Assess physical complications of established renal failure



Overview

This standard is about minimising the risks of patients developing complications associated with established renal failure by identifying such conditions at an early stage. Although this may be technically complex from a medical and care point of view, this competence emphasises the role of the patient as a partner in deciding what happens to them. This is one of a group of standards about interventions. It also links to standards about decision making and boundary setting within the long-term relationship that exists between patients and practitioners.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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Performance criteria

You must be able to:

- P1 obtain information from the patient's past medical notes, patient information systems and primary care providers
- P2 take the patient's history carefully and listen to their concerns; examine the patient with their consent according to your role, responsibility and scope of practice (e.g. anaemia, cardiovascular disease, hypertension, malnutrition, skin disease)
- P3 identify the investigations required, consulting with members of the multidisciplinary team (e.g. ECG, full blood picture, cholesterol measurements, bone density scanning)
- P4 explain the investigations planned with the patient and enable them to understand what to expect
- P5 arrange selected investigations
- P6 interpret the results of investigations and discuss them with the patient, ensuring that they achieve a level of understanding which allows them to make subsequent decisions
- P7 document discussions, recommendations and results

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Knowledge and understanding

You need to know and understand:

K1 anatomy and physio	logy
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- K2 renal function as a component of the whole body function
- K3 nature and consequences of renal failure
- K4 treatment of renal disease, failure and associated conditions
- K5 measuring physiological parameters (e.g. fluid, electrolytes, blood pressure, diabetic status)
- K6 investigating for specific conditions associated with renal dysfunction and co-morbidities
- K7 identification of complications and conditions associated with renal dysfunction or failure and their treatment (e.g. hypertension, renal bone disease, obstructive uropathy)
- K8 best practice treatment and stabilisation of conditions for patients on renal replacement and those on conservative care
- K9 co-morbid conditions that frequently occur alongside renal failure (e.g. diabetes, peripheral vascular disease, cardiovascular disease)
- K10 effects and side effects of medications
- K11 up-to-date evidence on the efficacy of drugs
- K12 the role of medication and the function of drugs commonly used with renal patients
- K13 the role of other members of the multidisciplinary team, the support and information they can provide
- K14 how to ask open-ended questions, listen carefully and summarise back
- K15 methods of communicating sensitive information to individuals
- K16 how to provide individuals with opportunities to ask questions and increase their
- K17 how to adapt communications styles in ways which are appropriate to different people (e.g. culture, language, or special needs)
- K18 how information obtained from individuals should be recorded and stored
- K19 how to obtain full and accurate information about individuals
- K20 how to treat individuals fairly
- K21 the effects of culture, religious beliefs, age and disabilities on individual communication styles
- K22 the different features services must have to meet people's gender, culture, language or other needs

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Additional Information

External links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB6 Assessment and treatment planning

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Developed by	Skills for Health
Version number	1
Date approved	June 2010
Indicative review date	June 2012
Validity	Current
Status	Original
Originating organisation	Skills for Health
Original URN	RenRM5
Relevant occupations	Health, Public Services and Care; Health Professionals; Healthcare and Related Personal Services
Suite	Renal
Key words	kidney, kidneys, donation, diabetes, donor, renal, transplant