

BILL ANALYSIS

H.B. 2330
By: Guillen
Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Under current Texas law, the performance of a serum creatinine test does not require that a glomerular filtration rate be calculated as part of the test results. With 26 million Americans suffering from chronic kidney disease and millions of others at increased risk, early detection of kidney disease is vital to preventing the disease from escalating to kidney failure. The National Kidney Foundation has concluded that calculating the glomerular filtration rate is the best method for estimating kidney function and determining the stage of kidney disease.

H.B. 2330 requires laboratories performing a serum creatinine test to include glomerular filtration rate in the reported results, allowing medical professionals to diagnose kidney disease as early as possible.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 2330 amends the Health and Safety Code to require a laboratory that performs a serum creatinine test on a sample from a person 18 years of age or older to also calculate and include in the reported results the person's estimated glomerular filtration rate. The bill defines "serum creatinine test" to mean a diagnostic test of a person's blood that measures the level of creatinine present in the blood and "estimated glomerular filtration rate" to mean a calculation of a person's kidney function based on the person's age, race, gender, and the results of a serum creatinine test.

EFFECTIVE DATE

September 1, 2009.