

Southern Alberta Renal Program PD Clinics
Case Management/Health Record Audit

Guidelines for Audit Process:

- A set number of patient charts in each clinic will be audited each month on a rotational basis; all charts will be audited annually (minimum standard).
- Clinic/site-specific monthly results will be submitted/reviewed as a standing agenda item at each PD P & P meeting.
- The compliance target is 90%; if not achieved, program discussion/education will occur to alleviate the interfering factors.

Date:		Auditor Name/Designation:	Pt Name:		
PARIS-Based Parameters		Required Review Timeline		Result	
Diagnostic Labs				YES	
				N/A	
Lipid Testing (physican discretion)		Annual (minimum)			
Anemia Profile	○ Hgb	Q month			
	○ Iron Panel	Q3 months			
Electrolytes		Q month			
Bone/Mineral Metabolism	○ PO4 & Ca	Q month			
	○ PTH	Q3 months			
Liver Profile	○ ALP, ALT, Albumin	Q month			
Renal Profile (creatinine, urea)		Q month			
Diabetic Profile	○ HgbA1C	Diabetics only	Q3 months		
	○ Lab: Meter		Annual		
	○ Glucose (all pts)		Q6 months		
Colonization	○ MRSA (nasal & rectal)	Q6 months			
	○ VRE	Annual			
HCV		Annual			
Clinic Visit					
- Most current visit		Within 3 - 4 months			
- QA Indicators					
- Comments/Summary					
- *Medication Reconciliation/Allergy Review					
- Home BP					
- Home Glucose					
- *Handwashing Review					
- *CoMorbidity Updated					
- *Mobility/Fall Prevention					
- Immunization/Immunity					
○ Hepatitis B					
○ Pneumococcal					
- *Respite Need Assessed					
- *PD Sustainable					
- *Transplant Status					
- PD Infections Reviewed					
- *Prognostic Model					
- Profile Updated					
Other					
- PET/Prescription Review					
- Tube Change/Catheter Function Review		Q6 months			
- Exit Site Assessed					
- Effluent Assessed					
- Foot Assessment					
- Demographics (Face Sheet)					
- Personal Directives/GOC		Annual			
- *Alerts					
- *Wellness					
TOTAL YES & N/A					
*PERCENT SCORE					
*PERCENT SCORE = (Total Yes ___ x 100) divided by (40 total possible points – total N/A ___ = ___ Total Possible Points)					
Sept 2013	If low score is unrelated to nursing process (e.g. non-compliant patient), explain:				

Each Clinic Visit

*These are in the process of being added as tick boxes to the Quality Indicator Screen, under **Reviewed**