

- HM.9.5 Bacteriology testing of Reverse Osmosis (RO) water as well as endotoxin assay should be performed and documented at least once per month.
- HM.9.6 Chemical testing of water is performed at least once per year.
- HM.9.7 Reverse Osmosis (RO) system including the feeding pipelines into the hospital is disinfected at least once per month, preferably by heat as well as by chemical disinfection.
- HM.9.8 All physical and monitoring checks are verified and signed off by the nephrologist with recording of any corrective actions taken (e.g., out of range results for tests of water or dialysate).
- HM.9.9 Written record and results of microbiological and chemical testing of water are in place and reviewed.

HM.10 The nurse in charge of the hemodialysis unit ensures the competency of the nursing staff.

- HM.10.1 The nursing staff receive ongoing training and education on all relevant policies including, but are not limited to, the following:
 - HM.10.1.1 Care of patients with AV fistula/AV graft.
 - HM.10.1.2 Dialysis procedures.
 - HM.10.1.3 Care of tunneled/non-tunneled catheters.
 - HM.10.1.4 Peritoneal dialysis.
 - HM.10.1.5 Assessment of patient's volume status.
 - HM.10.1.6 Anticoagulation.
 - HM.10.1.7 Management of clotted access.
 - HM.10.1.8 Hyperkalemia.
 - HM.10.1.9 Pulse oximetry.
 - HM.10.1.10 Blood transfusion.
 - HM.10.1.11 Use of defibrillator.
 - HM.10.1.12 Infection control.
- HM.10.2 The nursing staff competencies are assessed by using different methods (e.g., written test, return demonstration) and results are documented.