



## Best Practices Ideas 2728 Accuracy

### Improvement Goals:

- \_\_\_\_\_ 90 % or more of 2728 forms received at the Network 18 office within 45 days after the patient first starts chronic dialysis at my facility.
- \_\_\_\_\_ 90 % or more of 2746 forms received at the Network 18 office within 30 days after the patient's date of death.
- X** \_\_\_\_\_ 90 % or more of 2728 forms submitted without critical errors (elements are missing or inaccurate).
- \_\_\_\_\_ 90 % or more of 2746 forms submitted without critical errors (elements are missing or inaccurate).

Problems You Identified	Actions and Steps You Took	Resources You Needed	Person(s) in Charge	How did you know the change was making a difference?
Difficulty getting all the necessary info to complete the form.	<p>When I accept New patients I make sure I have our lab results from hospitals in advance.</p> <p>As soon as pt arrives I sit down and explain the form and why we need ALL the info. I interview on ethnicity, insurance, prior education, prior renal care etc.</p> <p>I check ALL boxes prior to sending it off!</p>	<p>Hospital Records</p> <p>Pt demographics</p> <p>Pre-Transplant education information</p>		
Not getting the information needed at the time the patient is admitted to complete the form, including MD portion and signature.	<p>Patient Info: Ask pt or get from neph chart.</p> <p>Labs: Check neph chart and copy most current labs prior to pt starting dx. If pt was in the hosp, fax our cover sheet with pt name, DOB, and time-frame to medical records.</p> <p>Height: Leave note on daily board for charge RN to get height on (pt name). Highlight it.</p> <p>Neph Portion &amp; Signature: If not filled out by MD under front clip in chart, take it to MD office with a note stating the areas to be filled in. Write a reminder on my desk calendar to check back with the MD office next week</p>	<p>Pt or MD chart or Fax cover sheet; fax # for medical records; pts name and DOB.</p> <p>Object to measure height close to RN station.</p> <p>MD cooperation.</p> <p>Reminder in calendar as whereabouts of 2728.</p>		I could keep track of where I was for completion of each 2728. I would also check the charts of the new pts to make sure the 2728 was completed on time, if I had several new pts within a short span of time.
Problems with accuracy and completeness of 2728 forms.	<p>1) CM will review 2728 prior to sending for accuracy and completeness.</p> <p>2)CM, SW, &amp; Sec will attend TOPIC Call</p> <p>3) Sec will initiate 2728 on first day of DX to try and get form sent by end of 2 weeks.</p>	TOPIC Call		Accuracy should improve.



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Problems You Identified	Actions and Steps You Took	Resources You Needed	Person(s) in Charge	How will I know if the change is making a difference?
I can't get the forms back from the nephrologists' office.	I put the 2728 on the front of the Nephrologists rounding book with the areas they need to sign highlighted and flagged. I never let the form leave the unit now.	None	Nurse Manger	I would get my 2728 back the same day or no more than 2 weeks.
Obtaining information needed to complete forms	1) Developed relationships with key players; engage them in assisting in getting info. 2) Follow thru until the job is done.	Office managers at MD office, hospital, labs, MD	Secretary	Improved compliance
#18 a, b, c, d	Double check these questions before sending in the form		Nurse manager	Got fewer Current Reject Reports
Didn't complete question 18a-c on 2728 form because I didn't see 0-6 months as a choice.	1) If 0-6 months is indicated write the value in (per NW instructions) 2) Audit to make sure info is included on 2728 before sending to Network.	Make a note and place in my 2728 file until it becomes habit.	Social Worker	Internal Audit confirms all forms have info and number of Current Reject reports from the Network requesting this info will decrease.