Medication Management for Dialysis Patients
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Background

- Both chronic hypertension and intradialytic hypotension lead to adverse long-term outcomes
- Blood pressure issues during dialysis treatments lead to treatments being cut short, decreasing the vital needs of these patients
- Medication management of blood pressure of a Hemodialysis patients prior to treatment decreases risk of early cessation of treatments
- Frequent cessation of dialysis treatments secondary to blood pressure means these patients are not getting adequate dialysis which can lead to worsening of their disease and shortened life expectancy

Measures and Results

- Admission checklist distributed to floor nurses
- Pre dialysis checklist distributed to floor nurses
- Surveys distributed to Dialysis nurses

Practice Change

Implement nursing checklist for dialysis patient admissions, predialysis and dialysis nursing surveys

Conclusion

- Rates of early cessation of Hemodialysis treatment can be lowered with management of blood pressure during inpatient and outpatient settings
- The largest barrier is compliance of the patient and ability to get collaboration from all parties involved in patient care
- Education projects written or presented can help to show the importance to nurses and providers of the overall management of these patients and importance of collaboration of care

Education

血壓管理與腎透析

Why is Blood pressure management important prior to Dialysis treatment?
Patients with Chronic kidney disease (CKD) have a higher prevalence of hypertension, 40%-60% (Syrigou, 2013).
Studies have shown that controlling blood pressure during dialysis as well as controlling medication in pre-dialysis can reduce cardiovascular events and mortality.
Blood pressure control can be maintained by:
- Medication administration
- Diet plan
- Dialysis management

Add medications as a nurse when dialysis is started to early due to hypertensive exacerbation
- Overall well being of patients on hemodialysis technique
- Medication management of Blood pressure
- Unstable
- Dietary Management
- Compliance with treatments

FLOOR NURSE ADMISSION CHECKLIST

- Is the patient on anti-hypertensive medications?
  - Yes
  - No
- Review medication list with nephrologists during rounds to determine prescriptions that need to be held or given prior to dialysis
- Was a nurse communication placed in the patient chart about medications to be held or given prior to dialysis?
  - Yes
  - No
- Give medications prior to dialysis.
- Upon the return of the patient to the floor, did the patient tolerate treatment?
- Comments:

DIALYSIS NURSE SURVEY

- Did the patient take anti-hypertensive medication prior to dialysis today?
  - Yes
  - No
- Did the patient have to stop treatment today due to a complication with blood pressure?
  - Yes
  - No
- Was the patient blood pressure controlled during treatment?
  - Yes
  - No
- Was the checklist helpful?
  - Yes
  - No

Additional Comments:

Next Steps:

- Educate all parties involved in patient’s care including nurses and providers on why the admission checklist and dialysis checklist is being done
- Compile data and assess outcome with patients, was treatment finished and if there was any adverse complications

Barriers to this Study:
- Lack of capacity and participation of surveys

Survey Results:

- Rates of early cessation of Hemodialysis treatment can be lowered with management of blood pressure during inpatient and outpatient settings
- The largest barrier is compliance of the patient and ability to get collaboration from all parties involved in patient care
- Education projects written or presented can help to show the importance to nurses and providers of the overall management of these patients and importance of collaboration of care