

ACUTE CARE PLAN (OREM)

Ward:

Surname	Unit No
Forename	NHS No
Address	DOB
Postcode	(or affix patient label)

Date	Self- Care Strength	Signature /Comments
	Self –Care Deficit	
	Acute Renal Failure Unable to maintain own renal function	
	Goal	
	To Maintain blood levels within acceptable limits and to maintain own renal function	
	Nursing Action/ Instruction	
	a) Liaise with medical staff for specific instructions re: dialysis treatment plan b) Ensure MSSA screen has been taken prior to line insertion in accordance with policy: screening and management of staph aureus carriage in renal patients	
Date	1. Dialyser 140G Concentrate Renalyte A224 Bibag 650G Normal Saline 0.9% 1500mls (See No 13)	Signature

	<p>2. Perform Dialysis As Follows:</p> <p>First Treatment 2 Hours 180 Pump Speed</p> <p>N.B If pre dialysis potassium level is below 3 mmols or above 6 mmols request check U&E four hour post dialysis. Instruct ward staff to inform medical staff of result</p> <p>Second Treatment 3 Hours 200mls / min pump speed</p> <p>N.B If patient stable and access enables titrate to maximum of 250mls / min pump speed</p> <p>Subsequent Treatments 4 Hours Pump Speed as Second treatment</p>	
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	3. Record blood pressure and pulse pre and post dialysis. Monitor at least every 15 minutes according to stability of patient	
	4. If ultrafiltration required and patient is unstable, liaise with medical staff whether albumin is required	
	<p>5. Perform and record act clotting times every 15 – 30 minutes as denoted by act results. Administer heparin or saline flush as required</p> <p>N.B See SNCP11 for guidance</p>	
	6. Perform and record blood sugar levels and repeat as necessary	
	7. Perform and record body temperature using tympanic thermometer	
	8. Ascertain Hep B and C status, take blood sample if necessary. Dialyse patient in an isolated space and isolate machine until negative status confirmed and documented	
	9. Ensure patient information sheet and dialysis care plan is completed by the end of first treatment	
	10. Review blood results and fluid status daily and liaise with renal medical staff	
	11. After 72 hours dialysis sessions, review with patients consultant for routine dialysis prescription of minimum 1.2 KT/V. Ensure haemodialysis prescription chart is written	

	12. Ensure after first dialysis treatment clerical staff register patient on database	
Date	<p>13. N.B Normal saline 0.9% 1500ml iv over dialysis session (prime, reinfusion and bolus infusion to treat hypotension / symptomatic episode)</p> <p>First Treatment Batch No:</p> <p>Second Treatment Batch No:</p> <p>Subsequent Treatments Batch No:</p>	<p>Signature</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Date	<p>14. Lock Catheter with Citralock 30% according to line lumen length unless prescribed otherwise</p> <p>First Treatment Batch No:</p> <p>Second Treatment Batch No:</p> <p>Third Treatment Batch No:</p> <p>Subsequent Treatments Batch No:</p>	<p>Signature</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>

Review Date: September 2019