

NEPHROLOGISTS

Accessing and Navigating Peritoneal Dialysis PowerPlan

1. Navigate to Table of Contents (Blue Menu) and select + Add next to orders.

Menu	Ŧ
Prescriber View	
Results Review	
Orders	+ Add
Documentation	+ Add
Allergies	+ Add

The Add Order dialogue box opens. In the search bar type in Peritoneal Dialysis and select the appropriate regimen to view. Then select Done.

Search:	Perioneal	۹,	Advanced Options	\sim	Туре:	e	Inpatie		
A (GI Peritoneal Fluid Specimen Diagnostic								
Mу	IV IR Peritoneal Drainage Cath Manipulation IR Peritoneal Drainage Cath Removal IR Tunnelled Peritoneal Catheter								
	NEPH Continuous A NEPH Continuous C NEPH Peritoneal Dia NEPH Post Peritone Peritoneal Catheter Dra Peritoneal Dialysis Care 'Enter' to Search	Ambulato Cycling P alysis (PD alysis (PD alysis Cat alysis Cat alysis Cat alysis Per al Dialysi al Dialysi in Care and Mai	ny Peritoneal Dialys eritoneal Dialysis (C) INSERTION REQUE) REMOVAL REQUE heter Insertion (Pha heter Removal (Pha itonitis Managemen s (PD) Tube Care ntenance	iis (CPE EST ST ised ised	CAPD) O) Presc))))	riptio	n		

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MANAGING PD POWERPLAN HOSPITAL INFORMATION SYSTEM (HIS)

Navigating Peritoneal Dialysis PowerPlan

1. The PowerPlan view opens.

4	80	🕂 Add to Phase	 A Check Alerts 	s 🛄 Comments	Start:	Now		Duration:	None			
	8 8	Compone	nt			Status		Dose	D	etails	^	
NE	NEPH Continuous Ambulatory Peritoneal Dialysis (CAPD) (Planned Pending)											
⊿	△ Admission/Transfer/Discharge											
		- 🇳 The intent	of this PowerPlan i	is for initiation an	d ongoir	ng treatm	ient wi	ith continu	ous aml	bulatory peritoneal dialysis (CAPD).		
		🍼 🇳 👫 Must b	e completed by/wi	ith Nephrologist.	For nurs	ses train	ed in F	Peritoneal	Dialysis	; only***	0	
	***Peritoneal dialysis outpatient clinic to be notified of any inpatient admissions – ext. 43219											
⊿	Vital Signs/Monitoring											
$\mathbf{\nabla}$		🖄 Weight							W	/eigh with each exchange		
\checkmark		🛛 🚺 Notify Pre	scriber						N	otify Nephrologist if weight exceeds more than 2 kg (above or below) ideal weight		
\checkmark		🖄 Vital Signs L						Ly	Lying and standing with each exchange			
\checkmark		🛛 🚺 Notify Pre	scriber						N	otify Nephrologist if temperature greater than 37.5°C		
⊿	Patient Ca	are										
V	128	🛛 🖉 Communi	cation Order						N	urse to assess patient fluid status and adjust solution strength to maintain ideal weight as per Peritoneal Dialysis Twinb	oa	
	Lines/Tubes/Drains											
_								0				
V	100	🗾 Exit Site Ca	are						T;	N, Daily exit site care/shower techniques as per policy.		
	Sterile enclosed dressing weekly and PKN											
V		Exit Site Ca	are						1;	N, Peritoneal transfer set change qb months and PKN.		
17		Maund av	lture /Curala						э т.	N Send such for sulture and considuate if suit site presents with sources on accessment		
M		Wound cu	nture/ Swab						1) T	N, Send swab for culture and sensitivity if exit site presents with exudate on assessment.		
		Community Pre	scriber order						1) T	N, Notify Nephrologist if exit site presents with exidate on assessment.		
		Communication Urger I'N, in and out Hushes mL with Uraneal 1.3% twin bag exchange PKN to check tube patency/flow (not to exceed patient .										
μ×.		Contamination management (FOF contamination or preak in the stellie system): Closed withasced contaminations:					e					
		A SUSPECTER	PERIOTONITIS M	ANAGEMENT							^	
Π		T Eluid Gran	n and Culture						P	eritoneal Dialysis (PD) Fluid. Stat.collect	~	
									0	btain effluent sample for any symptoms of peritonitis (abdominal pain, temperature greater than 37.5 degrees Celsius,		
Π		Peritoneal	Catheter Drain Car	re					T	N. Drain peritoneum prior to diagnostics test, hemodialysis, procedures or surgical procedures		
	Dialvsis Therapy											
	🚯 Please note the order for CAPD below opens and has modifiable details including: solution type, ideal weight, day fill volume, number of exchanges, exchange instructions and volume for each											
		exchange,	and heparin (yes/	'no)							\sim	
₽	8	🖄 CAPD									_	
⊿	∠ Medications											
Anticoagulation												
	🏈 🎫 Do not use heparin if patient is Heparin Induced Thrombocytopenia (HIT) positive or has a history of HIT ***						0					

- 2. Check $\mathbf{\overline{M}}$ or uncheck $\mathbf{\overline{M}}$ orders based on your needs.
- 3. Complete missing required information for each order indicated by the following symbol \bigotimes by

right-click next to the order an clicking Modify

4. **IMPORTANT**: Ensure correct details for the PD order are entered by completing step 3. Below is the 'Details for CAPD' example:

evenues, and repain (testing)		· · · · · · · · · · · · · · · · · · ·
🗹 🙁 🖾 CAPD	T;N	
▼ Details for CAPD		
🗃 😵 Details 🔢 Order Comments 🛞 Offset Details		
+ 1 h. 3 ×		
Requested Start Date/Time: **/***	EDT Ideal Weight (kg):	^
*Number of Exchanges:	*Day Fill Volume (mL):	
*Long Dwell Volume (mL):	*Long Dwell:	v
*Heparin (see Orderset if yes): Yes No	Exchange #1 Volume (mL):	
Exchange #1 Solution Type: 1 Exchange 2 Exchanges	Exchange #1 Instructions:	
Exchange #2 Volume (mL): 3 Exchanges	Exchange #2 Solution Type:	v
4 Exchanges Exchange #2 Instructions: 5 Exchanges	Exchange #3 Volume (mL):	
Exchange #3 Solution Type:	Exchange #3 Instructions:	
Exchange #4 Volume (mL):	Exchange #4 Solution Type:	~
		×

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MANAGING PD POWERPLAN HOSPITAL INFORMATION SYSTEM (HIS)

Signing Peritoneal Dialysis PowerPlan

- 1. Click Plan for Later to place the order in a planned state or click initiate Now to initiate the plan now.
- 2. Click Orders for Signature.
- 3. Click Sign
- 4. Click souther to view the ordered Peritoneal Dialysis PowerPlan.



