The Use of Teach-Back Questions to Improve Knowledge of the Renal Diet

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PICO Question

• In adult Hemodialysis patients, will diet education with Teach Back questions - as compare to current resources - result in greater knowledge of the diet and its parameters?

Evidence

• For adults with chronic kidney disease (including post kidney transplant) who exhibit hyperkalemia, the registered dietician should recommend or prescribe a potassium intake of less than 2.4 g, with adjustments based on serum potassium level, blood pressure, kidney function, etc. dietary and other therapeutic lifestyle modifications are recommended as part of a comprehensive strategy to reduce cardiovascular disease risk. (Journal of the ADA, June 2010.)
• A formal education program addressing end stage renal disease management for individuals undergoing dialysis is needed to meet the needs of this vulnerable population. Outcomes and treatment adherence would likely improve if individuals with end stage renal disease were better equipped for self-management of dietary, medication, and treatment adherence. (Lingerfelt, K.L., and Thornton, K., 2011)

Process/Results

• Team – Medical-Surgical Registered Nurses practicing on unit 6B at LVHN Cedar Crest Campus.
• Tool - Created a set of Teach Back Questions with a Post-Teach Back Patient Survey. Patients were asked to rate their degree of confidence in their knowledge of the Renal Diet both before and after the implementation of Teach Back Questions. Measured on a Scale of 1 to 5 (1 = not at all confident; 5 = completely confident).
• Implementation - Patient teach back tool and surveys conducted on 5 hemodialysis patients on units 6B, 6C, and 4KS.
• Results - Patient knowledge of the renal diet increased at a minimum of 25% after implementation of the teach back questions.

Conclusion/Recommendations

The addition of Renal Diet Teach Back into the plan of care for Adult hemodialysis patients does seem to provided some added benefit in improving knowledge of and comfort with nutritional parameters of the diet.

The biggest drawback to this study is time management, which may lead to inconsistent teaching practice within the nursing community.

Given population sample size and time constraints of the study, research will continue with a larger sample to provide more detailed results related to the benefits of the Renal Diet Teach Back method.

Purpose/Background

• It has been widely established by the medical community that dietary modification can be a key strategy in the management of end-stage renal disease. Most patients on dialysis need to follow a strict diet, limiting various minerals in order to maintain homeostasis. Two of the most important minerals for hemodialysis patients to monitor are Potassium and Phosphorous. An imbalance of either of these minerals in the blood can lead to serious health consequences.

• Despite current resources available at LVHN (e.g. Registered Dieticians) and the many resources available through third-parties like The National Kidney Foundation, many patients still exhibit a fundamental lack of knowledge on the Renal Diet and its role in managing chronic kidney disease.

References