Dialysis Perspective

Improving Transitions of Care for Kidney Patients:

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Transition of Care

DialysisHospital

Dialysis Primary Care

DialysisSkilled Care

Communication is Key

300 K Hospitalizations 33% Readmissions

Barriers

- Don't know that the patient was hospitalized
- Don't know that the patient was in the ER
- Don't know that the patient saw Primary Care
- Don't know that the patient moved to SNF
- Don't know that the patient has an infection or wound
- Don't know patient received transfusion
- Don't know the patient has a change in medications, advance directive, etc.

Transition of Care BDP

- Discharge Summaries
- Medication Management
- Labs
- Treatment changes

Foundation

Dialysis Prescription Adjustment

- Target Weight assessment
- Updated Treatment Orders

Medication Self-Management

- Medication Changes or adds
- Does the patient have the prescription filled

Care Follow-up

- Does the patient have appointments upcoming
- Comorbid changes

Why?

- Communication leads to improved quality of life!
- Decreased Hospitalizations
- Continuity of Care