AN ACT concerning clinical laboratories and supplementing P.L.1997, c.166 (C.45:9-42.26 et seq.).

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. The director of a clinical laboratory licensed in this State pursuant to P.L.1975, c.166 (C.45:9-42.26 et seq.) shall provide that when the laboratory tests a specimen to determine a patient's serum creatinine level, as ordered or prescribed by a health care professional authorized to make such an order or prescription, the laboratory shall calculate the patient's glomerular filtration rate using such information as is provided by the health care professional or patient, as applicable. The laboratory shall include the patient's glomerular filtration rate with its report to the health care professional.

2. This act shall take effect on the 60th day after enactment.

STATEMENT

The purpose of this bill is to aid health care professionals in the early diagnosis of kidney disease. The bill would require that clinical laboratories, when testing a specimen to determine a patient's serum creatinine level, as ordered or prescribed by a health care professional, shall also calculate and report the patient's glomerular filtration rate (GFR) using such information as is provided by the health care professional or patient, as applicable. GFR, which is estimated from a patient's blood level of creatinine by using a prediction equation, indicates how much kidney function a patient has, and can aid a health care professional in determining if a patient may have kidney disease, and if so, the stage of the kidney disease.

Requires clinical laboratories to calculate glomerular filtration rate when testing patient's creatinine level for diagnosis of kidney disease.