

Medical Review Board Statement Recommendations on use of Clinical Care Guidelines in Dialysis

The Medical Review Board (MRB) of ESRD Network 18 supports and formally recommends the Renal Physician Association's "RPA Position on the use of Clinical Care Algorithms or Pathways in the Delivery of Quality Renal Patient Care" (7/03).

1. MRB unequivocally supports the use of algorithm orders to achieve excellence in patient care, to implement the goals of evidence-based guidelines thereby enhancing quality, and to promote patient safety by avoidance of medical errors.
2. MRB believes that individual nephrologists must decide whether an algorithm is appropriate for each patient and, if so, to authorize the use of the algorithm for that patient.
3. MRB believes that an order for regular periodic laboratory tests generated by an algorithm should be executed without further authorization or signature.
4. MRB believes that a change in dose generated by iteration of an algorithm should be instituted promptly without prior signature by the physician.
5. MRB believes that all changes in dose should subsequently be signed to confirm awareness and approval of the changes in accordance with individual facility/organization policy or within a reasonable period.
6. MRB believes that the principles of continuous quality improvement should be applied to the direct outcome of treatment algorithms. Individual nephrologists and medical directors of dialysis facilities should regularly review outcomes not only to assess patient progress, but to making appropriate changes to existing algorithms to incorporate new recommendations from published studies. Failure to achieve desired clinical practice goal should result in algorithm reexamination and revision.
7. MRB believes that algorithms should be reviewed and updated as needed, at least yearly.

Adopted: MRB 12/10/2003
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