

Supplementary Material

Challenges of conducting kidney health checks among patients at risk of chronic kidney disease and attending an urban Aboriginal and Torres Strait Islander primary healthcare service

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Supplementary Appendix 1: Details of variables used in the study

Variables	Details of each variable	Source of data
<i>Demographic information for all persons included in the study</i>		CAT 4 December 7, 2017 data extraction
Medical Record Number		
Name (first and last name)		
Date of birth		
Age		
Sex		
<i>Presence of following Risk factors</i>	<i>For patients aged 18 to 29 years on December 7, 2017</i>	
Obesity (Body Mass Index (BMI))	Normal weight: (BMI <25) Overweight (BMI ≥ 26and <30) Obese (BMI ≥ 30) No record of BMI (missing)	CAT 4 December 7, 2017 data extraction
Smoking status	Current smoker Ex-smoker Non-smoker	CAT 4 December 7, 2017 data extraction. If there was no record of smoking status, it was recorded as missing data.
Family history of CKD or 'kidney failure'	1. Family history of CKD present. 2. Other family history recorded, but not CKD. 3. 'No significant family history ' recorded in medical record. 4= No family history recorded. 5= 'Unknown', patient does not know if he/she has a family history of CKD.	Manual search of medical records and any health assessments conducted for each included patient.
Diagnosis of Diabetes Mellitus (Types 1 and 2) recorded in data extracted via CAT 4.	Not present Present	CAT 4 December 7, 2017 data extraction identified a diagnosis of diabetes mellitus (DM). If it was not recorded, it was considered that the person did not have DM (Not present).
Diagnosis of hypertension	Not present Present	CAT 4 December 7, 2017 data extraction. If hypertension was not recorded, it was considered the person did not have the diagnosis (Not present)
History of any cardio-vascular disease	Not present Present	CAT 4 December 7, 2017 data extraction
<i>Initial and follow-up eGFR and UACR test results, or test requests and frequency of visits</i>		

<i>during each test period if no results were available</i>		
eGFR test requests (if no results were located), and details of results including date, eGFR result, including reference range.	Result copied from pathology report, including reference range and date of the test. When more than one test was conducted within 12 months, the most recent test was treated as initial test.	Dates of eGFR test requests were obtained from medical record visit notes in BP. Results (and dates) of pathology reports were obtained the medical records of each patient in BP.
UACR dates of test requests (if no results were located), or details of results including date, UACR result, including reference range.	Result copied from pathology report into the Excel spreadsheet for each patient or recorded from the health assessment. When more than one test was conducted within 12 months, the most recent test was treated as initial test.	Dates of UACR test requests were obtained from medical record visit notes in BP. The results of UACR were obtained from the pathology reports in the first instance. If this was missing, or the test had been conducted at CoE by staff, then the health assessments, annual diabetic check records and progress notes of patients were checked.

Supplementary Appendix 2: Summary of reasons for no eGFR and UACR repeat tests within 12 or 24 months for persons having a complete or incomplete initial KHC test

	Test requested, n/N; (%)	Regular ≠ visit and no test requested, n/N; (%)	Irregular † or no visit after initial test, no test requested n/N; (%)	Total n/N; (%)
Complete initial health checks				
No eGFR tests				
No eGFR tests within 12 months, 54/110, (49%)	20/54;(37)	22/54; (41)	12/54; (22)	54/54; (100)
No eGFR tests within 24 months, 22/53, (42%)	3/22; (14)	6/22; (27)	13/22; (59)	22/22; (100)
No repeat test within 3 months for reduced initial eGFR test 6/8; (75%)		6/6; (100) (at least one visit)		6/6; (100)
No UACR tests				
No UACR tests within 12 months; 57/89; (64%)	7/57; (12)	26/57; (46)	24/57; (42)	57/57; (100)
No UACR tests within 24 months, 39/52; (75%)	3/39; (8)	19/39; (49)	17/39; (43)	39/39 ; (100)
No repeat test within 3 months for elevated initial UACR test 27/30; (90%)	3/27; (11)	21/27; (78) (at least one visit)	3/27; (11) (no visit)	27/27; (100)
Incomplete initial health checks				
eGFR tests				
No repeat eGFR tests within 12 months 71/126; (56%)	26/71;(37)	27/71;(38)	18/71;(25)	71/71;(100)
No repeat eGFR tests within 24 months, 116/278; (42%)	50/116;(43)	17/116;(15)	49/116;(42)	116/116;(100)
No repeat test within 7 days, 4/4; (100%)	1/ 4; (25) (visited within 7 days)	1/ 4; (25) (visited within 7 days)	2/4; (50) (no visit within 7 days)	4/4; (100)
No first repeat test within 3 months for reduced initial eGFR test 4/4; (100%)	2/4; (50) (visited within 3 months)	2/4; (50) (visited within 3 months)		4/4; (100)
No second repeat test within 3 months for reduced initial eGFR test 4/4; (100%)	2/4; (50)	1/ 4; (25)	1/ 4; (25)	4/4; (100)
UACR tests				
No repeat UACR tests within 12 months; 19/30; (63%)	3/19; (16)	9/19; (47)	7/19; (37)	19/19; (100)
No repeat UACR tests within 24 months; 15/19; (79%)	1/15; (7)	10/15; (67)	4/15; (26)	15/15; (100)
No repeat test within 3 months for elevated initial UACR test; 19/19; (100%)	4/19; (21) (attended 1 GP visit)	12/19; (63) (attended at least 2 GP visits)	3/19; (16) (no GP visits)	19/19; (100)

≠ Visits were considered regular if the patient had visits over the 12- or 24-month period

† Visits were considered irregular if the patient had only visited in the first half of the 12- or 24-month period or had only one or two visits in the test period.