


Name of Policy:	<u>Emergency Reverse Osmosis (RO) Water Supply</u>	 Effective Date: 10/1/2023 Initial Effective Date: December, 1990				
Policy Number:	3364-118-29					
Department:	End Stage Renal Disease Program/ Hemodialysis (Nursing Service)					
Approving Officer:	Chief Nursing Officer (CNO)					
Responsible Agent:	Nursing Director, Hemodialysis Unit					
Scope:	The University of Toledo Medical Center					
<table> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input type="checkbox"/> Major revision of existing policy</td> <td><input checked="" type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>			<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy
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(A) Policy Statement

The Hemodialysis Unit will have procedures in place in the event of a breakdown in the reverse osmosis water supply.

(B) Purpose of Policy

To ensure a stable supply of water for hemodialysis.

(C) Procedure

1. Notify the Technology Support Services immediately of any problems.
2. Notify the Medical Director, Assistant Nursing Director, and the House Supervisor (HS) in the event of a problem.
3. In the event the system cannot be repaired quickly and/or patient need exceeds the equipment capability, arrangements will be made with other dialysis units to transfer patients temporarily. This decision would be made by the Medical Director after consultation with the HS and Nursing Director of the unit.
4. For patients unable to be transferred, portable RO machines will be used (procured from other facilities if needed) for duration of failure.

Approved by: /s/ Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer Date Review: Policy & Standard Committee, 8/11, 8/2014, 9/2020, 10/2023 Revision Completed By: Tana Cepek, Lead RN, Hemodialysis Unit	Review/Revision Date: 11/91 8/2014 1/93 10/2017 4/94 9/2020 3/95 10/2023 4/96 9/97 10/98 2/00 7/02 7/03 7/05 11/06 6/07 12/23/2008 8/2011 Next Review Date: 10/1/2026
Policies Superseded by This Policy:	

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