Plan · DIA-PLN-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 26.8

At a glance

- Plan the response to low blood pressure, air in the blood line, allergic reaction and cardiac arrest during dialysis.
- Staff on each shift are trained and the equipment is ready (EQP-REG-001).
- Rehearse the response at least twice a year (DIA-FRM-006).
- A session does not run with no one trained to respond.
- Stop and get help straight away if: a patient collapses during dialysis with no one trained to respond.

1. Purpose

To make sure the unit can respond to the emergencies that occur during dialysis, and rehearses the response (26.8).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

Dialysis patients can have a sudden drop in blood pressure, a cardiac arrest or other emergencies during treatment. Staff must be trained and the equipment ready for them.

5. Responsibilities

Role	Responsibility	Competence
Dialysis unit lead	Owns the plan and the rehearsal	Clinician
Shift nurse in charge	Leads the response on shift	Clinician

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Plan.

- Plan the response for each emergency, with the equipment and the staff who respond.

Key point: Planned.

Step 2. Staff.

- Confirm trained staff are on each shift before a session starts.

Key point: Staffed.

Step 3. Rehearse.

- Rehearse the response twice a year and record it on DIA-FRM-006.

Key point: Rehearsed.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Shifts with trained staff for emergency response	100%	Monthly	Dialysis unit lead	Escalate to medical director

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
DIA-FRM-006	Emergency rehearsal record	Record

17. Evidence

Reference	Note
E-009	
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- Emergency Medical Equipment & AED Readiness (MED-02)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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