

Preface



This is the 4th edition of *Contemporary Nephrology Nursing*, a most trusted guide for nurses and advanced nurse practitioners, published by the American Nephrology Nurses Association (ANNA). This edition contains 50 chapters updated with the latest advances and guidelines. There are also 10 brand new chapters including *Active Medical Management without Dialysis, Oral Health and Chronic Kidney Disease, Genetics and Kidney Disease, Antibiotic Stewardship, Quality Assurance and Performance Improvement, Social Determinants of Health, Telehealth, and Complementary Therapies*. These 60 chapters are divided into 10 sections for ease in finding the information you need at the time you need it. All chapters provide the most current, reliable, and relevant information available. A returning feature is the popular key concept summaries at the beginning of every chapter. A new feature is nursing alerts, which call out the latest evidence related to chapter topics. This classic guide promoting excellent patient outcomes while using evidence-based nephrology nursing care includes the latest innovations in nephrology nursing.

Since the 3rd edition was published, the 2012 Kidney Disease: Improving Global Outcomes (KDIGO) staging system that grades chronic kidney disease (CKD) by glomerular filtration rate (GFR) and albuminuria has been widely adopted by the kidney community and our authors. You will see the graded stages, which are detailed in chapter 6, *Chronic Kidney Disease: Diagnosis, Classification, and Management*, used throughout this text.

In 2020, due to the rising worldwide burden of kidney disease and the need for effective communication, KDIGO published updated nomenclature recommendations to the kidney community (Levey et al., 2020). ANNA is one of many organizations that has adopted the recommendations, and you will see them extensively throughout this publication. “Kidney” is preferred rather than either “renal” or the prefix “nephro-” for descriptions of kidney disease and function. “Renal” is still used when it is part of the name of a disease (i.e., cardiorenal syndrome, renal osteodystrophy) or when it is included in an anatomical site (i.e., renal artery). Describing kidney failure as “end stage” can be demoralizing and stigmatizing and may wrongly imply imminent death. The new KDIGO nomenclature supports the use of the term “kidney failure with replacement therapy” (KFRT) instead of ESRD. It may look strange at first, but after a few chapters, I think you will come to prefer the term KFRT for patients with CKD G5 treated by hemodialysis, peritoneal dialysis, or kidney transplantation. Because the government still uses “ESRD” and pays most of the costs of KFRT within the United States, you will see “ESRD” in chapters when referring to public policy and payment. If there are any nomenclature mistakes in this edition, it is the fault of the editor.

In retrospect, launching a new publication at the start of the first worldwide pandemic of a century is poor timing. How could we anticipate the harm that SARs CoV-2 (COVID-19) would generate for nephrology health care professionals and their patients? If our authors and reviewers were lucky enough to remain healthy, they were exhausted from working long hours in very difficult and sometimes unsafe conditions. Others that were infected with the virus were not as fortunate, and some even ended up hospitalized in critical condition. Still others lost loved ones to the disease. The dedication and resiliency of nephrology nurses and their colleagues are evidenced by the work that you see in this text.

We have over 90 expert contributors, and I would like to thank all of them who wrote, sometimes under very trying circumstances, these outstanding chapters. Authors spent many hours researching, writing, rewriting, proofreading, designing figures, and finally, adding the polishing finish on their chapter. Each chapter had several reviewers assisting the authors by checking content for accuracy, completeness, and applicability to current practice. The detailed recommendations they provided contributed to the strength of the chapters. Every author and reviewer volunteered their time to produce this textbook, and I am thankful to each of them. Many of the contributors are seasoned authors, but for a few, this was their very first experience writing for publication. I told them writing would be fun and easy, but they may not believe me.

Claudia Cuddy returned as the managing editor of this publication. The beautiful layout you see in this text is all her doing. I would like to express my gratitude to Claudia for her enthusiasm and commitment throughout this project along with providing guidance and support. Our coordinating editors at Anthony J. Jannetti Inc. (AJJ) are Lauren Kubiak and Kayla Harrison. I would like to personally thank them and all the AJJ staff for their assistance and dedication to the publication of this book. I would as well like to thank Tamara Kear, ANNA Executive Director, and the ANNA Board of Directors for their leadership and support.

An incredible amount of time, effort, and expertise went into the creation of *Contemporary Nephrology Nursing, 4th Edition*. My hope is that you will find this book not only to be a great reference for your nursing practice but also a tool to help you improve the clinical outcomes of patients with kidney disease.

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