

FRACTIONAL EXCRETION OF SODIUM (Jaffe's reaction, Indirect ISE)	
Creatinine, serum	mg/dL
Creatinine, urine	mg/dL
Sodium, serum	meq/L
Sodium, urine	meq/L
Fractional excretion of Sodium (FeNa)	%

Note: 1. Patients on diuretic therapy, may have FeNa >1%, hence it is a less reliable measure of prerenal cause of Acute Kidney injury.

2. Test conducted on serum and urine

Interpretation

FeNa in %	REMARKS
<1	Prerenal cause of Acute Kidney injury & others like Contrast nephropathy, Rhabdomyolysis, Hemolysis & Tumor lysis
>1	Intrinsic renal cause of Acute Kidney tubular injury due to exogenous nephrotoxins like Aminoglycoside antibiotics, Cysplatin, Tenofovir, Zoledronate

Comments

Fractional excretion of Sodium (FeNa) is the fraction of filtered sodium load that is reabsorbed by the tubules and is a measure of both the kidneys ability to reabsorb sodium as well as endogenous and exogenous factors that affect tubular reabsorption. With prerenal azotemia, FeNa is usually <1% suggesting avid tubular sodium reabsorption. Low FeNa is often seen in Glomerulonephritis, hence should not be considered synonymous with intravascular volume depletion and should not be used as a sole guide for volume management. In ischemic AKI, FeNa is frequently >1% because of tubular injury and resultant inability to reabsorb sodium.