



47TH ANNA NATIONAL SYMPOSIUM
MAY 1-4, 2016 ~ MARRIOTT LOUISVILLE &
KENTUCKY INTERNATIONAL CONVENTION CENTER, LOUISVILLE, KY

Kidney Transplantation Evaluation Process

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Ensuring that patients receive the appropriate evaluation prior to being placed on the UNOS waitlist can be a time-consuming process. However, listing patients as soon as possible maximizes chances of being offered a kidney transplant. Further, for patients who are not yet on dialysis, workup time represents a lost opportunity to gain waiting time points. At Rush University Medical Center, our initial attention to reducing the duration of the evaluation process was only partially successful, with a decrease in mean evaluation-to-waitlist time from 287 days (2013) to 177 days (2014).

This project improved the efficiency and effectiveness of the pre-kidney transplant evaluation process. The former process was lengthy and involved many steps that added to the number of times a patient returned for testing. The goal was to reduce the number of days needed to place a patient on the kidney transplantation waiting list. Although the literature suggests that the average length of time for the evaluation process is similar to that of Rush University Medical Center's kidney transplantation program, a further decrease in the number of days has the potential for reducing dialysis exposure and worsening of comorbid conditions. Thus, the key stakeholders determined a goal of 90 days for patient placement on the national kidney transplant wait list. To achieve this goal, the workflow was redesigned to address the timing of patient activities, restructuring of the pre kidney transplant team and increasing usage of the transplant tracking software. Specific interventions are described below.

1. Added more clinic appointments to decrease time between referral and the initial evaluation visit.
2. Redesigned the clinic template to improve efficiency while still allowing evaluation by multiple disciplines.
3. Leveraged tools available in the electronic medical record.
4. Trained staff on the use of electronic appointment reminders, questionnaires and checklists.
5. Achieved financial approval for wait listing prior to the selection meeting.
6. Changed role of the transplant nephrologist from clinical documentation review to an actual patient visit.
7. Restructured the staffing of the Pre Kidney transplant team, utilizing Certified Medical Assistants.
8. Reassigned intake screening from pre-kidney RN coordinators to administrative staff.

Changes such as adding appointments, redesigning of the clinic template, use of the electronic medical record tools and staff training began in February, 2015. These changes resulted in the mean evaluation to wait list time decreasing to 127 days by June, 2015. The remainder of the changes were initiated in July, 2015 resulting in an additional reduction in the mean evaluation to wait list time that is near the goal. These results will be discussed in detail at the time of the meeting since we are still compiling data.

Abstract selected for presentation at 47th ANNA National Symposium, Louisville, KY, 2016

