

346 Renal Disease (ALL)

- Description**
- Any renal disease such as: pyelonephritis (kidney infection) or protein in urine (except urinary tract infection- UTI) diagnosed by provider
 - Pregnancy risks: limited fetal growth, pre-eclampsia (pregnancy induced HTN); Children’s risk: growth failure

Assess Readiness for Change: with open ended questions

- “How is your xx (i.e. kidney disease) being treated?”
- “Tell me about any diet restrictions you are following?”

Discussion, Counseling and Education

If the answer is:	Try Counseling Strategies	Try Education
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<p>Not ready →</p> <p>“It’s just because of my diabetes. I’m not worried about it.”</p> <p>Raise awareness & personalize change</p>	<ul style="list-style-type: none"> • “So it sounds like you aren’t treating your xx (i.e. kidney disease)? How about your diabetes, what kind of medications or diet changes are you doing to control it?” • “How do you feel about the treatments they have suggested for you?” • “It sounds like you don’t want to treat your xx (i.e. kidney disease), what is stopping you?” 	<ul style="list-style-type: none"> • “Diabetes is the main cause of kidney disease. High blood pressure contributes to it too. If you would like a referral to a diabetes educator we can help you find one.” • Offer feeding suggestions for disease/condition • Not high risk, refer to RD if above your comfort level
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Record Plan or Goal	Mom not interested in treating renal disease. Will re-assess readiness for change at next appointment.
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<p>Unsure →</p> <p>“I’m on antibiotics for my kidney infection. I was in the hospital a couple of days.”</p> <p>Raise awareness & confidence & identify barriers to change</p>	<ul style="list-style-type: none"> • “So you are being treated, how have you been feeling since you got out of the hospital?” • “On a scale of 1-10, how well is eating going for you now?” • “Any other things you would like to talk about today?” 	<ul style="list-style-type: none"> • Kidney infection treatment: <ul style="list-style-type: none"> ○ Antibiotics, possible IV fluids, hospitalization • Kidney disease treatment: <ul style="list-style-type: none"> ○ Treat underlying conditions (HTN, DM, etc.) ○ Medications and/or dialysis ○ Possible diet modifications: limiting water, salt, potassium, phosphorus & protein • Refer to RD as needed if out of comfort level
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Record Plan or Goal	Mom says is talking her medication. Appetite not yet improved. Check weight and re-asses next appointment.
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<p>Ready →</p> <p>“They want me to follow a renal diet but the list of foods is confusing.”</p> <p>Help plan change-support</p>	<ul style="list-style-type: none"> • “Tell me more about the foods on your list?” • “Which foods are you most confused about?” 	<ul style="list-style-type: none"> • “Yes, there can be a long list of foods to watch. Other foods that you didn’t mention that are high in potassium are dates, figs and raisins.”
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Record Plan or Goal	Mom appears following her renal diet sheet and sees renal clinic RD. Mom wants to BF. Referred to lactation consultant.
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Education Resources	<p>http://www.nichd.nih.gov/health/topics/urinary_tract_infections.cfm Resource- <i>Urinary Tract Infections</i></p> <p>http://www.medicinenet.com/kidney_failure/page4.htm Resource- <i>Diet and Renal Failure</i></p> <p>http://www.medicinenet.com/diabetes_and_kidney_disease/article.htm Resource- <i>Diabetes and Kidney Disease</i></p> <p>http://kidney.niddk.nih.gov/kudiseases/pubs/eatright/index.htm Resource- <i>Eat Right on Hemodialysis</i></p>
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