

## Review of Interdisciplinary Clinical Care (RICC)

Focused review based on Core Survey patient sampling criteria

When a patient is sampled by >1 criteria, refer to each applicable row. For patients sampled as “Observed” or as part of a Complaint Investigation, use applicable row(s).

Vtags are listed as suggestions only; other/additional Vtags may be more appropriate for individual patient care concerns.

Sampling Criteria	Labs/Indicators (review 3 months)	IDT Response/Actions Examples (review progress notes, orders, treatment records, etc. around same time period of labs/indicators)	Patient Education (look for evidence the patient or designee was informed about)
<b>Infection</b> (V502, 542)	<ul style="list-style-type: none"> <li>Hemoglobin (Hgb)</li> <li>Albumin</li> <li>Cultures as applicable</li> <li>Patient symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Action in response to infection/positive cultures, e.g. orders for antibiotics/other obtained &amp; implemented</li> <li>Patient condition &amp; infection site monitored</li> <li>Home dialysis patient's home environment monitored for possible issues</li> </ul>	<ul style="list-style-type: none"> <li>Infection prevention; care of self &amp; dialysis access (V562)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>CVC &gt;90days</b> (V511, 544, 550)	<ul style="list-style-type: none"> <li>Kt/V</li> </ul>	<ul style="list-style-type: none"> <li>Adequacy monitored; out of range discussed &amp; actions planned &amp; implemented, e.g. prescription change</li> <li>Evaluation &amp; plan for placement of AVF/AVG or why not an option for patient</li> </ul>	<ul style="list-style-type: none"> <li>Options for vascular access, risks &amp; benefits (V562)</li> <li>Infection prevention; care of self &amp; access (V562)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>Hospitalization/readmission</b> (V502, 545, 547, 552, 560)	<ul style="list-style-type: none"> <li>Hemoglobin (Hgb)</li> <li>Albumin</li> <li>HRQOL survey results (as applicable)</li> </ul>	<ul style="list-style-type: none"> <li>Communication w/hospital staff to optimize transitions of care</li> <li>Dialysis order reviewed by MD/APRN/PA after hospital discharge; patient reassessed; revisions to plan of care aimed at preventing readmission</li> <li>Nutrition, anemia, psychosocial status, etc. monitored &amp; addressed in relation to hospitalization</li> <li>Seen at least monthly by nephrology MD, APRN, or PA</li> </ul>	<ul style="list-style-type: none"> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>Anemia (Hgb &lt;10)</b> (V507, 547, 552)	<ul style="list-style-type: none"> <li>Hemoglobin (Hgb)</li> <li>Transferrin saturation (TSAT%)</li> <li>Ferritin</li> <li>Patient symptoms</li> <li>HRQOL survey results (as applicable)</li> </ul>	<ul style="list-style-type: none"> <li>Monitor labs; evaluation for other causes of anemia, e.g. infection, inflammation</li> <li>Evaluation of patient condition, symptoms of anemia, patient QOL related to anemia</li> <li>Actions planned &amp; implemented aimed at improving patient condition/QOL &amp; avoiding transfusions; e.g. ESA start/dose increase, iron</li> </ul>	<ul style="list-style-type: none"> <li>Risks &amp; benefits of ESA (V507)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>Adequacy (Kt/V &lt; 1.2 HD; &lt;1.7 PD)</b> (V518, 544)	<ul style="list-style-type: none"> <li>Kt/V</li> <li>PD PET test as applicable</li> </ul>	<ul style="list-style-type: none"> <li>Adequacy monitored; out of range discussed, evaluated &amp; actions planned &amp; implemented; e.g. dialysis prescription change, PD PET test to evaluate peritoneal membrane</li> <li>Dialysis access evaluated &amp; monitored</li> <li>Work with patient for cause evaluation of skipped or shortened treatments</li> </ul>	<ul style="list-style-type: none"> <li>Dialysis prescription, treatments, risks of poor adequacy (V562)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>Bone/mineral metabolism (Ca/PO<sub>4</sub> out of range)</b> (V508, 546)	<ul style="list-style-type: none"> <li>Calcium</li> <li>Phosphorus</li> </ul>	<ul style="list-style-type: none"> <li>Labs monitored (PTH range considered); out of range discussed, evaluated &amp; actions planned &amp; implemented, e.g. medications, dialysate Rx changes</li> <li>Patient evaluated for symptoms (e.g. pain, itching), &amp; diet &amp; med management</li> <li>Patient supported in positive bone and mineral management</li> </ul>	<ul style="list-style-type: none"> <li>Medications, dietary recommendations &amp; restrictions (V545)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>Nutrition (Albumin &lt; goal)</b> (V509, 545)	<ul style="list-style-type: none"> <li>Albumin</li> <li>Potassium</li> <li>Bicarbonate (CO<sub>2</sub>)</li> <li>Weight</li> </ul>	<ul style="list-style-type: none"> <li>Nutritional status evaluated by registered dietitian including dietary history &amp; other possible causes, e.g. inflammation, infection</li> <li>Weight, labs &amp; other nutritional indicators monitored; out of range discussed, evaluated; actions planned &amp; implemented, e.g. dialysis prescription changes, nutritional supplement recommendations</li> <li>Patient, caregiver/meal preparer supported in optimizing nutrition</li> </ul>	<ul style="list-style-type: none"> <li>Dietary recommendations &amp; restrictions (V545)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>
<b>Fluid &amp; BP management</b> (V504, 543)	<ul style="list-style-type: none"> <li>Weight</li> <li>Interdialytic fluid gains</li> <li>HD Intradialytic fluid removal (UFR, % target weight, average over mo)</li> <li>BP pre-, during, post-treatment</li> <li>Patient symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Indicators listed monitored</li> <li>Target weight established &amp; ongoing evaluation for appropriateness based on indicators (e.g., average UFR, BP, fluid gains, )</li> <li>Out of range outcomes discussed (e.g. BP&gt;180/100, &gt;13mL/kg/hr average UFR, large fluid gains b/t treatments, significant BP drops &amp; symptoms during treatment, not achieving target weight), evaluated &amp; actions planned &amp; implemented aimed at improvement.</li> <li>Patient supported in positive fluid management</li> </ul>	<ul style="list-style-type: none"> <li>Fluid management, dietary recommendations &amp; restrictions (V545)</li> <li>Medications, treatments &amp; dialysis prescription (V562)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>

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Sampling Criteria	Labs/Indicators (review 3 months)	<b>IDT Response/Actions</b> Examples (review progress notes, orders, treatment records, etc. around same time period of labs/indicators)	<b>Patient Education</b> (look for evidence the patient or designee was informed about)
<b>Unstable</b> Note: Refer to applicable row(s) for issues identifying patient as “unstable”  <i>(V502, 520, 542 &amp; Vtags specific to patient’s issues)</i>	<ul style="list-style-type: none"> <li>Hemoglobin (Hgb)</li> <li>Kt/V</li> <li>Albumin</li> <li>Potassium</li> <li>Bicarbonate (CO<sub>2</sub>)</li> <li>HRQOL survey results (as applicable)</li> </ul>	<ul style="list-style-type: none"> <li>Monthly collaboration of all IDT members for comprehensive assessment of factors contributing to patient as “unstable”</li> <li>Discussion &amp; evaluation of patient “unstable” factors</li> <li>Timely planning &amp; implementation of actions aimed at addressing patient issues</li> </ul>	
<b>New admission &lt;90days</b>  <i>(V501, 516, 542-also refer to Vtags specific to patient’s issues)</i>	<ul style="list-style-type: none"> <li>Hemoglobin (Hgb)</li> <li>Transferrin saturation (TSat%)</li> <li>Ferritin</li> <li>Kt/V</li> <li>Albumin</li> <li>Potassium</li> <li>Bicarbonate (CO<sub>2</sub>)</li> <li>Calcium</li> <li>Phosphorus</li> <li>Hepatitis B antigen</li> <li>Hepatitis B antibodies</li> </ul>	Full IDT, including patient or designee, collaboration for: <ul style="list-style-type: none"> <li>Evaluating all indicators; determine individual patient needs</li> <li>Planning &amp; implementing care actions in all clinical areas aimed at goals consistent with professional standards (i.e. MAT)</li> <li>Completing the comprehensive assessment &amp; care planning process in a timely manner</li> </ul>	<ul style="list-style-type: none"> <li>All treatment modalities &amp; settings (V458)</li> <li>Emergency disconnect &amp; evacuation; disaster preparedness (V412)</li> <li>Dietary recommendations &amp; restrictions; fluid management (V545)</li> <li>Dialysis access options, risks/ benefits (V562)</li> <li>Hepatitis B vaccine (V126)</li> <li>Infection prevention; care of self &amp; dialysis access (V562)</li> <li>Grievance, complaint, suggestions procedures (V465-467)</li> <li>Home dialysis training documented; home training RN does bulk; competency verified (V584-586)</li> </ul>
<b>LTC Resident receiving dialysis treatments at the LTC facility</b>  <i>(refer to Vtags in middle column)</i>	<ul style="list-style-type: none"> <li>Hemoglobin (Hgb)</li> <li>Kt/V</li> <li>Albumin</li> <li>HRQOL survey results (as applicable)</li> </ul>	Communication & collaboration of ESRD & LTC IDT members for timely evaluation of indicators & planning, implementing care actions, including: <ul style="list-style-type: none"> <li>Ongoing monitoring of current health status (V502)</li> <li>Review of current medications administered at the LTC facility (V506)</li> <li>Nutritional status evaluated &amp; monitored by ESRD Dietitian (V509,503)</li> <li>Psychosocial/rehab needs evaluated &amp; monitored by dialysis MSW; HRQOL survey administered after 90days &amp; annually (V510, 514, 552)</li> <li>Assignment of an ESRD care coordinator for resident/patient (V590)</li> <li>Seen monthly by ESRD practitioner (MD, APRN, PA)(V560)</li> <li>Ongoing consultation with resident/designee with ESRD IDT (MSW, RD, home training nurse, care coordinator) (V592)</li> <li>Monitoring of documentation of dialysis delivery (review of treatment records) by qualified ESRD home training staff (V587)</li> <li>Visits conducted at the LTC by qualified ESRD home training staff (V589)</li> </ul>	<ul style="list-style-type: none"> <li>All treatment modalities &amp; settings (V458)</li> <li>Information on advanced directives (V457)</li> </ul>
<b>Involuntarily Discharged (IVD)</b> <i>(closed record review)</i>  <i>(V469, 767)</i>	<ul style="list-style-type: none"> <li>As applicable pertaining to IVD</li> </ul>	<ul style="list-style-type: none"> <li>Full ESRD IDT collaboration to assess &amp; evaluate patient &amp; source/cause of behaviors</li> <li>Meaningful actions taken to avert IVD (i.e. working with ESRD Network, patient, dialysis MSW to address issues)</li> <li>Attempts to contact other ESRD facilities to transfer patient</li> <li>ONLY after above efforts unsuccessful:30 day notice to patient &amp; Network; medical director &amp; attending MD give written authorization to IVD patient; SA notified</li> </ul>	<ul style="list-style-type: none"> <li>Facility policies for transfer &amp; discharge, including IVD (V468)</li> <li>Grievance, complaint, suggestion procedures (V465-467)</li> <li>All treatment modalities &amp; settings (V458)</li> </ul>