

## **DIALYSIS BY AVAILABLE SLOT: RECOMMENDED GUIDELINES**

“Dialysis by Slot” is an unorthodox hemodialysis treatment regimen designed for those patients who chronically skip assigned dialysis treatment times. It is intended as a last ditch effort in the treatment team’s efforts to help the patient.

It is important that all other measures be attempted first; that is, all corporate guidelines have been followed and every step in the ESRD Network of Texas’ booklet, “Intensive Intervention for the Non-Compliant Patient” have been followed before this regimen is applied. It is also important that the entire treatment team be informed and aware that this extreme measure is in place and that each individual member be in agreement before it is attempted.

It is recommended that the patient be informed before this regimen is implemented that if s/he skips *one more treatment* this regimen will be mobilized.

**Step One.** The procedure of “Dialysis by Slot” is explained to the patient by the entire treatment team if possible, or by a member and representative of the team. The following must be covered in detail with the patient:

- The circumstances that led to the treatment team’s decision to use this extreme measure;
- The short term and long term risks to the patient’s health and wellness as a result of not receiving regularly scheduled dialysis (no doubt these have already been discussed, but it is best to review them yet again);
- How the patient is to access treatment at the clinic under this protocol, including:
  - The name and phone number of a contact person (such as clinic manager, charge nurse, social worker);
  - Business hours of the clinic with instructions to call after hours only during emergencies;

If the patient agrees to the protocol, s/he is asked to sign an agreement acknowledging the risks involved and agreeing to the conditions of the protocol [see sample agreement, Appendix A].

**Step Two.** The patient is not assigned a treatment time. If the patient already has a treatment time, the treatment slot may be given to another patient.

**Step Three.** The patient decides when he/she needs a dialysis treatment.

**Step Four.** The patient calls the designated contact and requests a dialysis treatment.

**Step Five.** The designated contact will check the schedule and see where the next slot will come open. The slot will vary, depending on the census and whether any other patients are in the hospital or traveling. The open slot may fall on any day, any shift.

**Step Six.** The patient is told what slot is available and is instructed to come to the clinic 30 – 60 minutes prior to the scheduled time.

**Step Seven.** When the patient walks into the clinic the charge nurse or her designee will assess him/her.

- If the patient is excessively uremic, and the nurse feels that the patient is unstable and not safe to dialyze, the nurse will instruct the patient to go to the emergency room;
- If the nurse feels that the patient is at imminent risk, an ambulance should be called to take the patient to the emergency room;
- If the charge nurse determines, according to clinic protocol, that the patient is stable and can undergo outpatient dialysis, the patient should be instructed to wait while the machine is set up;

**Step Eight.** The staff will set up a machine for the patient after the charge nurse or her designee determines that the protocol allows for safe dialysis in the clinic.

**Step Nine.** The patient will receive dialysis according to prescription. ***While the patient is in the clinic receiving dialysis s/he must follow all rules and abide by all patient responsibilities the same as all other patients.***

**Step Ten.** When the patient's treatment is complete, or when the last patient on the last shift comes off the machine, *whichever comes first*, the patient will be taken off the machine.

The patient may contact the clinic again whenever s/he determines that s/he needs another treatment and ask for another slot.

**The above steps are repeated every time the patient determines the need for a dialysis treatment.**

**APPENDIX A**

**AGREEMENT FOR “DIALYSIS BY SLOT”**

I, \_\_\_\_\_, understand that my doctor, \_\_\_\_\_ and my dialysis clinic, \_\_\_\_\_, have attempted to provide top quality medical care for me, but have not been able to because I have not followed their requests and instructions. Because of this, in their effort to help me, they have offered, and I have agreed, to provide me dialysis according to the procedure known as “Dialysis by Slot.”

The staff at my dialysis clinic has explained the procedure to me and I understand it fully. I am aware that this is NOT the best possible care they can offer me, but they are doing this as a last resort in order to help me stay healthy and alive. I have had ample opportunity to ask questions and any and all my questions have been answered to my satisfaction.

**\_\_\_\_ I UNDERSTAND THAT THIS IS NOT THE BEST MEDICAL CARE THAT  
\_\_\_\_ MY DOCTOR AND MY CLINIC CAN PROVIDE, BUT THEY HAVE NO  
\_\_\_\_ OTHER CHOICE. THEY HAVE OFFERED ME THIS PROGRAM AS A  
\_\_\_\_ LAST RESORT IN AN EFFORT TO PRESERVE MY HEALTH AND LIFE.  
\_\_\_\_ I INDICATE MY UNDERSTANDING OF THE SERIOUSNESS OF MY  
\_\_\_\_ PAST BEHAVIOR AND THE CLINIC’S EFFORTS ON MY BEHALF BY  
\_\_\_\_ PLACING MY INITIALS ON EVERY LINE OF THIS PARAGRAPH.**

\_\_\_\_\_  
Patient

\_\_\_\_\_  
Family Member

\_\_\_\_\_  
Nurse/Manager

\_\_\_\_\_  
Physician

\_\_\_\_\_  
Dietitian

\_\_\_\_\_  
Social Worker