

ESRD Core Survey Worksheet: Patient Roster
(Make Additional Copies As Needed)

Facility:

CCN:

Census:

Date:

<p align="center">Survey Information</p> <p>ICHD = In-center HD HHD = Home HD PD = Peritoneal Dialysis I = Interview O = Observation R = Record Review</p>	<p align="center">Reason Sampled</p>	<p align="center">Unstable</p>	<p align="center">New Admit <90 days</p>	<p align="center">Involuntary Discharge</p>	<p align="center">Home Dialysis in LTC</p>	<p align="center">Infection</p>	<p align="center">Hospitalized/ Readmitted</p>	<p align="center">Anemia Management</p>	<p align="center">Adequacy</p>	<p align="center">Calcium/Phosphorus CKD MBD</p>	<p align="center">Albumin/Nutrition</p>	<p align="center">Fluid Management</p>	<p align="center">CVC >90 days</p>	<p align="center">Transplant candidate not referred</p>	<p align="center">Observation</p>	<p align="center">Random Sampled for Observation/Interview (circle one)</p>	<p align="center">Complaint</p>
<p>Name _____</p> <p>ID _____</p> <p>Admit Date _____</p> <p><input type="checkbox"/> ICHD <input type="checkbox"/> HHD <input type="checkbox"/> PD</p> <p><input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> R</p> <p>Surveyor _____</p>																	
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ESRD Core Survey Patient Roster(continued)

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