 -- stage 3 n=52 - non-dialysis -- stage 1 n=39 -- stage 2 n= 20 -- stage 3 n=9	**N/A**
M. Drey, et al. 2015 [10]	*ICU*	Patients with severe sepsis/septic shock presenting to an internal ICU	61	N/A	N/A	71%	67 (26-88)	APACHE II 24.3±7.8	2.0±1.4	N/A	N/A
J. Du, et al. 2013 [11]	*cardiac surgery patients*	cardiac surgery patients divided into 2 groups: - developed AKI after cardiac surgery [AKI-group] - not developed AKI [no AKI-group]	total 120 - no AKI 40 -AKI progressed -- no 41 -- yes 39	- no AKI 0 -AKI progressed -- no 0 -- yes n=6 (15%)	N/A	- no AKI 75% -AKI progressed -- no 76% -- yes 59%	- no AKI 59.9±10.1 -AKI progressed -- no 59.2±13.8 -- yes 61.2±13.3	N/A	- no AKI 1.1±0.3 -AKI progressed -- no 1.5±0.3 -- yes 1.6±0.4	BM measured @ AKIN Stage 1	30 day in-hospital mortality - no AKI 0 - AKI progressed -- no 0 -- yes n=7 (18%)
F. Dusse, et al. 2016 [12]	*cardiac surgery (TAVI)*	Patients with severe symptomatic aortic stenosis who underwent transapical/transaortic TAVI	total n=40 - KDIGO 2/3 n=8 - KDIGO 0/1 n=32	n=7	72 hours	- KDIGO 2/3 37.5% - KDIGO 0/1 40.6%	- KDIGO 2/3 81.4±4.2 - KDIGO 0/1 80.7±5.9	SAPS: - KDIGO 2/3 33.8±9.7 - KDIGO 0/1 27.0±6.7	- KDIGO 2/3 1.18±0.26 - KDIGO 0/1 1.12±0.24	KDIGO 0 n=25 KDIGO 1 n=7 KDIGO 2 n=2 KDIGO 3 n=6	30 day mortality (all cause) - KDIGO 2/3 12.5% - KDIGO 0/1 3.1%
Z. H. Endre, et al. 2011 [13]	*ICU* part of the EARLYARF randomized controlled trial of high-dose EPO in AKI	- Abdominal aortic aneurysm rupture and repair 4.5% - Abdom. surgery or inflammation 10.2%	528	n=19 (3.6%)	7 days	60.2%	60±17	**APACHE II** 18±6.4 **SOFA score** 6.3±2.8	N/A	AKIN on entry n=147 (27.8%) AKIN48 n=82 (15.5%) RIFLE24 n=19	10.2% (n=54) died within 7 days

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		- Burns 0.9% - Cardiac arrest or failure 11.9% - Cardiac surgery 17.8% -Collapse, cause unknown 0.6% - Neurological 14.0% - Other 0.6% - Pulmonary/thoracic surgery or failure 12.1% - Sepsis 19.1% - Trauma 8.1%								(3.6%)	
Z. H. Endre, et al. 2010 [14]	*ICU* EARLYARF randomized controlled trial of high-dose EPO in AKI	EA1: Observation arm EA2: Treatment arm EA1: - Abdominal aortic aneurysm 2.0% - Abdominal surgery/inflammation 7.5% - Burns 1.4% - Cardiac arrest/failure 8.1% - Cardiac surgery 19.7% - Collapse 0.9% Neurological 17.7% - Pulmonary/thoracic surgery or failure 13.0% - Sepsis 19.1% - Trauma 9.9% - Other 0.6% EA2: - Abdominal aortic aneurysm 9.2% - Abdominal surgery/inflammation 15.2% - Burns 0% - Cardiac arrest/failure 19.0% - Cardiac surgery 14.1% - Collapse 0%	EA1: 345 EA2: 183	EA1: 8 EA2: 11	7 days	EA1: 63.2% EA2: 54.6%	EA1: 60±18 EA2: 61±16	**APACHE II** EA1: 17±6 EA2: 19±7 **SOFA score** EA1: 6.1±2.7 EA2: 6.6±2.9	EA1: 1.0 (0.79-1.4) EA2: 1.0 (0.79-1.3)	AKIN EA1: 26.7% EA2: 30.1%	EA1: 8.1% EA2: 14.2% (within 7 days)

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		Neurological 7.1% - Pulmonary/thoracic surgery or failure 10.3% - Sepsis 19.0% - Trauma 4.9% - Other 0.5%									
A. Gaipov, et al. 2015 [15]	*Cardiac surgery*	Patients with elective coronary artery bypass grafting and/or cardiac valve surgery	total = 60 - Non-AKI n=20 - Nonprogressed AKI n=20 - Progressed AKI n=20	- Non AKI 0 - Nonprogressed AKI 0 - Progressed AKI 35% (7)	Max. 48h	total 70 (n=42) - Non-AKI 75 (n15) - Nonprogressed AKI 60 (n12) - Progressed AKI 75 (15)	- Non-AKI 51,8 (16,6) - Nonprogressed AKI 56,7 (15,1) - Progressed AKI 61,7 (9,6)	N/A	- NON-AKI 0.75 (±0.13) - Nonprogressed AKI 0.80 (±0.25) - Progressed AKI 0.98 (±0.34)	AKIN I n=34 AKIN II n=6	4 patients died
M. Garcia-Alvarez, et al. 2015 [16]	*Cardiac surgery*	patients undergoing cardiac surgery	- cardiac surgery associated-AKI (CSA-AKI)104 - No CSA-AKI 184	- CSA-AKI 21,2 (22) - No CSA-AKI 0 (0)	during ICU stay	- CSA-AKI 55,8 - No CSA-AKI 70,7	- CSA-AKI 75 (68-80) - No CSA-AKI 69 (59-76)	N/A	- CSA-AKI 94 (73-118) - No CSA-AKI 72 (64-87) μmol/L	N/A	**ICU mortality** - CSA-AKI 8.7% - No CSA-AKI 0.5% **28-day mortality** - CSA-AKI 8.7% - No CSA-AKI 1.1% **365-day mortality** - CSA-AKI 14.4% - No CSA-AKI 1.6%
N.J. Glassford et al. 2013 [17]	*ICU* Critically ill patients at risk of AKI	Admission diagnosis - Sepsis 20.59% - Stroke 7.85% - Malignancy 7.85% - Liver	102	7 (6.87%)	33.46 (7.37-224.24) hours	54.91%	66.55 (52.93-74.78)	**APACHE II** 66.55 (52.93-74.78)	82 (64.24-112) μmol/L	**RIFLE** - R n=54 - I n=28 - F n=4	ICU: 12 Hospital: 15

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		failure/transplantation 8.83% - Post-cardiac surgery 16.67%									
I. Gocze, et al. 2015 [18]	*Surgical ICU*	Diagnosis/Surgery - Hepatobiliary 11% - Transplant 13% - Cancer 12% - Vascular 31% - Severe Trauma 20% - Sepsis 9% - Other 4%	107	n=10 9%	48 hours	N/A	60.03±14.78	**SAPS II** 22.13±9.63	1.13±0.60	- AKI 42% - AKI stage 2/3 22%	28-day mortality 9%
A. Haase-Fielitz, et al. 2009 [19]	*Cardiac surgery*	Patients with cardiac surgery necessitating the use of cardiopulmonary bypass	100	4	7 days	61	69.5±8.7	**EuroScore:** No pre-operative renal impairment: - AKI 6.5±2.3 - no AKI 5.0±2.1 Pre-operative renal impairment: - AKI 7.7±2.1 - no AKI 5.8±2.3	90.8±25.7 (preoperative, μmol/L)	**RIFLE** - R n=31 - I n=13 - F n=6 - I+F n=19	2 hospital deaths
A. Haase-Fielitz, et al. 2011 [20]	*Cardiac surgery*	Patients enrolled into the control arm of the sodium bicarbonate in cardiac surgery study	Total 100 - AKI 9 - no AKI 91	- AKI n=3 - no AKI n=2	7 days	- AKI 77.8% - no AKI 65.9%	- AKI 74 (70-77) - no AKI 67 (56-73)	N/A	- AKI 0.92 (0.51-1.83) - No AKI 1.14 (0.57-1.74) (baseline)	**RIFLE** - R n=4 - I n=3 - F n=2	hospital mortality - AKI n=3 (33.3%) - no AKI n=0 (0%)
R. Haines, et al. 2017 [21]	*ICU*	Patients admitted to ICU for non-cardiac reasons.	Total 138 - AKI 73 - no AKI 65	40	N/A ("The median time between the day of admission to the ICU and the day of the worst AKI stage was 3 days.	Total 58.0% - AKI 53.4% - no AKI 63.1%	Total 65.5 (49-76) - AKI 69 (54-77) - no AKI 61 (41-72)	APACHE II Total 19.4 (SD 6.4) - AKI 22.2 (5.9) - no AKI 16.2 (5.1) SOFA Total 7.5 (SD 3.7) - AKI 8.9 (3.8) - no AKI 6.0 (3.0)	N/A	**KDIGO** (AKI:) - stage 1 10.1% - stage 2 10.1% - stage 3 w/o dialysis 3.6% - stage 3 w dialysis 20.3%	N/A

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					")						
J. Hanson, et al. 2011 [22]	*Malaria patients*	Patients enrolled in clinical trials of adjuvant therapy of severe malaria	163	43 should have received RRT, for logistic reasons only 19 received RRT	Max 7 days	80	35 (23 - 45)	N/A	122 (79.6-202) (μmol/L)	N/A	Patients with RRT 37% mortality rate Patients unable to receive RRT 75%
S. Herget-Rosenthal, et al. 2004 [23]	*Surgical/medical ICU*	All patients in ICU regarded as high-risk patients for ARF **Primary diagnosis: ARF** - Acute leukemia/lymphoma 7% - Cardiovascular disease 43% - Hepatic failure 16% - Respiratory failure 11% - Sepsis 16% - Shock 5% - Other 2% **Control** - Acute leukemia/lymphoma 12% - Cardiovascular disease 53% - Hepatic failure 15% - Respiratory failure 5% - Sepsis 10% - Shock 0% - Other 5%	Total 85 - ARF 44 - Control 41	17	N/A	- ARF 51,7 - Control 64	- ARF 70 ± 8 - Control 63 ± 11	N/A	- ARF 139±18 - Control 79±17 mg/L	R**IFLE** - R n=44 - I n=41 - F n=28	N/A

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S. Herget-Rosenthal, Poppen, et al. 2004 [24]	*ICU/hospitalized patients with potential ARF reporting to Department of Nephrology*	ICU/hospitalized patients Etiology of ATN: Patients receiving RRT (RRT+) - Ischemia n=3 (11%) - Nephrotoxicity n=2 (8%) - Sepsis/SIRS n=7 (27%) - Combination n=14 (54%) Patients not receiving RRT (RRT-) - Ischemia n=15 (32%) - Nephrotoxicity n=13 (28%) - Sepsis/SIRS n=12 (26%) - Combination n=7 (14%)	RRT+ n=26 RRT- n=47	26	Median 4 (2-6) days	RRT+ n=17 (65%) RRT- n=30 (63%)	RRT+ 67(50-73) RRT- 70 (57-74)	N/A	RRT+ 194 (177-221) (μmol/L) RRT- 159 (142-213) (μmol/L)	N/A	RRT+ 85% RRT- 13%
P. B. Hjortrup, et al. 2015 [25]	*ICU* Sub-study of the Scandinavian Starch for Severe Sepsis and Septic Shock (6S) trial	- Patients enrolled into the 6S trial; sample collection at inclusion - Septic Patients	222	40 (18%)	during ICU stay	57	66 (57-75)	**SAPS II** 54 (39-66) **SOFA score** (ex. GCS score) 8 (6-10)	101 (66-185) μmol/L	**KDIGO** - Stage 1 n=19 (15%) - Stage 2 n=5 (4%) - Stage 3 n=7 (5%)	**ICU mortality** 39% **90-day** mortality 55%
P.W. Ho, et al. 2017 [26]	*General hospital population*	Patients admitted to hospital with AKI	107 - AKI 59 - acute-on-chronic renal failure (AOCRF) 48	27 (25.2%)	N/A	- AKI 57.6% - AOCRF 50%	- AKI 53.2±17.1 - AOCRF 68.7±10.7	N/A	- AKI 91.1±19.3 - AOCRF 243.6±132.9	N/A	"12 patients […] died within 90 days"

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Q. Hu, et al. 2017 [27]	*Surgical ICU*	Surgical critically ill patients	Total 125 - AKI 52 - no AKI 73	Total n=18 - AKI n=18 - no AKI n=0	N/A	Total 78.4% - AKI 72.6% - no AKI 80.8%	Total 51.5±14.8 - AKI 52.6±13.4 - no AKI 50.8±15.8	**APACHE II** Total 8.8±5.3 - AKI 10.8±6.3 - no AKI 7.4±4.0 **SOFA** Total 5.1±3.8 - AKI 6.6±4.4 - no AKI 4.0±2.6	Total 92.0 (59.5-149.5) - AKI 163.5 (81.3–287.7) - no AKI 72.0 (55.5–105.0)	N/A	Hospital: Total 11.2% - AKI 19.2% - no AKI 5.5%
T.S. Itenov, et al. 2016 [28]	*ICU* *Sub-study of the PASS-trial*	ICU population, severe sepsis/septic shock in 30.6%.	454	39	28 days	60.1	68 (60-76)	APACHE II 18 (23-24)	112 (72-194) μmol/L	N/A	N/A
V. Jalkanen, et al. 2013 [29]	*ICU* Sub-study of the FINNALI study	Patients admitted to ICU and receiving ventilator support for more than 6h	454	N/A	N/A	68,5	64 [53–74]	**SAPS** 41 (29-53) **SOFA score** 8 (6-10)	N/A	N/A	**90-day mortality** 26.2% **12-month mortality** 31.5%
A. H. Kiessling, et al. 2014 [30]	*Cardiac surgery* Post-hoc analysis of the 'Comparison of Two Different Heart-lung Machine Filling Methods: Precoating Versus Colloidal Fluids' trial	Patients with elective on-pump cardiac-surgery procedures	total 70 - No AKI 40 - AKI 6	8	0-4 days	total 77 - No AKI 64% - AKI 75%	total 74 ± 9 - No AKI 72.6±10.1 - AKI 80±3.7	N/A	- No AKI 1.09±0.3 - AKI 1.6±0.84	AKIN 1 n=21	**30d Mortality** - No AKI 6.4% - AKI 25%
H. Kim et al. 2017 [31]	*Septic patients*	Patients with sepsis	167	24	N/A	59.3	70 (57-77)	N/A	N/A	N/A	30-day mortality 18%

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J. L. Koyner, et al. 2015 [32]	*ICU* Patients from the SAKInet cohort having received a Furosemide Stress Test.	Critically ill patients with AKIN 1 or 2, who were part of the SAKInet cohort and were identified as having received an FST.	Entire Cohort n=77 - Nonprogressors n=52 - AKIN Stage 3 Progressors n=25	14.2% (11)		42.8	65.3±1.6	**APACHE II:** - Entire Cohort 17.8±1.11 - Nonprogressors 16.5±1.2 - AKIN 3 Progressors 21.6±2.5 *SOFA score:* - Entire Cohort 1.16±0.03 - Nonprogressors 1.05±0.2 - AKIN 3 Progressors 1.5±0.4	N/A	AKIN: Entire Cohort - Stage 1 n=51 (53.2%) - Stage 2 n=36 (46.7) Nonprogressors - Stage 1 n=34 (65.4%) - Stage 2 n=18 (34.6%) AKIN 3 Progressors - Stage 1 n=7 (28.0%) - Stage 2 n=18 (72.0%)	'Death' -Entire Cohort 20.7% - Nonprogressors 13.4% - AKIN Stage 3 Progressors 36.0%
M. J. Koziolek, et al. 2012 [33]	*ICU* (medical & anesthesiological)	ICU patients with deterioration of kidney function were included.	total 120 - dialysis 52 - non-dialysis 68	52	„Range for dialysis prediction: 0-24 days“	- dialysis 65 - non-dialysis 62	- dialysis 68.2±2.1 - non-dialysis 70.3±1.5	**SAPS II** - dialysis 34 (9-72) - non-dialysis 28 (6-58)	- dialysis 2.9±0.2 - non-dialysis 2.1±0.1	**AKIN score** - dialysis -- AKIN 1 n=0 -- AKIN 2 n=0 -- AKIN 3 n=52 - non-dialysis -- AKIN 1 n=39 -- AKIN 2 n=20 -- AKIN 3 n=9	N/A
R. Linko, et al. 2013 [34]	*ICU* Sub-study of the FINNALI study	Patients admitted to ICU and receiving ventilator support for more than 6h.	3690	47	N/A	66	61 (51-73)	**- SAPS II** 44 (32-56) **- SOFA score** 8 (6-10)	80 (62-122) μmol/L	N/A	- Hospital mortality 23% - 90-day mortality 30%
A. Lukasz, et al. 2014 [35]	*ICU*	Patients diagnosed with hemolytic-uraemic syndrome.	39	24	5 (4.8-8.8) days	28	45 (35-57)	N/A	202 (120-343) μmol/L	- AKIN I n=7 - AKIN II n=8 - AKIN III n=16	Mortality n=1
M. Mahdavi-Mazdeh, et al. 2012 [36]	*Renal transplantation*	Renal allograft receipients	33	6	7 days	48	36.3±12.2 (14–58)	N/A	- delayed graft function 7.3±1.0 - slow graft functtion 5.5±1.9 - immediate graft function 7.2±1.5	N/A	N/A

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
A. S. Maisel, et al. 2016 [37]	*Emergency department/hospital* AKINESIS trial	Patients presenting to hospital with signs and symptoms of acute heart failure, with planned admission and treatment with diuretic agents.	927	11	5 days	62	68.5	N/A	1.19 (0.94-1.6)	N/A	hospital mortality 3.1%
J. Mårtensson, et al. 2017 [38]	*ICU* FINNAKI study	16 mixed ICUs, 1 cardiac-surgical ICU	Total 1112 - early AKI n=223 - late AKI n=199 - no AKI n=690	- early AKI n=69 - late AKI n=26 - no AKI n=0	N/A	- early AKI 71.3 - late AKI 63.8 - no AKI 61.4	- early AKI 65 (54-74) - late AKI 66 (54-75) - no AKI 62 (47-72)	SAPS II - early AKI 39 (30-52) - late AKI 45 (36-60) - no AKI 32 (25-43)	- early AKI 76 (60-94) - late AKI 79 (65-100) - no AKI 72 (59-88) μmol/L	KDIGO - early AKI -- Stage 1 n=189 -- Stage 2 n=88 -- Stage 3 n=145	N/A
D. R. McIlroy, et al. 2015 [39]	*Cardiac surgery*	Patients undergoing cardiac surgery, all types of cardiac surgery were included Outcome + → primary outcome, composite of hospital mortality or initiation of renal replacement therapy	603 outcome - 578 outcome + 25	14	4 (2-6) days	- outcome - 63,5 (367) - outcome + 52,0 (13)	- outcome - 65(16) - outcome + 67(14)	N/A	N/A	**KDIGO** Stage 1 - Outcome - n=108 - Outcome + n=21 Stage 2 - Outcome – n=18 - Outcome + n=2 Stage 3 - Outcome – n=8 - Outcome + n=13	N/A
M. Nejat, et al. 2010 [40]	*ICU* Not interventional arm of the EARLYARF trial.	Consecutive patients admitted to the ICU.	444	14	30 days	61	60±18	**APACHE II** 17.7±6.3 **SOFA score** 6.2±2.7	90 (70-120) μmol/L	N/A	30-day mortality 14.4%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
S. Nisula, et al. 2014 [41]	*ICU* FINNAKI study	Admission type - Emergency 912 - Surgical 362 Diagnostic group - Cardiovascular, operative 160 - Cardiovascular, nonoperative 154 Respiratory tract, nonoperative 121 - Gastrointestinal tract, operative 95 - Metabolic 94 - Neurological, nonoperative 76 - Sepsis 67 - Trauma 63 Gastrointestinal tract, nonoperative 59 - Other 153	1042	83	3 days	64.6	63.0 (51.0-73.0)	**SAPS II** 36 (27-48) **SOFA score** 8 (5-10)	79 (59.3-119.8) μmol/L	**KDIGO** - Stage 1 n=168 - Stage 2 n=81 - Stage 3 n=130	90-day mortality 21.6%
S. Nisula, et al. 2015 [42]	I*CU* Sub-study to the FINNAKI study	Admission type - Emergency 1286 - Surgical 485 Diagnostic group - Cardiovascular, operative 182 - Cardiovascular, nonoperative 189 Respiratory tract, nonoperative 178 - Gastrointestinal tract, operative 135 - Metabolic 139 - Neurological, nonoperative 133 - Sepsis 89 - Trauma 99 Gastrointestinal tract, nonoperative 92 - Other 203	1439	96	3 days	63.9	63 (50-73)	**SAPS II** - All 36 (27-47) - AKI 42 (33-56) - No AKI 32 (25-43) **SOFA score** - All 7 (5-10) - AKI 9 (7-12) - No AKI 6 (4-8)	N/A	N/A	90-day mortality 31%
E.D. O'Sullivan, et al. 2017 [43]	High dependency unit and ITU	"retrospective cohort analysis of all acute admissions to a district general hospital medical high dependency	107	16	N/A	49.5	60 (19.2)	N/A	N/A	AKIN - Stage 1 17.8% - Stage 2 3.7% - Stage 3 1%	30%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
		unit and ITU									
M. Y. Park, et al. 2013 [44]	*General hospital population*	Patients admitted to hospital with potential AKI who reported to the Department of Nephrology	Total 213 - Prerenal AKI n=86 - Intrinsic AKI n=127	- Prerenal AKI n=0 - Intrinsic AKI n=35	'during treatment period'	- Prerenal AKI 53.5 - Intrinsic AKI 46.5	- Prerenal AKI 64±18 - Intrinsic AKI 65±17	**APACHE II** - Survival 21 (19-25) - Dead 30 (23-32)	- Prerenal AK 1.9 (16-25 [sic!]) - Intrinsic A 2.3 (1.8-3.5)	AKIN - Stage 1 n=39 - Stage 2 n=37 Stage 3 n=51	- Prerenal AKI 0% - Intrinsic AKI 26.8%
T. J. Pianta, et al. 2015 [45]	*Renal transplantation*	Patient group from 'Clusterin in kidney transplantation: novel biomarkers versus serum creatinine for early prediction of delayed graft function.' study.	Total 56 - DGF [delayed graft function] n=22 - non-DGF n=34	22	7 days	- DGF 68 - non-DGF 64	- DGF 50 (47-62) - non-DGF 56 (49-62)	N/A	N/A	N/A	Death n= 29 (=51.8%)
J. W. Pickering, et al. 2013 [46]	*ICU*	Stored samples from the Early-ARF trial population.	528	45	30 days	60.9	60±17	N/A	N/A	N/A	Death n=53
J. W. Pickering, et al. 2012 [47]	*ICU* Patients from both observation and intervention arms from EARLYARF trial (high-dose EPO in AKI).	- Abdominal aortic aneurysm rupture & repair 5 (22) - Abdominal surgery or inflammation 11 (51) - Burns 1 (5) - Cardiac arrest or failure 13 (63) - Cardiac surgery 13 (64) - Collapse, cause unknown 1 (3) - Neurological surgery, injury or seizure or hemorrhage 15 (71) - Other 1 (3) - Pulmonary or thoracic surgery or failure 13 (63) - Sepsis 20 (97) - Trauma 9 (42)	484	N/A	30 days	61	60±17	**APACHE II:** 18±6 **SOFA Score:** 6.3±2.8	1.0 (0.79-1.36)	N/A	N/A (only combined endpoint: dialysis/death)
K. Plewes, et al. 2017 [48]	*General ward/ICU*	Patients suffering from malaria (P. falciparum)	107 (+ 80 patients with uncomplicated malaria + 28 with sepsis as control groups)	Total n=32 - AKI n=29 - no AKI n=3	N/A	Total 70 - AKI 65 - no AKI 78	Total 30 (22-40) - AKI 27 (18-40) - no AKI 30 (25-45)	N/A	Total 1.4 (1.1-1.3) - AKI 3.0 (1.6-4.4) - no AKI 1.2 (1.0-1.3)	KDIGO - stage 1 26% - stage 2 26% - stage 3 48%	Total 33% - AKI 40% - no AKI 22%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
C. Pipili, et al. 2014 [49]	*ICU* Mechanically ventilated patients admitted to the ICU.	Patient type (Cohort): - Medical 47% - Elective surgery 20% - Emergency surgery 33% Admission diagnosis (Cohort): - Neurologic 14% - Respiratory 25% - Polytrauma 5% - Neurotrauma 16% - Gastrointestinal 20% - Septic 8%	106	50	within 10 days of ICU admission	64.2	64±18	**APACHE II:** - Cohort 19±8 - RRT 20±5.5 - non-RRT 17.5±9 **SOFA score** - Cohort 3±3 - RRT 9.6±2.6 - non-RRT 8.5±3.5	- Cohort: 0.97(1.25) - RRT: 1.61 (1.64) - non-RRT 0.8 (0.4)	**RIFLE (ICU admission)** *Cohort:* - R n=9 - I n=9 - F n=3 *RRT:* - R n=9 - I n=8 - F n=2 *non-RRT* - R n=0 - I n=1 - F n=1	ICU mortality: - Cohort: 56% - RRT: 84% - non-RRT 30%
A. M. Ralib, et al. 2012 [50]	I*CU* Patients admitted to the general ICU or high-risk patients scheduled for cardiothoracic surgery with CPB.	Primary diagnosis class: - abdominal aortic aneurysm rupture/repair 4.5% - abdominal surgery/inflammation 10.5% - burns 1.0% - cardiac arrest/failure 13.0% - cardiac surgery 13.2% - collapse 0.6% - neurologic 14.7% - respiratory failure/thoracic surgery 13.0% - sepsis 20.0% - trauma 8.7% - other 0.6%	484	12	7 days	60.7	60±17	**APACHE II:** 18±6 **SOFA score** 6.3±2.8	72 (60-90) µmol/L	**AKIN** - stage 1 n=112 - stage 2 n=25 - stage 3 n=8	7 days 10.1% 365 days 24.6%
L. Renhua, et al. 2014 [51]	*General hospital population*	Patients with AKI at the time of nephrology consultation	103	48	2.17 (0.3) days	65	54.28±19.05	N/A	383.58±251.58 µmol/L	**AKIN** - stage 1 17.5% - stage 2 27.2% - stage 3 55.3%	28-day mortality 25.2%
O. Rewa, et al. 2015 [52]	*ICU* Adults admitted to ICU with evidence of	Admission diagnosis - Postoperative 19% - Medical 81%	227	24	30 days	62	65±14	SOFA score 10 (8-14)	160 (118-228.5) µmol/L	**Modified KDIGO** - no AKI n=54 - Class I n=78	30- day mortality 37% 90-day

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
	abnormal kidney function.	(Sepsis 18%)								- Class II n=54 - Class III n=41	mortality 44%
A. A. Royakkers, et al. 2012 [53]	*ICU* Critically ill patients with mechanical ventilation ≥48 hours and/or length of ICU stay ≥72 hours.	Primary diagnosis: -Patients who never developed AKI -- CPB 1.7% -- cardiovascular failure 1.7% -- cerebrovascular event 3.5% -- hemorrhagic shock 12.3% -- multiple trauma 5.3% -- elective major surgery 1.8% -- respiratory failure 38.6% -- septic shock 35.1% - Patients who developed AKI -- CPB 6.4% -- cardiovascular failure 12.9% -- cerebrovascular event 0% -- hemorrhagic shock 3.2% -- multiple trauma 6.4% -- elective major surgery 3.2% -- respiratory failure 32.2% -- septic shock 35.5% - Patients with AKI on admission -- CPB - -- cardiovascular failure 7.7% -- cerebrovascular event 0% -- hemorrhagic shock 9.6% -- multiple trauma 1.9%	Total 140 - Patients who never developed AKI 57 - Patients who developed AKI 31 - Patients with AKI on admission 52	11	N/A	- Patients who never developed AKI 64.9 - Patients who developed AKI 67.7 - Patients with AKI on admission 61.5	- Patients who never developed AKI 58.8 (16.1) - Patients who developed AKI 67.1 (15.8) - Patients with AKI on admission 74.4 (9.4)	**APACHE II:** - Patients who never developed AKI 18.5 (9.4) - Patients who developed AKI 19.3 (8.3) - Patients with AKI on admission 23 (11.5) **SAPS II:** - Patients who never developed AKI 35.9 (12) - Patients who developed AKI 42.8 (15) - Patients with AKI on admission 47.1 (14.8)	- Patients who never developed AKI 62 (50-78) - Patients who developed AKI 86 (72-104) - Patients with AKI on admission 110 (73-177) µmol/L	worst AKI score in ICU: - Patients who never developed AKI - - Patients who developed AKI -- Risk n=25 -- Injury n=4 -- Failure n=2 - Patients with AKI on admission -- Risk n=22 -- Injury n=13 -- Failure n=17	**ICU mortality:** - Patients who never developed AKI 0% - Patients who developed AKI 13% - Patients with AKI on admission 15% **Hospital mortality:** - Patients who never developed AKI 7.0% - Patients who developed AKI 16.1% - Patients with AKI on admission 29%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
		-- elective major surgery 9.6% -- respiratory failure 26.9% -- septic shock 46.2%									
A. A. Royakkers, et al. 2011 [54]	*ICU* Critically ill patients with mechanical ventilation ≥48 hours and/or length of ICU stay ≥72 hours.	Primary diagnosis: -Patients who never developed AKI -- cardiovascular failure 3.3% -- cerebrovascular event 3.3% -- hemorrhagic shock 11.7% -- multiple trauma 6.7% -- elective major surgery 1.7% -- respiratory failure 38.3% -- septic shock 33.3% - Patients who developed AKI -- cardiovascular failure 11.4% -- cerebrovascular event 0% -- hemorrhagic shock 5.7% -- multiple trauma 5.7% -- elective major surgery 2.9% -- respiratory failure 31.4% -- septic shock 37.1% - Patients with AKI on admission -- cardiovascular failure 7.1% -- cerebrovascular event 0% -- hemorrhagic	Total 151 - Patients who never developed AKI 60 - Patients who developed AKI 35 - Patients with AKI on admission 56	14	4 days	- Patients who never developed AKI 65 - Patients who developed AKI 69 - Patients with AKI on admission 62	- Patients who never developed AKI 59.2±16.1 - Patients who developed AKI 68.4±15.4 - Patients with AKI on admission 74.6±9.3	**APACHE II:** - Patients who never developed AKI 18.5±9.9 - Patients who developed AKI 19.6±8.3 - Patients with AKI on admission 24.2±12.9 **SAPS II:** - Patients who never developed AKI 37.2±13.3 - Patients who developed AKI 44.1±14.2 - Patients with AKI on admission 47.6±16.4	- Patients who never developed AKI 72 (61-94) - Patients who developed AKI 87 (76-87) - Patients with AKI on admission 139 (97-211)	Max. **RIFLE** class - Patients who never developed AKI - - Patients who developed AKI -- Risk n=27 -- Injury n=5 -- Failure n=3 - Patients with AKI on admission -- Risk n=22 -- Injury n=14 -- Failure n=20	**ICU mortality:** - Patients who never developed AKI 0% - Patients who developed AKI 11.4% - Patients with AKI on admission 19.6% **Hospital mortality:** - Patients who never developed AK6.7% - Patients who developed AKI 17.1% - Patients with AKI on admission 32.1%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
		shock 10.7% -- multiple trauma 1.8% -- elective major surgery 8.9% -- respiratory failure 25% -- septic shock 46.6%									
H. P. Shum, et al. 2015 [55]	*ICU*	Emergency operation: - Total 65.6% - AKI 75.6% - No AKI 61.3% Type of operation: - Total: -- Abdominal 56.3% -- Neurosurgery 24.5% -- Vascular 7.3% -- Orthopedics 6.6% -- Others 5.3% - AKI: -- Abdominal 64.6% -- Neurosurgery 15.6% -- Vascular 8.8% -- Orthopedics 11.1% -- Others 0% - No AKI: -- Abdominal 53.8% -- Neurosurgery 28.3% -- Vascular 6.6% -- Orthopedics 4.7% -- Others 6.8%	Total 151 - AKI 45 - No AKI 106	Total n=7 - AKI n=7 - No AKI n=0	N/A	Total 57 - AKI 60 - No AKI 56	Total 65 (55-80) - AKI 74 (60-83) - No AKI 64 (54-78)	*APACHE IV* - Total 60 (47-79) - AKI 75 (62-93) - no AKI 54 (43-71)	Total 72 (60-96) - AKI 101 (72-133) - No AKI 67 (59-79) µmol/L	AKIN - AKI: -- Stage 1 n=22 -- Stage 2 n=14 -- Stage 3 n=9	*ICU mortality:* -Total 3.3% - AKI 11.1% - No AKI 0% *Hospital mortality:* -Total 10.6% - AKI 24.4% - No AKI 4.7%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
E. D. Siew, et al. 2010 [56]	*ICU* First 588 patients enrolled in the VALID study.	ICU type: *Medical* - No AKI 151 (49%) - AKI 47 (55%) *Surgical* - No AKI 54 (18%) - AKI 29 (34%) *Trauma* - No AKI 92 (30%) - AKI 7 (8%) *Cardiac* - No AKI 8 (3%) - AKI 3 (3%)	Total 391 - AKI 86 - No AKI 305	21.99 (86)	28 days	AKI: 65 No AKI: 56	AKI: 55 [43-68] No AKI: 52 [37-63]	***APACHE II:*** - AKI 30 (23-34) - No AKI 22 (18-28) ***modAPACHE II:*** - AKI 26 (20-31) - no AKI 21 (17-26) ***SAPS II:*** - AKI 57 (41-69) - No AKI 44 (32-55)	AKI 1.5 (1.0-2.2) No AKI 0.9 (0.7-1.2)	**AKIN** - AKI: -- Stage 1 n=61 -- Stage 2 n=7 -- Stage 3 n=18	28-day mortality n=101
E. D. Siew, et al. 2013 [57]	*ICU* Patients from the Validation of biomarkers for Acute Lung Injury Diagnosis (VALID) study.	*Surgical ICU* - AKI 36 (28%) - No AKI 45 (18%) *Medical ICU* - AKI 52 (41%) - No AKI 79 (32%) *Trauma ICU* - AKI 35 (28%) - No AKI 118 (48%) *Cardiac ICU* - AKI 4 (3%) - No AKI 3 (1%)	Total: 372 - AKI: 127 - No AKI: 245	34.14 (127)	28 days	AKI: 69 No AKI: 74	AKI: 49 (40–63) No AKI: 51 (36–61)	***Modified APACHE II:*** - AKI 24 (19-27) - No AKI 22 (18-27) ***SAPS II:*** - AKI 49 (37-58) - No AKI 49 (37-58)	AKI 0.90 (0.74-1.15) No AKI 0.91 (0.70-1.08)	**AKIN** - AKI: -- Stage 1 n=93 -- Stage 2 n=18 -- Stage 3 n=16	**'Died'** - AKI 31% - No AKI 11% **28-day mortality** n=38
D.L. Skinner, et al. 2017 [58]	*Crush injuries*	Patients with crush injuries secondary to sjambok injuries (retrospective analysis of a local trauma database)	310	12	N/A	83.3	27±9.8	N/A	83 (70-110) µmol/L	**KDIGO** - no AKI n=264 - Stage 1 n=18 - Stage 2+3 n=28	1.9%
N. Srisawat, et al. 2011 [59]	*Emergency department Post hoc* analysis of the GenIMS (Genetic and Inflammatory Markers of Sepsis) study.	GenIMS: Patients with community-acquired pneumonia presenting to the emergency department. Subset of 189 patients who met the RIFLE-F criteria.	Total 181 - Recovery 93 - Non-recovery 88	- Recovery 0 - Non-recovery 14	N/A	- Recovery 51.6 - Non-recovery 60.2	- Recovery 67.9 (±15.6) - Non-recovery 72.9 (±14.9)	**APACHE III** - Recovery 48.4±16.4 - Non-recovery 52.4±18 **SAPS II** - Recovery 4.35±2.91 - Non-recovery 5.45±3.56	- Recovery 1.75 (±1.87) - Non-recovery 3.14 (±2.8)	**RIFLE-F** n=181	**Hospital:** - Recovery 0% - Non-recovery 48.9% **30-day** - Recovery 4.3% - Non-recovery 47.7% **60-day** - Recovery 9.7% - Non-recovery

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
											55.7% **90-day** - Recovery 12.9% - Non-recovery 55.7%
M. Sumida, et al. 2014 [60]	*Cardiac surgery*	Patients after cardiac surgery	Total 31 - Non-AKI 14 - AKI-without RRT 11 - AKI with RRT 6	6	N/A	- Non-AKI 86 - AKI-without-RRT 82 - AKI-with-RRT 67	- Non-AKI 39 [32–51] - AKI-without-RRT 41 [36–50] - AKI-with-RRT 48 [34–62]	N/A	- Non-AKI 0.91 (0.73-10.8) - AKI-without-RRT 1.39 (0.62-1.87) - AKI-with-RRT 1.75 (0.85-2.19)	N/A	**28-day mortality** - Non-AKI 0% - AKI-without-RRT 0% - AKI-with-RRT 17% **Total mortality** - Non-AKI 7% - AKI-without-RRT 9% - AKI-with-RRT 67%
P. Susantitaphong, et al. 2012 [61]	*Acute care facilities*	Hospitalized patients with AKI who received in-hospital nephrology consultation for AKI. Cause of AKI - Patients with Risk-allele (allele I or G) -- Ischemic 21% -- Nephrotoxic 19% -- Sepsis 14% -- Multifactorial/other 46% - Patients w/o risk allele (other alleles) -- Ischemic 31% -- Nephrotoxic 13% -- Sepsis 7% -- Multifactorial/other 49%	- AKI patients n=241 - Healthy non-hospitalized controls n=267	- AKI: 92	N/A	- AKI 54 - Controls 26	- AKI 64.5±15.9 - Controls 41.5±16.5	**APACHE II** - Patients with Risk-allele (allele I or G) 19.7±6.8 - Patients w/o risk allele (other alleles) 20.0±6.4		**AKIN** - AKI: -- Stage 1 n=66 -- Stage 2 n=12 -- Stage 3 n=136	- AKI: 24%
K. Tiranathanagul, et al. 2013 [62]	*ICU* Critically ill patients with AKI stage 2/3 (AKIN criteria).	Primary diagnosis N/A - Sepsis -- Non-RRT n=16 -- RRT n=17 - Shock -- Non-RRT n=11	47	18	3 days	- Non-RRT 62 - RRT 72	- Non-RRT 63.8±19.4 - RRT 62.0±16.3	**APACHE II** - Non-RRT 14.5±5.1 - RRT 25.6±6.1 **SOFA score** - Non-RRT	- Non-RRT 0.94±0.32 - RRT 1.27±0.69	N/A	Hospital death 40%

Author, Year	Setting	Patient type	No. of Patients	No. of Pat. receiving RRT	Initiation of RRT within	% male	Age (years)	Illness severity Scores	blood Cr (mg/dl)	AKIN/KDIGO/RIFLE	Mortality
		-- RRT n=14						7.1±3.2 - RRT 13.0±3.44			
X. Valette, et al. 2013 [63]	*ICU/Contrast-induced AKI (CI-AKI)* All adult patients with expected ICU stay ≥48 hours and underwent imaging with CM administration.	Admission diagnosis - Medical 43% -- Acute respiratory failure 23% -- Coma 5% -- Acute pancreatitis 5% -- Cardiac arrest 4% -- Shock 3% Miscellaneous 2% - Emergency surgery 43% -- Neurosurgery 24% -- Abdominal surgery 11% -- Vascular surgery 4% -- Miscellaneous 3% - Major trauma 11%	98	6	6 (3-14) days after CM injection	75	60 (47-67)	**SAPS II** 40 (32-51) **SOFA score** 8 (5-11)	- No CI-AKI (n=68) 0.65 (0.47-0.81) - CI-AKI (n=30) 0.85 (0.61-1.26)	**RIFLE** - R n=17 - I n=20 - F n=4	ICU mortality 13%

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