

# CJASN

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**1375 The Use and Misuse of Serum Albumin as a Nutritional Marker in Kidney Disease**

*T. Alp Ikizler*

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**1378 Reducing Disparities in Assessment for Kidney Transplantation**

*Keith C. Norris and Lawrence Y. Agodoa*

*See related article on page 1490.*

**1382 Attracting More Residents into Nephrology**

*Nancy Day Adams*

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## Original Articles

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### Clinical Immunology and Pathology

**1385 Relationships between Levels of Urinary Podocalyxin, Number of Urinary Podocytes, and Histologic Injury in Adult Patients with IgA Nephropathy**

*Rin Asao, Katsuhiko Asanuma, Fumiko Kodama, Miyuki Akiba-Takagi, Yoshiko Nagai-Hosoe, Takuto Seki, Yukihiro Takeda, Isao Ohsawa, Satoshi Mano, Kiyoshi Matsuoka, Hiroyuki Kurosawa, Shinya Ogasawara, Yoshiaki Hirayama, Sakari Sekine, Satoshi Horikoshi, Masanori Hara, and Yasuhiko Tomino*

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*Laura A.G. Armas, Radha Andukuri, Janet Barger-Lux, Robert P. Heaney, and Richard Lund*

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*Tariq Shafi, Rulan S. Parekh, Bernard G. Jaar, Laura C. Plantinga, Pooja C. Oberai, John H. Eckfeldt, Andrew S. Levey, Neil R. Powe, and Josef Coresh*

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*Thiane Gama-Axelsson, Olof Heimbürger, Peter Stenvinkel, Peter Bárány, Bengt Lindholm, and Abdul Rashid Qureshi*  
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*Mari Suzuki, Takahashi Hiroshi, Toru Aoyama, Miho Tanaka, Hideki Ishii, Masaya Kisohara, Narushi Iizuka, Toyoaki Murohara, and Junichiro Hayano*

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*Masafumi Fukagawa, Shingo Fukuma, Yoshihiro Onishi, Takuhiro Yamaguchi, Takeshi Hasegawa, Tadao Akizawa, Kiyoshi Kurokawa, and Shunichi Fukuhara*

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*Carla C. Baan, Annemiek M.A. Peeters, Martijn W.H.J. Demmers, Wendy M. Mol, Karin Boer, Janneke N. Samsom, Ajda T. Rowshani, Jan N.M. Ijzermans, and Willem Weimar*

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*Kirsten L. Johansen, Rebecca Zhang, Yijian Huang, Rachel E. Patzer, and Nancy G. Kutner*  
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**1498 Effect of High-Dose Erythropoietin on Graft Function after Kidney Transplantation: A Randomized, Double-Blind Clinical Trial**

*Kalathil K. Sureshkumar, Sabiha M. Hussain, Tina Y. Ko, Ngoc L. Thai, and Richard J. Marcus*

## Attending Rounds

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**1507 To Dialyze or Not: The Patient with Metastatic Cancer and AKI in the Intensive Care Unit**

*Alvin H. Moss*

## Commentary

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**1513 Career Choice Selection and Satisfaction among US Adult Nephrology Fellows**

*Hitesh H. Shah, Kenar D. Jhaveri, Matthew A. Sparks, and Joseph Mattana*  
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## Mini-Reviews

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*Guillaume Bollée, Jérôme Harambat, Albert Bensman, Bertrand Knebelmann, Michel Daudon, and Irène Ceballos-Picot*

### **1528** Circulating and Urinary microRNAs in Kidney Disease

*Johan M. Lorenzen and Thomas Thum*

## Special Feature

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### **1535** Comparing Mandated Health Care Reforms: The Affordable Care Act, Accountable Care Organizations, and the Medicare ESRD Program

*Suzanne Watnick, Daniel E. Weiner, Rachel Shaffer, Julia Inrig, Sharon Moe, and Rajnish Mehrotra, on behalf of the Dialysis Advisory Group of the American Society of Nephrology*

### **On the Cover**

*What's the diagnosis?* The image shows a typical lesion (urate tophus) in a patient with hyperuricemia and urate nephropathy. There are multiple causes of hyperuricemia, including inherited disorders of purine metabolism, rapid turnover of purines in neoplasms, tumor lysis syndrome after chemotherapy, a purine-rich diet, or drugs. The most common complications of hyperuricemia include gouty arthritis and urate nephropathy. The characteristic finding in urate nephropathy is the presence of urate crystals in the inner medulla. The crystals are soluble in water, therefore they dissolve on routine histology processing and one can only appreciate outlines of needle-shaped, rectangular, or amorphous crystals with surrounding inflammatory response that consists of lymphocytes, macrophages, and sometimes multinucleated giant cells. This particular image shows outlines of dissolved amorphous crystals in the center, with surrounding mononuclear inflammatory cells, interstitial fibrosis, and tubular atrophy. (Image and text provided by Vanesa Bijol, MD, Brigham and Women's Hospital)