

Patient Admission and Discharge FAQ's

How soon should I admit a patient?

A chronic patient should be admitted within 5 business days of starting dialysis at a dialysis facility.

What is a transient patient?

A transient patient is one who will not be staying in the facility for 30 days or more.

Should I admit transient patients?

No, if a patient is staying less than 30 days then you should not admit that patient in EQRS.

What are the official admit reasons in EQRS and when should they be used?

New ESRD: The patient is new to dialysis (your facility will submit an Initial 2728 form).

Transfer In: ESRD patient has transferred into your facility from another outpatient dialysis facility and is intending on staying 30 days or longer.

Restart: Patient who was in chronic renal failure and previously on dialysis, recovered function and has now returned to treatment.

Dialysis after transplant failed: Patient has returned to treatment after his/her transplant failed

Dialysis in Support of Transplant: This is no longer a valid admit reason; DO NOT admit this patient unless the transplant actually fails. At that point, the patient would be admitted as **Dialysis after transplant failed**.

I tried admitting a patient and got a possible duplicate patient message outside of your scope. What does that mean? How do I get the patient admitted?

That message is usually received if there is something you are entering on the Patient Admit screen that does not match exactly to what exists in EQRS in the existing patient record. Additionally, EQRS does not allow you to bypass (select NA) during admission for the Medicare Beneficiary Identifier. *You must call the data department of your local ESRD Network*.

What are the official discharge reasons in EQRS and when should they be used?

Death: A chronic dialysis patient has expired.

Discontinue: A chronic dialysis patient has chosen to stop dialysis and has not died within 30 days after stopping treatment at your facility.

Lost to Follow Up (LTFU): A chronic dialysis patient has stopped coming for treatment, has made no contact with your facility and you do not have knowledge of the patient's location. **YOU MUST contact your ESRD Network.**

Recover Function: A patient in chronic renal failure that was on dialysis has regained native kidney function.



Patient Admission and Discharge FAQ's (cont'd)

Involuntary: A chronic dialysis patient is involuntarily discharged from the facility. **YOU MUST contact your ESRD Network.**

Other: A chronic dialysis patient either leaves the country or is imprisoned.

Transplant in U.S.: A chronic dialysis patient has received a kidney transplant in the U.S.

Transplant outside the U.S.: A chronic dialysis patient has received a kidney transplant outside the U.S.

Acute: A patient was on dialysis but was not in chronic renal failure.

Transfer (and subcategories)

Dialysis Facility: A chronic dialysis patient has permanently transferred to another outpatient dialysis facility.

Hospice: A chronic dialysis patient has chosen to stop dialysis and is now receiving hospice. *

Hospital: A chronic dialysis patient has been hospitalized and the admission is expected to remain hospitalized for 30 days or more. *

Long Term Care Facility: A chronic dialysis patient has been admitted to a Long Term Care facility and is expected to remain there for 30 days or more. *

Nursing Home: A chronic dialysis patient has permanently transferred to a nursing home and will no longer be coming to his/her outpatient dialysis facility for treatment. **Rehab Center:** A chronic dialysis patient has been admitted to a rehab center and is expected to remain there for 30 days or more. *

Patients must be followed for 30 days unless they are admitted to another outpatient dialysis facility

What do I do when a one of my permanent chronic patients is admitted to the hospital? If the patient is expected to be hospitalized for <30 days DO NOT discharge the patient.

If the patient is expected to be hospitalized for >30 days discharge a patient as Transfer subcategory Hospital. When the patient returns from the hospital readmit he/she as a "Transfer In".

One of my permanent chronic patients gets transplanted. When do I discharge the patient? The patient should be discharged immediately as of the last treatment date as Transplant in US or Transplant outside of US (if applicable) to allow for the transplant hospital to add the transplant event.

What happens if the transplant does not kick in immediately? Do I readmit the patient? No, the patient should not be readmitted unless the transplant fails. If the transplant does fail then the patient can be readmitted as dialysis after transplant failed.