

ON-CALL NURSE HAEMODIALYSIS INSTRUCTION

Cross References	Anticoagulation- commencement of haemodialysis Heparin free dialysis Vas-cath insertion Chronic haemodialysis patient commencement Vas-cath instillation of anticoagulant/antibiotic lock Daily water testing Monitoring during dialysis Guidelines for adding potassium to dialysate Hypotension and haemodialysis
1. Purpose	To ensure acute dialysis in critical care areas is managed appropriately through the <i>on-call haemodialysis</i> process

2. Process

This policy is to be implemented for on-call haemodialysis throughout St George Hospital. ICU & CICU have access to central RO water and can therefore use a portable RO unit with 1 carbon tank. All other areas require a portable RO unit with 2 carbon tanks using **cold water only**.

The mechanism for calling in the *on call haemodialysis RN* is as follows:

- 2.1 The Consultant / Senior Renal Registrar must inform the **RN in charge of 4W, the on-call haemodialysis nurse or the After Hours Senior Nurse Manager**, regarding the need for acute dialysis.

The NUM or **RN in charge** is responsible for organising staff to attend to the dialysis session either during the shift or as overtime. **Every effort to dialyse the patient within working hours is the priority.**

An overtime record is to be kept and shared amongst the staff. A maximum of 2 hours overtime will occur before calling the *on-call nurse* to complete the dialysis.

N.B. 2 Staff are required to dialyse on 4 west (either the oncall nurse or In charge and a nurse rostered on an afternoon the next day). If an acute patient commences dialysis on 4west after 2030 call the on-call haemodialysis RN to complete the dialysis. The oncall nurse should roster themselves on afternoon shifts whilst on call.

If it is not feasible to dialyse the patient using the staff on duty the *on call haemodialysis RN* is to be contacted. **This should not be done until the following has been performed:**

- 2.2 The *on-call haemodialysis nurse* or 4W In Charge is to consult the Renal Registrar and check the following –

- Does the patient have vascular access?

**DEPARTMENT/UNIT TITLE
Workplace Instruction**

If the patient has had a jugular or subclavian vascath inserted has a chest X-ray been completed and reviewed?

- Confirm the unit (ICU/ICU2/CCU) the patient is in. Note: Dialysis can be performed on any ward (providing the patient is stable and doesn't require monitoring) using the appropriate RO unit.
- What are the orders for the dialysis session?

Duration of dialysis
Fluid off
Heparin
Blood results

- 2.3 Contact the area/Unit to ascertain if the patient is ready for dialysis and check that they are not scheduled for any urgent tests or investigations, which might delay the dialysis.
- 2.4 Contact the After Hours Senior Nurse Manager to advise them that an urgent dialysis is required and that the In Charge nurse or Renal Registrar will be calling the *on call haemodialysis RN via the individual staff mobile or page 842 or 384.*
- 2.5 Arrange the orderly to take the machine and relevant portable RO to the area required.

The responsibilities of the *on call haemodialysis RN* are to:

- Contact the After Hours Senior Nurse Manager when they arrive at the hospital and when they are leaving.
- Check water quality (see nursing procedure) prior to commencing any outlying dialysis.
- Leave a message for the NUM 4 West indicating the amount of overtime worked for Kronos and identify the patient and ward so that further dialysis can be arranged.
- Work afternoon shifts whilst on-call and be flexible and change their shifts to allow the workload and acuity to be safely managed.
- Be aware overtime commences when they arrive at the hospital.
- Be aware of vas cath lock requirements following insertion (anticoagulant required for patients in ICU) 4west patients require gentamicin and saline lock.

3. Network file location/ reference, if applicable	\\Sesahs\chn\STG\STGRenal\Public\Protocols\Hdx protocols\Protocols 2014
4. External References / Further Reading	
5. Specialty/Department Committee Approval	

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Revision and Approval History

Date published	Revision number	Author/Contact Officer (Position)	Date due for revision
Jan 2015	2	Tracey Blow: NUM 4West	Nov 2018
Jan 2015	2	Ivor Katz: Nephrologist	Nov 2018