

Transitioning Hemodialysis to POE

The Problem

Paper-based order sets were used in the Inpatient Hemodialysis (HD) Unit. This manual process lacked the same quality and safety “checks” of the hospital’s electronic systems, and required Renal Fellows to be physically present in the HD Unit to write orders. Additionally, Inpatient Services had limited insight into when treatment was scheduled, and the medications that would be given in HD.

Aim / Goal

Successfully transition the Hemodialysis Unit from paper-based systems to the hospital’s electronic provider order entry system (POE) to decrease variability, increase transparency, and improve patient safety .

The Team

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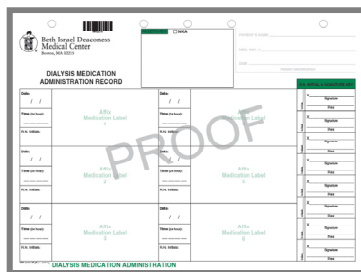
The Interventions

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A sanctioned Hemodialysis environment was created within POE where only HD staff can enter and activate HD orders, but orders are visible to all POE users.

The environment went “live” in June 2011.

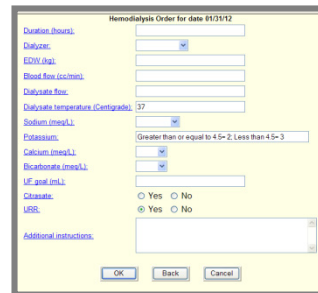


A Dialysis specific Medication Administration Record (MAR) was developed to ensure providers could easily identify what was given in HD.

The Results

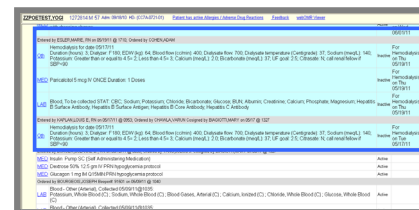
Decreased Variability

Hemodialysis Fellows and Attending now have a standardized way to enter orders anywhere on campus.



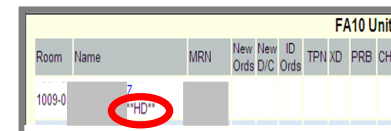
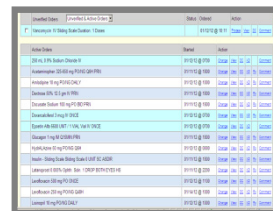
Increased Transparency

A “HD Orders” notification appears on the Inpatient Floor Dashboard when orders are written by Renal staff for medications or interventions to be administered during dialysis. Orders are visible to all POE users, and appear in light blue.



Improved Patient Safety

The Pharmacist who reviews the patient’s floor based orders also reviews the patient’s Hemodialysis orders to enable awareness of all the medications the patient is receiving.



“HD” appears on the Pharmacist’s dashboard when the patient is checked-in at HD so any special medications are sent to the appropriate location.

Next Steps

Continue to monitor implementation and develop proactive alerts to inform Renal Staff when a dialysis patient is admitted to BIDMC.