

PD PLANNER

Starting and keeping patients on PD therapy:
A Guide to the first 90 days



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Welcome to the Baxter PD Planner, your fully interactive PD calendar and checklist for patient success in the first 90 days of PD therapy.

This PD Planner is designed to help you keep your patients on PD therapy within the first 90 days and beyond. In this PD planner, you will find:

- Suggested checklists that will guide you through what items to discuss and when with your patients
- A calendar centered around your PD patient's journey to help you track your patient's training
- Best demonstrated practices that can help your patients from dropping off of PD due to the four main causes⁸
 - Infection
 - Catheter complications
 - Adequacy related factors
 - Psychosocial related factors



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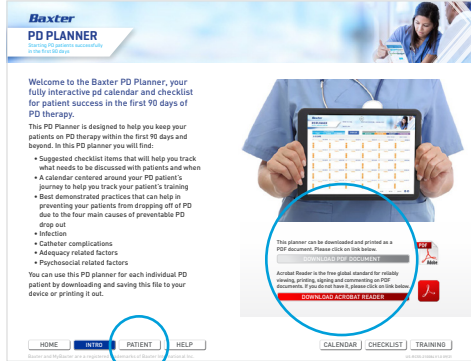
[CALENDAR](#)

[CHECKLIST](#)

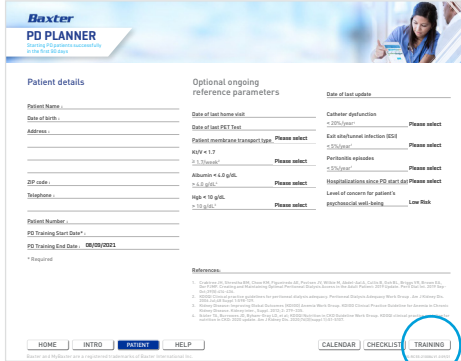
[TRAINING](#)



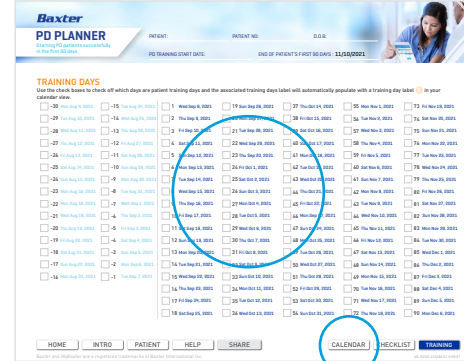
Tips for making the most of your PD planner



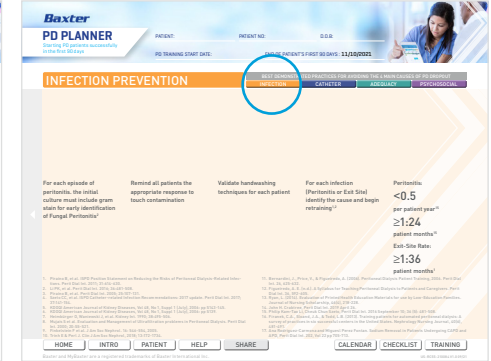
1. Check if you have Acrobat Reader on your PC or tablet. If not, click on the download button. Click PATIENT to begin.



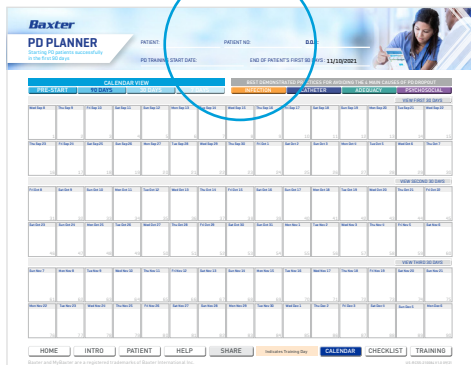
2. Fill in the PD training start date. Then click TRAINING to take you to your training page.



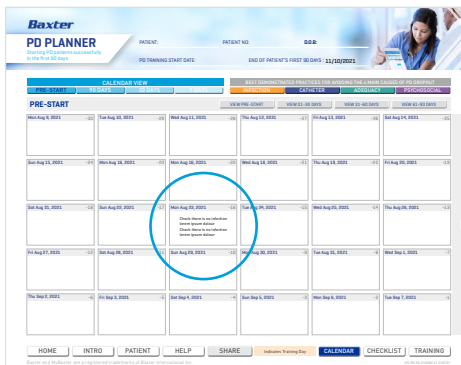
3. Check the box on the days you are training. If training days change, go back to this page and amend. Then press the CALENDAR to continue.



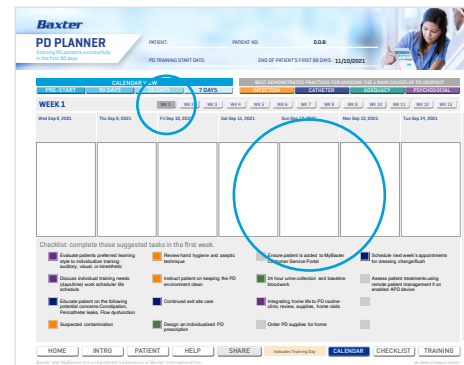
4. On any page, the 'Best Demonstrated Practices' can be viewed by clicking the color coded buttons. Return to the previous page using the left arrow.



5. Patient details will be displayed on each calendar view. Your training days will also be visible.



6. The 1-30 day view has more visible space for each day to view additional notes.



7. Each weekly view can be found by pressing the buttons in the gray bar or using the left and right buttons. Use this large view to add and edit notes.



8. Remember to save your file every time you close it or your updates will be lost.

PD PLANNER

Starting and keeping patients on PD therapy:
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Patient details (*required)

Patient Name :	<input type="text"/>
Date of birth :	<input type="text"/>
Address :	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
ZIP code :	<input type="text"/>
Telephone :	<input type="text"/>
	<input type="text"/>
Patient Number :	<input type="text"/>
PD Training Start Date* :	<input type="text"/>
PD Training End Date :	<input type="text"/>

Optional ongoing reference parameters

Date of last home visit	<input type="text"/>	Date of last update	<input type="text"/>
Date of last PET Test	<input type="text"/>	Catheter dysfunction ¹	<input type="text"/>
Patient membrane transport type	<input type="text"/>	Exit site/tunnel infection (ESI) ¹	<input type="text"/>
Kt/V < 1.7 ²	<input type="text"/>	Peritonitis episodes	<input type="text"/>
Albumin < 4.0 g/dL ⁴	<input type="text"/>	Hospitalizations since PD start date ¹	<input type="text"/>
Hgb < 10 g/dL ³	<input type="text"/>	Level of concern for patient's psychosocial well-being	<input type="text"/>

Additional Notes:

References:

1. Crabtree JH, Shrestha BM, Chow KM, Figueiredo AE, Povlsen JV, Wilkie M, Abdel-Aal A, Cullis B, Goh BL, Briggs VR, Brown EA, Dor FJMF. Creating and Maintaining Optimal Peritoneal Dialysis Access in the Adult Patient: 2019 Update. *Perit Dial Int.* 2019 Sep-Oct;39(5):414-436.
2. KDOQI Clinical practice guidelines for peritoneal dialysis adequacy. *Peritoneal Dialysis Adequacy Work Group* . *Am J Kidney Dis.* 2006 Jul;48 Suppl 1:S98-129.
3. Kidney Disease: Improving Global Outcomes (KDIGO) Anemia Work Group. KDIGO Clinical Practice Guideline for Anemia in Chronic Kidney Disease. *Kidney inter., Suppl.* 2012; 2: 279-335.
4. Ikizler TA, Burrowes JD, Byham-Gray LD, et al; KDOQI Nutrition in CKD Guideline Work Group. KDOQI clinical practice guideline for nutrition in CKD: 2020 update. *Am J Kidney Dis.* 2020;76(3)[suppl 1]:S1-S107.

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Starting and keeping patients on PD therapy:
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PATIENT: _____

PATIENT NO: _____

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PD TRAINING START DATE: _____

END OF PATIENT'S FIRST 90 DAYS : _____



TRAINING DAYS

Use the checkboxes to check which days are patient training days. The associated training days label will automatically populate with a training day label in your calendar view.

<input type="checkbox"/> -30	<input type="checkbox"/> -15	<input type="checkbox"/> 1	<input type="checkbox"/> 19	<input type="checkbox"/> 37	<input type="checkbox"/> 55	<input type="checkbox"/> 73
<input type="checkbox"/> -29	<input type="checkbox"/> -14	<input type="checkbox"/> 2	<input type="checkbox"/> 20	<input type="checkbox"/> 38	<input type="checkbox"/> 56	<input type="checkbox"/> 74
<input type="checkbox"/> -28	<input type="checkbox"/> -13	<input type="checkbox"/> 3	<input type="checkbox"/> 21	<input type="checkbox"/> 39	<input type="checkbox"/> 57	<input type="checkbox"/> 75
<input type="checkbox"/> -27	<input type="checkbox"/> -12	<input type="checkbox"/> 4	<input type="checkbox"/> 22	<input type="checkbox"/> 40	<input type="checkbox"/> 58	<input type="checkbox"/> 76
<input type="checkbox"/> -26	<input type="checkbox"/> -11	<input type="checkbox"/> 5	<input type="checkbox"/> 23	<input type="checkbox"/> 41	<input type="checkbox"/> 59	<input type="checkbox"/> 77
<input type="checkbox"/> -25	<input type="checkbox"/> -10	<input type="checkbox"/> 6	<input type="checkbox"/> 24	<input type="checkbox"/> 42	<input type="checkbox"/> 60	<input type="checkbox"/> 78
<input type="checkbox"/> -24	<input type="checkbox"/> -9	<input type="checkbox"/> 7	<input type="checkbox"/> 25	<input type="checkbox"/> 43	<input type="checkbox"/> 61	<input type="checkbox"/> 79
<input type="checkbox"/> -23	<input type="checkbox"/> -8	<input type="checkbox"/> 8	<input type="checkbox"/> 26	<input type="checkbox"/> 44	<input type="checkbox"/> 62	<input type="checkbox"/> 80
<input type="checkbox"/> -22	<input type="checkbox"/> -7	<input type="checkbox"/> 9	<input type="checkbox"/> 27	<input type="checkbox"/> 45	<input type="checkbox"/> 63	<input type="checkbox"/> 81
<input type="checkbox"/> -21	<input type="checkbox"/> -6	<input type="checkbox"/> 10	<input type="checkbox"/> 28	<input type="checkbox"/> 46	<input type="checkbox"/> 64	<input type="checkbox"/> 82
<input type="checkbox"/> -20	<input type="checkbox"/> -5	<input type="checkbox"/> 11	<input type="checkbox"/> 29	<input type="checkbox"/> 47	<input type="checkbox"/> 65	<input type="checkbox"/> 83
<input type="checkbox"/> -19	<input type="checkbox"/> -4	<input type="checkbox"/> 12	<input type="checkbox"/> 30	<input type="checkbox"/> 48	<input type="checkbox"/> 66	<input type="checkbox"/> 84
<input type="checkbox"/> -18	<input type="checkbox"/> -3	<input type="checkbox"/> 13	<input type="checkbox"/> 31	<input type="checkbox"/> 49	<input type="checkbox"/> 67	<input type="checkbox"/> 85
<input type="checkbox"/> -17	<input type="checkbox"/> -2	<input type="checkbox"/> 14	<input type="checkbox"/> 32	<input type="checkbox"/> 50	<input type="checkbox"/> 68	<input type="checkbox"/> 86
<input type="checkbox"/> -16	<input type="checkbox"/> -1	<input type="checkbox"/> 15	<input type="checkbox"/> 33	<input type="checkbox"/> 51	<input type="checkbox"/> 69	<input type="checkbox"/> 87
		<input type="checkbox"/> 16	<input type="checkbox"/> 34	<input type="checkbox"/> 52	<input type="checkbox"/> 70	<input type="checkbox"/> 88
		<input type="checkbox"/> 17	<input type="checkbox"/> 35	<input type="checkbox"/> 53	<input type="checkbox"/> 71	<input type="checkbox"/> 89
		<input type="checkbox"/> 18	<input type="checkbox"/> 36	<input type="checkbox"/> 54	<input type="checkbox"/> 72	<input type="checkbox"/> 90

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Nurse Checklist: for PD patient success in the first 90 days on PD therapy

For more detail, view this checklist in the 7-day views in the calendar. Items can be checked off either here or in the 7-day views.

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

PRE-START

CHECKLIST VIEW

PRE-START

MONTH 1

MONTH 2

MONTH 3

- Describe high quality, goal directed care and the concept of "Shared Decision Making"¹⁸
- Discuss how PD daily removes fluid & waste from the body
- Explain the difference between CAPD & APD
- Discuss the steps involved in PD therapy: Drain, Fill, Dwell
- Evaluate patient understanding and expectations of therapy
- Explain the PD catheter and how it is placed
- Select the right exit site location
- Provide pre-procedure instructions

- If PD placement is scheduled:
 - Explain post-procedure care and healing time of the catheter
 - Post-procedure instructions reviewed, and written instructions given to patient
 - Post-procedure dressing change at Day 5-10 unless there is obvious signs of bleeding or infection¹⁴
 - Assess exit site and tunnel for trauma, s/s infection
 - Instruct patient on daily exit site and catheter routine
 - Review list of RN contact and resources for ongoing support
 - Low volume PD exchanges to break in catheter¹⁴

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BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION **CATHETER** **ADEQUACY** **PSYCHOSOCIAL**

MONTH 1	CHECKLIST VIEW		
	PRE-START	MONTH 1	MONTH 2
<p>Week 1</p> <ul style="list-style-type: none"> <input type="checkbox"/> Evaluate patient's preferred learning style to individualize training: auditory, visual, or kinesthetic¹¹ <input type="checkbox"/> Discuss individual training needs (days/time) work schedule/ life schedule <input type="checkbox"/> Educate patient on the following potential concerns: <ul style="list-style-type: none"> <input type="checkbox"/> Constipation <input type="checkbox"/> Pericatheter leaks <input type="checkbox"/> Flow dysfunction <input type="checkbox"/> Suspected contamination <input type="checkbox"/> Review hand hygiene and aseptic technique <input type="checkbox"/> Instruct patient on keeping the PD environment clean <input type="checkbox"/> Continued exit site care <input type="checkbox"/> Design an individualized PD prescription <input type="checkbox"/> Ensure patient is added to MyBaxter Customer Service Portal <input type="checkbox"/> 24 hour urine collection and baseline bloodwork <input type="checkbox"/> Integrating home life to PD routine- clinic review, supplies, home visits <input type="checkbox"/> Order PD supplies for home <input type="checkbox"/> Schedule next week's appointments for dressing change/flush <input type="checkbox"/> Assess patient treatments using remote patient management if on enabled APD device 	<p>Week 2</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proactively contact patient to provide support and evaluation. Assess individual support needed (work, home, school, family/lifestyle) <input type="checkbox"/> Identify where your patient is on the grief cycle <input type="checkbox"/> Explain importance of waste-disposal <input type="checkbox"/> Review how to assess effluent for cloudiness <input type="checkbox"/> Assess exit site and tunnel for trauma, s/s infection <input type="checkbox"/> Review peritonitis and antibiotic protocols-how to manage after hours <input type="checkbox"/> Review clinic's afterhours policy regarding possible contamination along with on-call contact info <input type="checkbox"/> Assess any barriers (modality related: peritonitis, catheter, exit site and tunnel infections) <input type="checkbox"/> Schedule next week's appointments 	<p>Week 3</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proactively contact patient to provide support and evaluation and congratulate them on their PD journey <input type="checkbox"/> Schedule next week's appointments and schedule a PET test between 4-8 weeks⁶ <input type="checkbox"/> Have patient take inventory of home supplies <input type="checkbox"/> Review the importance of retraining including:¹ <ul style="list-style-type: none"> <input type="checkbox"/> Dialysis exchange procedures <input type="checkbox"/> Hand-washing techniques <input type="checkbox"/> Recognition of signs and symptoms of peritonitis <input type="checkbox"/> Recognition of contamination and the appropriate response to it <input type="checkbox"/> Exit site care 	<p>Week 4</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proactively contact patient to provide support and evaluation <input type="checkbox"/> Discuss patient's sleep patterns and getting a good night's sleep on PD <input type="checkbox"/> Discuss patient's exercise schedule and its importance to wellness <input type="checkbox"/> Discuss any individual support needs: Work/Home/Family/School/Lifestyle <input type="checkbox"/> Schedule next week's appointments <input type="checkbox"/> Remind patient of upcoming specimen collection procedure <input type="checkbox"/> Review mobile ordering with patient and order supplies as needed

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Nurse Checklist: for PD patient success in the first 90 days on PD therapy

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BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION **CATHETER** **ADEQUACY** **PSYCHOSOCIAL**

MONTH 2 **CHECKLIST VIEW**

PRE-START MONTH 1 MONTH 2 MONTH 3

- | | | | |
|--|---|---|---|
| <p>Week 5</p> <ul style="list-style-type: none"> <input type="checkbox"/> Monthly evaluation of the patient⁵ <input checked="" type="checkbox"/> Bloodwork to assess for appropriateness of the PD prescription including dwell time and dialysate tonicity <input checked="" type="checkbox"/> Review of fluid balance: BP/ Temp/ Weight/Vital signs <input checked="" type="checkbox"/> Assess any changes in RKF <input checked="" type="checkbox"/> Assessment of nutritional status; estimation of dietary protein intake <input type="checkbox"/> Review of hand hygiene and aseptic technique and reminders of proper exit site care <input type="checkbox"/> Ensure catheter is secure <input type="checkbox"/> Compliance with treatment plan <input type="checkbox"/> Retraining needs <input checked="" type="checkbox"/> PET evaluation for baseline peritoneal membrane transport characteristics⁶ | <p>Week 6</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assess how is the patient coping and if additional support is needed- Social Worker to conduct a formal "coping evaluation" <input type="checkbox"/> Peer mentor introduction <input checked="" type="checkbox"/> Are there issues with the PET, should it be repeated? | <p>Week 7</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proactively contact patient to provide support and evaluation and congratulate them on their PD journey <input type="checkbox"/> Review patient's support system and provide online support/resource tools <input type="checkbox"/> Identify and document where patient is on the grief cycle/assess for depression and anxiety | <p>Week 8</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proactively contact patient to provide support and evaluation <input type="checkbox"/> Discuss employment and traveling while on PD <input type="checkbox"/> Readdress any barriers (system-related: education, training) <input type="checkbox"/> Discuss any individual support needs: Work/Home/Family/School/Lifestyle |
|--|---|---|---|

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BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION **CATHETER** **ADEQUACY** **PSYCHOSOCIAL**

MONTH 3 **CHECKLIST VIEW**

PRE-START MONTH 1 MONTH 2 MONTH 3

Week 9

- Monthly evaluation of the patient⁵
 - Bloodwork to assess for appropriateness of the PD prescription including dwell time and dialysate tonicity
 - Review of fluid balance: BP/ Temp/ Weight/Vital signs
 - Assess any changes in RKF
 - Assessment of nutritional status; estimation of dietary protein intake
 - Review of hand hygiene and aseptic technique and reminders of proper exit site care
 - Ensure catheter is secure
 - Compliance with treatment plan
 - Retraining needs
 - Check PD supplies

Week 10

- Complete a home visit in the first 90 days of PD therapy or by completion of patient training¹¹

Week 11

- Proactively contact patient to provide support and evaluation and congratulate them on their PD journey
- Discuss having intimate relationships while on PD

Week 12

- Set up a "refresher" training session for patients
- Review the importance of retraining including:¹
 - Dialysis exchange procedures
 - Hand-washing techniques
 - Recognition of signs and symptoms of peritonitis
 - Recognition of contamination and the appropriate response to it
 - Exit site care
- Discuss any individual support needs: Work/Home/Family/School/Lifestyle
- Readdress any barriers (patient-related: burnout, distance, nutrition, Kt/V)

Week 13

- Proactively contact patient and congratulate them on their PD journey. Assure them that you will continue to provide guidance and support.

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

VIEW FIRST 30 DAYS

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

VIEW SECOND 30 DAYS

31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
46	47	48	49	50	51	52	53	54	55	56	57	58	59	60

VIEW THIRD 30 DAYS

61	62	63	64	65	66	67	68	69	70	71	72	73	74	75
76	77	78	79	80	81	82	83	84	85	86	87	88	89	90

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

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PRE-START

VIEW PRE-START

VIEW 01-30 DAYS

VIEW 31-60 DAYS

VIEW 61-90 DAYS

-30	-29	-28	-27	-26	-25
-24	-23	-22	-21	-20	-19
-18	-17	-16	-15	-14	-13
-12	-11	-10	-9	-8	-7
-6	-5	-4	-3	-2	-1

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

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PSYCHOSOCIAL

1-30 DAYS

VIEW PRE-START

VIEW 01-30 DAYS

VIEW 31-60 DAYS

VIEW 61-90 DAYS

1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

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PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

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31-60 DAYS

VIEW PRE-START

VIEW 01-30 DAYS

VIEW 31-60 DAYS

VIEW 61-90 DAYS

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
49	50	51	52	53	54
55	56	57	58	59	60

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

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61-90 DAYS

VIEW PRE-START

VIEW 01-30 DAYS

VIEW 31-60 DAYS

VIEW 61-90 DAYS

61	62	63	64	65	66
67	68	69	70	71	72
73	74	75	76	77	78
79	80	81	82	83	84
85	86	87	88	89	90

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CALENDAR VIEW

PRE-START | 90 DAYS | 30 DAYS | 7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION | CATHETER | ADEQUACY | PSYCHOSOCIAL

WEEK 1

WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | WK 11 | WK 12 | WK 13

Suggested Checklist: Complete these suggested tasks in the first week.

- Evaluate patients preferred learning style to individualize training: auditory, visual, or kinesthetic¹¹
- Discuss individual training needs (days/time) work schedule/ life schedule
- Educate patient on the following potential concerns:
 - Constipation
 - Pericatheter leaks
 - Flow dysfunction
 - Suspected contamination
- Review hand hygiene and aseptic technique
- Instruct patient on keeping the PD environment clean
- Continued exit site care
- Design an individualized PD prescription
- Ensure patient is added to MyBaxter Customer Service Portal
- 24 hour urine collection and baseline bloodwork
- Integrating home life to PD routine- clinic review, supplies, home visits
- Order PD supplies for home
- Schedule next week's appointments for dressing change/flush
- Assess patient treatments using remote patient management if on enabled APD device

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WEEK 2

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the second week.

- Proactively contact patient to provide support and evaluation. Assess individual support needed (work, home, school, family/lifestyle)
- Identify where your patient is on the grief cycle
- Explain importance of waste-disposal
- Review how to assess effluent for cloudiness
- Assess exit site and tunnel for trauma, s/s infection
- Review peritonitis and antibiotic protocols- how to manage after hours
- Review clinic's afterhours policy regarding possible contamination along with on-call contact info
- Assess any barriers (modality related: peritonitis, catheter, exit site and tunnel infections)
- Schedule next week's appointments

-
-
-

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TRAINING

PD PLANNER

Starting and keeping patients on PD therapy:
A Guide to the first 90 days

PATIENT:

PATIENT NO:

D.O.B:

PD TRAINING START DATE:

END OF PATIENT'S FIRST 90 DAYS :



CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 3

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the third week.

- Proactively contact patient to provide support and evaluation; congratulate them on their PD journey
- Schedule next week's appointments and schedule a PET test between 4-8 weeks⁶

- Have patient take inventory of home supplies
- Review the importance of retraining including:¹
 - Dialysis exchange procedures
 - Hand-washing techniques
 - Recognition of signs and symptoms of peritonitis
 - Recognition of contamination and the appropriate response to it
- Exit site care

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HOME

INTRO

PATIENT

HELP

SHARE

Indicates Training Day

CALENDAR

CHECKLIST

TRAINING

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 4

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the fourth week.

- Proactively contact patient to provide support and evaluation
- Discuss patient's sleep patterns and getting a good night's sleep on PD
- Discuss patient's exercise schedule and its importance to wellness
- Discuss any individual support needs: Work/Home/Family/School/Lifestyle
- Schedule next week's appointments
- Remind patient of upcoming specimen collection procedure
- Review mobile ordering with patient and order supplies as needed
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HOME

INTRO

PATIENT

HELP

SHARE

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CALENDAR

CHECKLIST

TRAINING

PD PLANNER

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A Guide to the first 90 days

PATIENT: _____ PATIENT NO: _____ D.O.B: _____

PD TRAINING START DATE: _____ END OF PATIENT'S FIRST 90 DAYS : _____



CALENDAR VIEW

PRE-START | 90 DAYS | 30 DAYS | 7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION | CATHETER | ADEQUACY | PSYCHOSOCIAL

WEEK 5

WK 1 | WK 2 | WK 3 | WK 4 | **WK 5** | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | WK 11 | WK 12 | WK 13

	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12	Wk 13

Suggested Checklist: Complete these suggested tasks in the fifth week.

- Monthly evaluation of the patient⁵
 - Bloodwork to assess for appropriateness of the PD prescription including dwell time and dialysate tonicity
 - Review of fluid balance: BP/ Temp/ Weight/Vital signs
 - Assess any changes in RKF
 - Assessment of nutritional status; estimation of dietary protein intake
- Review of hand hygiene and aseptic technique and reminders of proper exit site care
- Ensure catheter is secure
- Compliance with treatment plan
- Retraining needs
- PET evaluation for baseline peritoneal membrane transport characteristics⁶
- _____
- _____
- _____

PD PLANNER

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 6

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the sixth week.

Assess how is the patient coping and if additional support is needed- Social Worker to conduct a formal "coping evaluation"

Peer mentor introduction

Are there issues with the PET, should it be repeated?

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HOME

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PATIENT

HELP

SHARE

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 7

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the seventh week.

- Proactively contact patient to provide support and evaluation; congratulate them on their PD journey
- Review patient's support system and provide online support/resource tools
- Identify and document where patient is on the grief cycle/assess for depression and anxiety

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HOME

INTRO

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HELP

SHARE

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 8

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the eighth week.

- Proactively contact patient to provide support and evaluation
- Discuss employment and traveling while on PD
- Readdress any barriers (system-related: education, training)
- Discuss any individual support needs: Work/Home/Family/School/Lifestyle

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HOME

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 9

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the ninth week.

Monthly evaluation of the patient⁵

Bloodwork to assess for appropriateness of the PD prescription including dwell time and dialysate tonicity

Review of fluid balance: BP/ Temp/ Weight/Vital signs

Assess any changes in RKF

Assessment of nutritional status; estimation of dietary protein intake

Review of hand hygiene and aseptic technique and reminders of proper exit site care

Ensure catheter is secure

Compliance with treatment plan

Retraining needs

Check PD supplies

HOME

INTRO

PATIENT

HELP

SHARE

Indicates Training Day

CALENDAR

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PD TRAINING START DATE:

END OF PATIENT'S FIRST 90 DAYS :



CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 10

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the tenth week.

Complete a home visit in the first 90 days of PD therapy or by completion of patient training¹¹

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HOME

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PATIENT NO:

D.O.B:

PD TRAINING START DATE:

END OF PATIENT'S FIRST 90 DAYS :



CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 11

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the eleventh week.

- Proactively contact patient to provide support and evaluation; congratulate them on their PD journey
- Discuss having intimate relationships while on PD

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HOME

INTRO

PATIENT

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 12

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

Suggested Checklist: Complete these suggested tasks in the twelfth week.

- Set up a "refresher" training session for patients
- Review the importance of retraining including:¹
 - Dialysis exchange procedures
 - Hand-washing techniques
 - Recognition of signs and symptoms of peritonitis
 - Recognition of contamination and the appropriate response to it
 - Exit site care
- Discuss any individual support needs: Work/Home/Family/School/Lifestyle
- Readdress any barriers (patient-related: burnout, distance, nutrition, Kt/V)
-
-
-

HOME

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HELP

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CALENDAR VIEW

PRE-START

90 DAYS

30 DAYS

7 DAYS

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL

WEEK 13

WK 1

WK 2

WK 3

WK 4

WK 5

WK 6

WK 7

WK 8

WK 9

WK 10

WK 11

WK 12

WK 13

	WK 1	WK 2	WK 3	WK 4	WK 5	WK 6	WK 7	WK 8	WK 9	WK 10	WK 11	WK 12	WK 13

Suggested Checklist: Complete these suggested tasks in the thirteenth week.

- Proactively contact patient and congratulate them on their PD journey. Assure them that you will continue to provide guidance and support.

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HOME

INTRO

PATIENT

HELP

SHARE

Indicates Training Day

CALENDAR

CHECKLIST

TRAINING

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PD TRAINING START DATE:

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INFECTION PREVENTION

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL



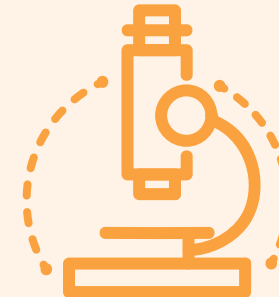
For each episode of peritonitis, the initial culture must include gram stain for early identification of Fungal Peritonitis²



Remind all patients the appropriate response to touch contamination



Validate handwashing techniques for each patient



For each infection (Peritonitis or Exit Site) identify the cause and begin retraining^{1,2}



Peritonitis:
<0.5
per patient year¹
≥1:24
patient months¹

1. Piraino B, et al. ISPD Position Statement on Reducing the Risks of Peritoneal Dialysis-Related Infections. *Perit Dial Int.* 2011; 31:614-630.
2. Li PK, et al. *Perit Dial Int.* 2016; 36:481-508.
3. Piraino B, et al. *Perit Dial Int.* 2005; 25:107-131.
4. Szeto CC, et al. ISPD Catheter-related Infection Recommendations: 2017 update. *Perit Dial Int.* 2017; 37:141-154.
5. KDOQI American Journal of Kidney Diseases, Vol 48, No 1, Suppl 1 (July), 2006: pp S143-145.
6. KDOQI American Journal of Kidney Diseases, Vol 48, No 1, Suppl 1 (July), 2006: pp S139.
7. Heimbürger O, Waniewski J, et al. *Kidney Int.* 1990; 38:495-506.
8. Mujais S et al. Evaluation and Management of Ultrafiltration problems in Peritoneal Dialysis. *Perit Dial Int.* 2000; 20:S5-S21.
9. Finkelstein F et al. *J Am Soc Nephrol.* 16: 546-554, 2005.
10. Trinh E & Perl J. *Clin J Am Soc Nephrol.* 2018; 13:172-1734.
11. Bernardini, J., Price, V., & Figueiredo, A. (2006). Peritoneal Dialysis Patient Training, 2006. *Perit Dial Int.* 26, 625-632.
12. Figueiredo, A. E. (n.d.). A Syllabus for Teaching Peritoneal Dialysis to Patients and Caregivers. *Perit Dial Int.* 36, 592-605.

13. Ryan, L. (2014). Evaluation of Printed Health Education Materials for use by Low-Education Families. *Journal of Nursing Scholarship,* 46(4), 218-228.
14. Crabtree JH, Shrestha BM, Chow KM, et al. Creating and Maintaining Optimal Peritoneal Dialysis Access in the Adult Patient: 2019 Update. *Perit Dial Int.* 2019 Sep-Oct;39(5):414-436.
15. Chaudhary K. Peritoneal dialysis drop-out: causes and prevention strategies. *Int. J Nephrol* 2011:1-8.
16. Firanek, C.A., Sloand, J.A., & Todd, L.B. (2013). Training patients for automated peritoneal dialysis: A survey of practices in six successful centers in the United States. *Nephrology Nursing Journal,* 40(6), 481-491.
17. Ana Rodriguez-Carmona and Miguels Perez Fontan. Sodium Removal in Patients Undergoing CAPD and APD, *Perit Dial Int.* 202, Vol 22 pp 705-713.
18. Brown EA, Blake PG, Boudville N, et al. International Society for Peritoneal Dialysis practice recommendations: Prescribing high-quality goal-directed peritoneal dialysis. *Perit Dial Int.* 2020 May;40(3):244-253.
19. van Biesen W, Heimbürger O, Krediet R, Rippe B, La Milia V, Covic A, Vanholder R; ERBP working group on peritoneal dialysis. Evaluation of peritoneal membrane characteristics: clinical advice for prescription management by the ERBP working group. *Nephrol Dial Transplant.* 2010 Jul;25(7):2052-62.

HOME

INTRO

PATIENT

HELP

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CALENDAR

CHECKLIST

TRAINING

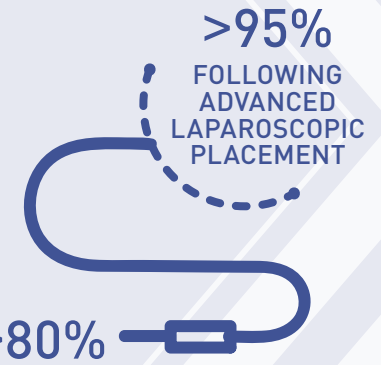
PATIENT: _____ PATIENT NO: _____ D.O.B: _____

PD TRAINING START DATE: _____ END OF PATIENT'S FIRST 90 DAYS : _____



CATHETER

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT
INFECTION **CATHETER** **ADEQUACY** **PSYCHOSOCIAL**



>80%
FOR ALL OTHER CATHETER
INSERTION METHODS

The post-operative surgical dressing should not be changed for 5-10 days after catheter placement unless there is obvious bleeding or signs of infection¹⁴

Include the utilization of Mupirocin or Gentamicin Cream at ESI daily as part of patient training curriculum⁴

Check in with patient to ensure that they are following daily exit-site care procedures⁴

Clinical goals for catheter patency at 12 months¹⁴

1. Piraino B, et al. ISPD Position Statement on Reducing the Risks of Peritoneal Dialysis-Related Infections. Perit Dial Int. 2011; 31:614-630.
2. Li PK, et al. Perit Dial Int. 2016; 36:481-508.
3. Piraino B, et al. Perit Dial Int. 2005; 25:107-131.
4. Szeto CC, et al. ISPD Catheter-related Infection Recommendations: 2017 update. Perit Dial Int. 2017; 37:141-154.
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12. Figueiredo, A. E. [n.d.]. A Syllabus for Teaching Peritoneal Dialysis to Patients and Caregivers. Perit Dial Int. 36, 592-605.

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ADEQUACY

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL



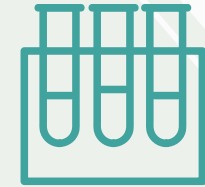
Work with Nephrologist to try utilizing a non-dextrose, iso-osmolar solution to improve UF in long dwells for high-average transporter patients⁸



To ensure short dwell sodium removal in APD, avoid cycler nighttime dwells less than 120 min for average transporters.^{7,17,19}



Initiate or increase diuretics for patients with an RKF > 100 ml day⁵



Repeat PET test when clinically indicated⁶

- Presence of unexplained volume overload
- Decreasing drain volume (DV) on: overnight dwell (CAPD) or daytime dwell (APD)
- Increasing clinical need for Hypertonic Dialysate dwells to maintain DV
- Worsening hypertension
- Change in measured Peritoneal Solute Removal (KT/V_{UREA})
- Unexplained signs or symptoms of Uremia



No dry day or night without adequate RKF to assure middle molecule clearance⁵



Administer or repeat a PET test when clinically indicated⁵



If KT/V is inadequate, increase fill volume before increasing number of exchanges⁵

- Maximizes concentration gradient
- Increases effective peritoneal surface area

1. Piraino B, et al. ISPD Position Statement on Reducing the Risks of Peritoneal Dialysis-Related Infections. Perit Dial Int. 2011; 31:614-630.
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PSYCHOSOCIAL

BEST DEMONSTRATED PRACTICES FOR AVOIDING THE 4 MAIN CAUSES OF PD DROPOUT

INFECTION

CATHETER

ADEQUACY

PSYCHOSOCIAL



Social Support

- Prevent patients/caregiver burnout
- Support groups may be an option



Make a congratulatory call to each patient after their 1st, 2nd and 3rd month on PD therapy



Provide positive reinforcement to each patient during the training process¹¹



Psychological counselling (as needed)^{11,15}

- Provide psychosocial support in the form of home visits by nurses¹¹
- During monthly visits, the social worker should be evaluating the status of the patient and/or caregiver and provide counselling sessions proactively

1. Piraino B, et al. ISPD Position Statement on Reducing the Risks of Peritoneal Dialysis-Related Infections. *Perit Dial Int.* 2011; 31:614-630.
2. Li PK, et al. *Perit Dial Int.* 2016; 36:481-508.
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