

Catheter Assessment Tool/Algorithm

Patient Name: _____
 SSN/ID: _____
 Date of this assessment: ___/___/___
 Completed by: _____
 Provider name: _____
 Provider number: _____
 Date catheter was placed: ___/___/___

INSTRUCTIONS
 Complete this Catheter Assessment Tool *at least every month* for every patient in the unit dialyzing via catheter. Include patients with a port access device (LifeSite). Follow the yes/no arrows in the algorithm to determine the root cause leading to this patient dialyzing via catheter. When cause is found, circle it, enter the supporting information and plan the next assessment accordingly.

* "Medically unsuitable" includes patients in a terminal disease state (other than ESRD such as Cancer, AIDS, etc.) or with co-morbid conditions or infections making access surgery impossible at this time.

