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Nephrology Nurse Survey: Challenges and Strategies

*Patricia B. McCarley, MSN, RN, ACNP-BC, CNN¹; Alex Yang, MD²; Sally Burrows-Hudson, MSN, RN, CNN³
¹Renal Advantage Inc., Nashville, TN; ²Affymax, Inc., Palo Alto, CA; ³Nephrology Clinical Solutions, Lisle, IL*

Purpose: Managing anemia in patients with end stage renal disease has always been challenging. It is affected by natural Hb variability, changing clinical practice guidelines, and reimbursement policies. Additionally patients on dialysis often suffer multiple clinical events that require ongoing assessment and adjusted strategies to maintain Hb outcomes.

Methods: A survey of nephrology nursing key opinion leaders (NN-KOL) was conducted in December 2009 (n = 17) and again in July 2011 (n = 10) and administered as an online questionnaire. The purpose of the survey was to describe anemia management practices in the in-center hemodialysis setting and to identify challenges to maintaining Hb outcomes.

Results: Management of anemia post hospitalization was the top challenge named in both NN-KOL surveys. Challenges post hospitalization [2009, 2011] included:

1. Decline in Hb during hospitalization [94%, 82%]
2. Inadequate erythropoiesis-stimulating agent (ESA) dosing strategy during and post hospitalization [88%, 64%]
3. Lack of continuity of care in anemia management [76%, 73%]

Measuring Hb immediately following hospitalization and boosting ESA dose were strategies identified for identifying and managing Hb reductions post hospitalization.

Conclusions: While anemia management practices are affected by changes in payment policies and research, the effect of hospitalizations on Hb remains one of the top challenges for nephrology nurses. Nurses must continue to assess the impact of hospitalization on Hb levels and are challenged to identify and implement effective strategies.

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