VALLEYCARE OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS POLICY & PROCEDURE

NUMBER: 988 VERSION: 1

SUBJECT/TITLE: HEMODIALYSIS PHYSICIAN'S REQUEST FORM

POLICY:	When Hemodialysis is required for a patient at Olive View-UCLA Medical Center, the Administrative Nursing Office Nurse Manager/Designee will initiate the request utilizing the attached "Hemodialysis Physician's Request Form" completed by physician. To facilitate and anticipate the preparation for the hemodialysis procedure.		
PURPOSE:			
DEPARTMENTS:	ALL		
DEFINITIONS:	Refers to a written instrument designed for the sole purpose of ordering hemodialysis.		
PROCEDURE:	STEPS/KEY POINTS:		
	 The Renal Fellow completes the pre and post dialysis orders. Dialysis orders <u>must</u> be signed by Physician <u>and RN in charge</u> of patient. The "Hemodialysis Physician's Request Form" can be found on the ValleyCare Intranet under Medical Records Forms. The original copy is placed in the patient's chart. The unit clerk delivers or faxes the "Dialysis Nurse Copy" of the physician orders to the Administrative Nursing Office - ANO (2C210) <u>upon completion of the written orders</u>. The Administrative Nursing Office Nurse Manager/Designee then requests dialysis from the contract agency. The Dialysis Agency Nurse signs and picks up the "Dialysis Nurse Copy" of the orders in ANO. If there are medications to be given during dialysis, a copy is faxed or scanned to Pharmacy by the Dialysis Nurse. The Administrative Nursing Office Nurse Manager/Designee logs the dialysis request in the dialysis logbook, which is kept in ANO (2C210). 		
	POINTS TO EMPHASIZE:		
	 a. The pre- and post-dialysis order sheet <u>must</u> be filled out completely before the request for dialysis will be initiated. There are no daily or standing orders for Hemodialysis. The 		

SUBJECT/TITLE: HEMODIALYSIS PHYSICIAN'S REQUEST FORM

Policy Number: 988
Page Number: 2

b. c.	orders are specific for only one (1) dialysis treatment. The patient must have a patent access prior to the request for dialysis. All requests for dialysis must be submitted through the (ANO). The patient's name, medical record number, and room number must be available to the Administrative Nursing Office Nurse Manager/Designee.

References:		
Approved by: VEC-2015 Jan	Date: 08/28/2012	
Review Date: 08/28/2015 , 3/99, 2/02, 12/04, 11/06, 10/09	Revision Date: 5/93, 2/96, 3/04, 10/10	
Distribution: Olive View Hospital-Wide Policies, Provision of Care		
Original Date: 6/92		