

Current Requirements

Remove

Change

Keep

Opportunity to train

Procedure	Diplomate Feedback			Program Director Feedback	
	Remove/ Change/ Keep	Opport. to train	Strength.	Remove/ Change/ Keep/ Opportunity to train	Strength.
Temporary vascular access for hemodialysis and related procedures (non-tunneled dialysis catheter)	45% Remove, 7% Change, 49% Keep	58%		29% Remove, 42% Keep, 29% Opportunity to train	
Percutaneous biopsy of both autologous and transplanted kidney	57% Remove, 11% Change, 32% Keep	66%		32% Remove, 20% Change, 47% Opportunity to train	
Acute hemodialysis (e.g. acute hemodialysis for acute kidney injury)	99% Keep	100%		99% Keep	
Continuous renal replacement therapy (CRRT) - (PIRRT, CVVHD, etc.)	97% Keep	100%		99% Keep	
Chronic outpatient hemodialysis	98% Keep	100%		99% Keep	
Chronic outpatient peritoneal dialysis	97% Keep	100%		100% Keep	41%

Emerging Procedures

■ Do not add

■ Add

■ Opportunity to train

Procedure	Diplomate Feedback			Program Director Feedback	
	<i>Do not add/ Add</i>	<i>Opport. to train</i>	<i>Strength.</i>	<i>Do not add/ Add/ Opportunity to train</i>	<i>Strength.</i>
Home hemodialysis	17% Do not add, 83% Add	26%	51%	11% Do not add, 50% Add, 39% Opportunity to train	
Plasmapheresis	51% Do not add, 49% Add	54%	54%	23% Do not add, 20% Add, 57% Opportunity to train	
Urgent-start peritoneal dialysis (initiating PD soon after PD catheter placement)	41% Do not add, 59% Add	43%	45%	41% Do not add, 21% Add, 38% Opportunity to train	50%
Point-of-care ultrasound (POCUS)	58% Do not add, 42% Add	61%		27% Do not add, 17% Add, 56% Opportunity to train	

Comment summary

- Home hemo: Not enough volume available for required training
- Plasmapheresis: Volume and infrastructure limitations exist
- Urgent-start PD: Important, but too much institutional variability/availability exists
- POCUS: Not universally available; consider for future