

Chronic Maintenance In-Center Hemodialysis Standing Orders – Braun Adimea

Braun Adimea for Achieving Dialysis Adequacy (Braun Evolution Machines only)

1. Use:

- a. Monitor all patients dialyzing **3 times** per week in locations where Adimea equipment (Braun Evolution machine) is available unless otherwise ordered by nephrologist.
- b. Do not use for patients dialyzing greater than or less than 3 times per week.
- c. Do not use on sequential or UF-only treatments.

2. Single Pool Kt/V (spKt/V) Goal: 1.4 unless otherwise prescribed by nephrologist.

3. Dialysis Parameter Adjustments

a. Target Will Not Be Reached Alarm

- i. If alarm occurs treatment staff should:
 1. Check that dialysate flow rate and blood flow rate are set per prescription.
 2. Check access.
 3. Look for clotting.
 4. Notify nurse if trend line continues to indicate that target will not be reached.
- ii. The Nurse may, if prescription is correct, there is no indication of clotting, and the arterial and venous line pressures are in acceptable range:
 1. Increase dialysate flow rate up to a maximum of 800 ml/min.
 2. Increase blood flow rate in increments of 20 ml/min up to a maximum of 450 ml/min as long as line pressures are within usual NKC limits (above -300 mmHg for arterial and below +300 mmHg for venous.)
 3. If there is no improvement in the trend line with increased blood flows, decrease the blood flow in 20 ml/min increments from reading prior to the

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increases in flow rate. If trend line improves with slower blood flow recirculation may be present in the access. Schedule recirculation studies (ICD9 585.6) to be drawn on next treatment.

b. Target Reached Early

- i. If trend line indicates that target will be reached early and arterial and venous pressures are within 50 mmHg of their usual and there is no indication of clotting, **do not change the dialysis time, blood flow or dialysate flow.**
- ii. Do Recirculation Studies (ICD9 585.6)
 1. On current run if within the first quarter of the run
 2. If past the first quarter of the current run do the recirculation studies on the next run.

4. Notify Physician if

- a. Treatment adjustments are made during 3 consecutive dialysis runs.
- b. If clotting problems are discovered.
- c. If access problems are discovered.

Physician Name (Please Print)

RN Name (Please Print)

Physician signature
(see referral sheet)

RN signature

Date

Patient Name _____

Revised 07/11/2013

NKC# _____

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