


Name of Policy: <u>Emergency Hemodialysis On-Call Protocol</u> Policy Number: 3364-118-21 Department: End Stage Renal Disease Program/ Hemodialysis (Nursing Service) Approving Officer: Chief Nursing Officer Responsible Agent: Assistant Nursing Director, Hemodialysis Unit Scope: The University of Toledo Medical Center	 Effective Date: June 1, 2023 Initial Effective Date: November, 1984
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy </div> <div> <input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy </div> </div>	

(A) Policy Statement

Personnel coverage is available for emergency situations during the hours that the unit is not in normal operation.

(B) Purpose of Policy

1. To establish criteria for emergency hemodialysis.
2. To familiarize hemodialysis personnel with the duties of on-call.
3. To standardize the procedure of on-call in hemodialysis.
4. To enable hemodialysis personnel to function under unusual circumstances while actively involved in an on-call situation.

(C) Procedure

1. When hemodialysis is needed for a medical emergency, the Nephrology Fellow, or Attending Nephrologist should contact the House Supervisor. The House Supervisor will contact the hemodialysis on-call personnel.
 - a. Criteria for emergency hemodialysis include: Class I and Class II priorities see Policy 3364-118-04
 1. Life-threatening hyperkalemia (serum K > 7.0 mEq/L)
 2. Acute pulmonary edema
 3. Uremic encephalopathy
 4. Acute intoxications
 5. Other life threatening conditions amenable to extracorporeal therapy.
 6. Any condition that the Nephrologist on call determines to be justified.
 - b. It is expected that a physician credentialed to write hemodialysis orders (either directly or under supervision) will have written such orders prior to the initiation of treatment. The on-call nurse is not to be utilized to assess the need for dialysis.
 - c. All instances of emergency hemodialysis will be reviewed for appropriateness of care by the Performance Improvement Team.
 - d. Vascular access must be available prior to notification of staff to report for treatment.
 - e. The on-call nurse should be available at all times.
 - f. In the event the dialysis on-call person cannot be reached, the House Supervisor should call other dialysis staff until a person can be reached to come in.

2. The on-call nurse is to be available to arrive within one hour of being contacted.
3. If the patient is dialyzed in the acute dialysis unit, the House Supervisor should be notified if additional staff is needed for the patient.
4. Staff nurses employed in Acute Hemodialysis will take call. A new employee in Acute Hemodialysis will take call after an appropriate orientation. The Nursing Director and Lead Nurse will do a complete evaluation before assigning on-call responsibilities.
5. On days that the unit is closed, on-call starts at 7:00 am and continues until 7:00 am the following day. On days the unit is open on-call starts at the end of the regularly scheduled staff's shift, and continues until the regular unit opening hours the following day.
6. A person, who is unable to take call as assigned due to illness, will notify the House Supervisor. Back-up on-call will then be arranged by the Nursing Director.
7. The On-call schedule will be available to the House Supervisor via API. In the event the schedule needs to be changed, it is the responsibility of the involved parties to notify Nursing Service.
8. Beepers are provided to each on-call staff nurse. The nursing office will be notified of any new Hemodialysis staff and their corresponding contact numbers (home, cell phone and/or pager).
9. The House Supervisor will attempt to call the on-call nurse using the primary number initially. A secondary phone number is mandatory for all staff taking call.

<p>Approved by:</p> <p>/s/ _____ Date _____</p> <p>Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer</p> <p><i>Review: Policy & Standard Committee, 8/11, 8/14, 12/22, 6/2023</i></p>	<p>Review/Revision Date:</p> <p>1981 10/98 1982 2/00 1983 7/02 1984 7/03 1985 7/05 1986 11/06 1987 6/07 1988 1/23/2008 1989 8/2011 7/90 8/2014 9/91 10/2017 1/93 11/2019 4/94 12/2022 3/95 6/1/2023 4/96 9/97</p>
	<p>Next Review Date: 6/2026</p>
<p>Policies Superseded by This Policy:</p>	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.