

ESRD NETWORK 13

Serving Arkansas, Louisiana & Oklahoma Renal Communities



NUTRITION IN CHRONIC RENAL FAILURE

STANDARDS:

- Serum albumin is a valid and clinically useful measure of protein-energy nutritional status in all adult ESRD patients.
- The optimal target serum albumin level is ≥ 4.0 gm/dL (BCG) or ≥ 3.7 gm/dL (BCP).

RATIONALE:

- Serum albumin levels have been used extensively to assess the nutritional status of individuals with and without chronic renal failure. Malnutrition is common in the end stage renal disease (ESRD) population, and hypoalbuminemia is highly predictive of future mortality risk when present at the time of initiation of chronic dialysis as well as during the course of maintenance dialysis. It follows that nutritional interventions that maintain or improve serum albumin concentrations may be associated with improved long-term survival, although this has not been proven in randomized, prospective clinical trials. Serum albumin levels may rise with increased protein or energy intake.
- Although no ideal measure of nutritional status exists, the serum albumin concentration is considered to be a useful measure of protein-energy nutritional status in maintenance dialysis patients. The extensive literature, in individuals with or without renal failure, relating serum albumin to nutritional status, and the powerful association between hypoalbuminemia and mortality risk in the chronic dialysis population, strongly support this contention. In addition, the measurement of serum albumin levels is inexpensive, easy to perform, and widely available.

EVALUATION:

- The MRB requires the Network staff to evaluate facilities for compliance with established standards. Due to various CMS constraints on data collection, there is currently one opportunity to review timely nutrition indicators via the Voluntary Lab Data Collection (LDC) activity.
- Performance of the voluntary LDC will facilitate QIC/MRB review of nutrition standard by facility, state and Network. As part of the LDC activity, Network 13 will run state-specific data analysis reports for QIC/MRB review prior to development of the next QI work plan (QIWP). The Lab Data Collection analysis will be done in a comparative fashion to establish groupings and rankings within groupings. Historically the groupings have been done in a high to low methodology with prioritization of QI activities to focus on all facilities.

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Mission Statement: "To assess and improve the quality of care provided to individuals with End Stage Renal Disease."