

Title: HEMODIALYSIS TREATMENT MONITORING, ACUTE CARE	
	Scope: Applies to all Allenmore, Auburn, Good Samaritan, and Tacoma General adult inpatient departments where hemodialysis (HD) will be performed.
	Policy Statement: This policy establishes practices for the safe utilization of HD for patients of MultiCare Health System and to minimize the possibility of complications associated with HD. Define the process and maintain appropriate documentation of the hemodialysis treatment in the acute setting. To ensure appropriate orders have been obtained, entered and followed.
	Procedures: I. Physician Responsibilities: 1) Computerized Physician Order Entry (CPOE) will be used by all Nephrologists to provide complete and appropriate orders for each hemodialysis treatment. 2) All hemodialysis documentation will be completed in MultiCare Connect (EPIC). 3) Order sets will be available in MultiCare Connect (EPIC) to cover routine orders that are standard to any hemodialysis treatment. Hemodialysis order sets will be completed and signed by the Nephrologist. II. RN responsibilities: 1) Perform Hemodialysis a. After Nephrologist enters order via CPOE, unit staff will notify the on-call hemodialysis RN. b. The dialysis RN will schedule the run time with the clinical unit. c. The dialysis RN will review hemodialysis orders and labs for appropriateness and completeness. d. The dialysis RN will obtain baseline vitals, respiratory status, assess volume status, obtain and record pre-dialysis weight, and review/obtain pertinent lab results (potassium, sodium, calcium, phosphorus, magnesium, renal function tests, complete blood count) prior to the initiation of hemodialysis treatment.

	<ul style="list-style-type: none"> e. In accordance with the MultiCare Central line policy, the dialysis RN will assess, if present, the central line catheter exit site for signs and symptoms for infection, leakage, or drainage. The dialysis RN will document the central line site assessment in MultiCare Connect (EPC). If necessary, the dialysis RN will coordinate a sterile central line dressing change with MHS primary RN. f. The dialysis RN will notify Nephrologist if there has been any status change or if additional orders need to be obtained to perform the treatment. g. The dialysis RN will review orders and contact pharmacy if any medications are ordered to be given during treatment. h. The hemodialysis machine will be set up per prescription. The prescribed treatment parameters will be documented on the MultiCare Connect (EPIC) hemodialysis flowsheet. The dialysis RN will follow dialysis vendor policy to set up and run the dialysis machine. i. The Nephrologist will be notified of any status change and orders will be obtained as required. All order changes will be documented in MultiCare Connect (EPIC). <p>2) Blood administration during hemodialysis</p> <ol style="list-style-type: none"> 1. MHS Primary RN will initiate blood administration. HD nurse may act and sign as witness. 2. MHS Primary RN must complete blood administration documentation. 3. HD RN is responsible to notify MHS Primary RN immediately of suspected blood reaction and stop the blood transfusion. 4. HD RN is responsible to notify MHS Primary RN of blood completion. <p>3) MHS Primary RN is responsible to complete post-transfusion documentation.</p>
	<p>Related Policies: MHS P & P “Blood and Blood Components Administration and Documentation” “IV Therapy Maintenance of Central Venous Catheter Guideline” “Central Venous Lines : Dressing and Secure ”</p>
	<p>Related Forms:</p> <ol style="list-style-type: none"> a. Acute hemodialysis Order Sets in EPIC b. Hemodialysis Flow Sheet in EPIC c. Blood and blood components documentation navigator
	<p>References: D. Weigand, editor, <u>AACN Procedure Manual for Critical Care</u>, 6th Edition, Copyright 2010</p>
	<p>Point of Contact: VP Careline Development & Administration 403-2808</p>

Approval By: Joint Dialysis Oversight committee North West Kidney (Contracted Vendor) Fresenius (Contracted Vendor) MGSH Medical Executive Committee Tacoma Campus Operations Committee MHS NEC Quality Steering Council	Date of Approval: 2/2013 and 9/2013 9/11/2013 9/16/2013 10/21/2013 10/15/2013 9/30/2013 11/13
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