INTEGRATED RENAL CLINIC
Peterborough Regional Health Centre

WELCOME TO THE IN-CENTRE HEMODIALYSIS UNIT AT PETERBOROUGH REGIONAL HEALTH CENTRE

A Guide for Patients and Family

NORTHUMBERLAND HILLS HOSPITAL

ROSS MEMORIAL HOSPITAL
Kawartha Lakes

PRHC
Peterborough Regional Health Centre

The information in this booklet is of a general nature and may change according to your specific circumstances.

In-Centre Hemodialysis is a partnership between you and your Renal Team. If you are unsure about something please ask.

Peterborough Regional Health Centre
Dialysis Unit Contact Information

HOURS
Monday to Saturday
7:00 a.m. – 11:00 p.m.

705-876-5078

Please note that the Dialysis Unit is closed on
Christmas Day and New Year's Day

If you are having a medical emergency please call 911
or go to your nearest emergency department

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Welcome

Welcome to the Hemodialysis Unit at the Peterborough Regional Health Centre

The entire hemodialysis health care team would like to let you know that we are here to support you and your family during this time.

Our hemodialysis unit provides care, support, and treatment to people with kidney disease.
We understand that starting dialysis and living with kidney disease can be overwhelming. You are faced with many issues and challenges during this time. We are here to help you develop "New Normals' in your life and hopefully assist you and your family adjust to starting dialysis.

We find that people cope with difficult times differently. The first few weeks of starting dialysis are usually the hardest, but as time passes we find that people adjust to new situations in their own way. Most patients and families feel fear, unease or even anger, but this is often followed by acceptance and in some cases positive feelings about the dialysis experience.

Although we know dialysis can be a life-saving treatment, you may not fully understand that it can also be a life-changing experience.
For many, dialysis can greatly improve your quality of life. However for some it may not, because of the seriousness of your health problems. Please let us know if you are finding this to be true.

When you are new to dialysis, it is important to learn as much as possible about all options for treatment and to ask questions. You will see many new faces in the next few weeks and months. We are all here to make this as positive and supportive experience as possible. Please feel free to ask any team member questions you may have and we will do our best to get the answers or resources you need.

In this booklet, you will learn:

- about our hemodialysis program
- what happens during hemodialysis
- who is part of your care team
- tests and procedures you might receive
- answers to common questions
- how to access some helpful resources

Please know that we are here to help. This booklet was developed to answer some of your questions, but feel free to approach any member of the team for more information.

While in the hemodialysis unit, you might hear or read some words or phrases that you don't know. To help with this we have included in this booklet on pages 28 – 30 a section called "Glossary". These pages will help you to understand what the words mean. But again, please ask if you do not fully understand something.

Because there is a lot to keep track of before and during each treatment, we have included a 'Hemodialysis Checklist' on the back cover of this booklet for you to use.

About Hemodialysis

When your kidney function goes down to about 10-15%, you can start to get a buildup of toxins (wastes) in your blood and an increase of fluid in your tissues. This makes you feel unwell and causes symptoms such as nausea, fatigue, itching, difficulty sleeping, forgetfulness, shortness of breath and sometimes, swelling.

Hemodialysis is often started when your kidney function is about 8%. Hemodialysis removes these toxins and excess fluid from your bloodstream. Hemodialysis filters your blood through a filter called a dialyzer, which is attached to the hemodialysis machine. The machine pumps your blood through the dialyzer and removes excess fluid and waste products.

In order for hemodialysis to happen, we need to access your bloodstream through a “vascular access.” Types of accesses include fistula, graft, and permanent catheter.

For more information about the types of vascular access and to help you decide which type may be best for you, please speak to your nurse or ask to see the “Vascular Access Nurse”.

There is additional information we can share with you when you are deciding which is the best type of access is for you. Each type of access has pros, cons and things to consider. We are here to help you figure out which type may be best for you. You can also go to the Ontario Renal Network website at **www.orn.ca/ patients/ vascular-access for more information**

People on hemodialysis can enjoy a good quality of life. It is important to attend your dialysis appointments and to follow your treatment plan, which includes medicines, diet and fluid advice.

Hemodialysis Locations

Dialysis is offered in a variety of locations.

Hospital Dialysis Unit
Many patients start their hemodialysis treatments this way. Patients come to hospital for their treatment and go home when the treatment is over. The main Hemodialysis Unit is located at the Peterborough Regional Health Centre, smaller satellite units are located in the Lindsay and Cobourg Hospitals.

Transition Unit
Some patients will receive their hemodialysis treatments in the Transition Unit for the first one or two months. The Transition Unit is located at PRHC and is connected to the Home Dialysis training area. The Transition Unit nurse will provide your routine hemodialysis care and provide you education about the different dialysis and transplant options.

Inpatient unit
For short periods of time, hemodialysis can be provided to patients while they are admitted to hospital.

At home
Patients can learn to do dialysis in the comfort of their own home. You will learn more about this option from the dialysis staff. Ask to speak to the “Nurse Navigator” for more information about your home dialysis options.

In the community
There is a small dialysis clinic located in Peterborough, on High Street, called the Dialysis Management Clinic.

Treatment options

In Centre Hemodialysis is not the only option for people with kidney failure. Our Nurse Navigator can provide you with information about your treatment options.

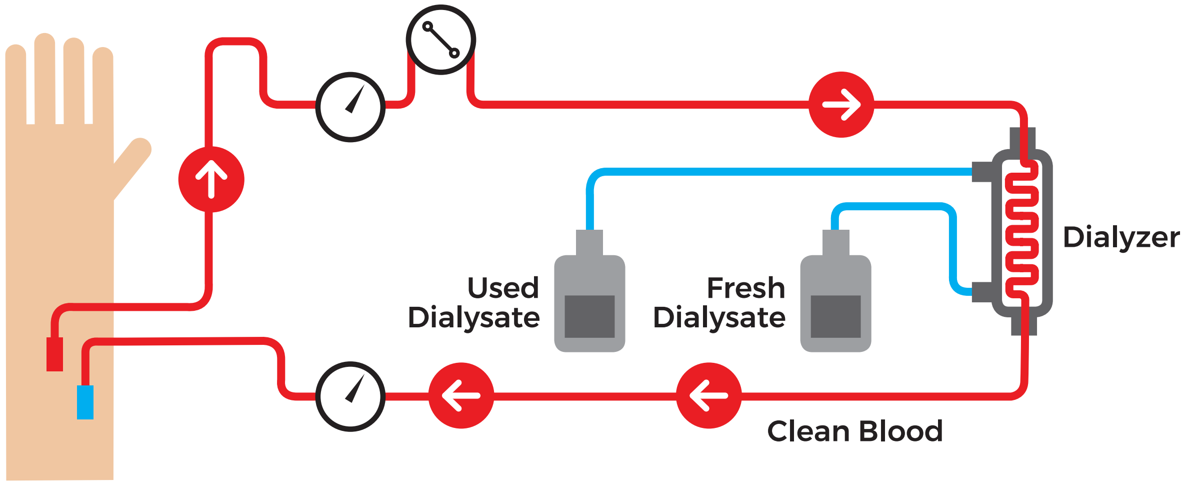
Peritoneal Dialysis
This type of dialysis is performed in your home. A catheter is surgically inserted into the peritoneal cavity in your abdomen. A special solution goes into your abdomen through the catheter. The solution remains in your abdomen for a period of time, and then the fluid is drained out. The special fluid comes into contact with the lining inside your abdomen, called the peritoneal membrane to remove waste and extra fluid from your blood. The peritoneal membrane acts like a filter to clean your blood.

Home Hemodialysis
Your hemodialysis treatments are performed by you in your own home. You will be trained to access your vascular access and operate the dialysis machine. Training will take place in the hospital with our home hemodialysis nurses.

Transplantation
A kidney transplant can be received from a living or deceased donor. A transplant work-up needs to be completed to determine your eligibility.

Conservative treatment
You have the right to make your own choices about how your kidney failure is treated. Dialysis is a voluntary treatment and you may decide to stop your treatments at any time. However, it is important to know that dialysis is a life-sustaining treatment. Without it your health will continue to fail, and you will eventually die. Excellent medical care is still available if you choose this treatment option. Conservative treatment includes the use of medications and diet to maximize you comfort and help alleviate symptoms.

To learn more about your treatment options, please contact the nurse navigator at 705-743-2121 x 3770



Hemodialysis safety

We want to give our patients the best possible care. Patients who play an active part in their own care do better and stay safer.

Help stop the spread of germs
People with kidney disease have a weakened immune system, making them more susceptible to getting an infection. For this reason washing hands and taking the other steps described in this section are especially important.

Hand washing is the best way to stop the spread of germs.

Wash your hands with soap and water or hand sanitizer rub **before:**

- eating and drinking
- touching any cuts, sores or bandages
- touching your eyes, nose or mouth
- leaving the waiting room
- leaving the hemodialysis treatment area

Wash your hands with soap and water or hand sanitizer rub **after:**

- using the toilet
- blowing your nose
- touching any cuts, sores or bandages
- touching garbage
- sneezing or coughing

Cover your cough or sneeze with a tissue. The germs from a cough or sneeze travel a meter (3 feet or more!) If you do not have a tissue, cough or sneeze into your elbow. Do not cough or sneeze into your hand.

If you have the flu or a cold (coughing, sneezing, muscle aches etc.), ask a health professional for a mask to wear while you are waiting for and during your hemodialysis treatment.

If you have vomiting or diarrhea please let the hemodialysis staff know right away.

We encourage you and your family to get immunized to help us prevent illness.

Preventing falls
During and after hemodialysis, patients can feel unsteady or light-headed.

To keep you safe:

- Please wear shoes with non-slip soles
- After hemodialysis, take your time to sit up and then stand
- If you feel unsteady, sit back down and let us know

During your visit, we check to see if you are at risk for falls, or if you have had any falls since your last hemodialysis treatment. Let us know if you have any difficulties getting from sitting to standing or moving around. If you have a mobility aid, bring it to your dialysis treatments. If you need help to get around, please ask.

Foot Assessments
To prevent and manage wounds and other concerns with your feet, the nurses will do a periodic assessment of your feet. Your nurse will provide you additional information about this.

A few more suggestions
Hemodialysis units can be confusing. We may overlook something that is important to you.

Here are some helpful hints:

- If you don’t understand something about your care, ask us to explain it.

- If something seems different about your care one day, ask us why, for example, we give you a new medicine or we do not give you a medicine that you usually take

- If you do not see your nurse, doctor or other health care staff wash their hands before giving care; feel free to ask if they have washed their hands.

Questions I want to ask:

Keeping Healthy

It is very important that you continue to see your family doctor for regular health check-ups. If you have any health concerns that are not related to your kidney disease, contact your family doctor. If you are seeing any other doctors, such as specialists, continue to see those doctors as needed.

We suggest that all patients on hemodialysis get the flu shot every year.

It is also important to maintain your dental health. See your dentist for regular check-ups. Have any dental problems treated as soon as possible. Make sure you tell your dentist that you are on hemodialysis. You may require antibiotics when having certain procedures to prevent infection.

Let us know if you have any changes to your health status, have been to an emergency room or your doctors’ office (your family doctor or other specialists) between hemodialysis sessions.

Getting to and from hemodialysis

By car
Many people feel tired after their dialysis treatment. Please plan to have someone drop you off and pick you up, especially for the first few weeks.

It is recommended that even if you drive yourself, that you have an alternative means of getting to and from the dialysis unit if needed, this could be a family member or friend, or always have extra money on hand for a cab if needed.

If, after a particular treatment, the health care team feels you are not safe to drive, we will ask you to stay in the unit and make other arrangements to get home safely. If you do not feel ready to leave the unit or to drive home, please let us know.

Parking Fees
There is a reduced monthly parking rate for hemodialysis patients. Please ask for a parking permit to take to the Parking Office when purchasing your monthly parking pass.

By other means
Handi-Van transit service is available in the city of Peterborough. Community Care volunteer drivers and other services are also available in some areas of our region. For more information please speak to your social worker, they can help you understand your transportation options and help to set them up.

It is the patient's responsibility to get to and from the Hemodialysis unit, so if you need help walking or if you use a wheelchair you will need to make arrangements to get to the hemodialysis unit. Hemodialysis staff are not able to come to the parking lot or main entrance to get you. During the day, volunteers are available at the information desk inside the front lobby and may be able to assist you.

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What you can expect from us

Respect
A welcoming and respectful relationship with you and your family is essential to your care. We value the diversity of our patients and work with you to create a care plan that is respectful of your needs. Each member of our staff, volunteers and physicians will strive to build a professional therapeutic relationship with you.

Confidentiality
We keep your personal and health information confidential. We only share information with those team members who are involved in your care. We need to know if there are family members or friends who you want us to share information with. We will ask you for this information and note it in your chart, and if this changes please let us know.

Support
We know this is not an easy time for you. There is a lot to learn and a lot happening. We are here to help and support you with your dialysis needs. Feel free to ask questions.

In addition, many of our patients tell us they have been helped by the Kidney Foundation of Canada's Kidney Connect Peer Support Program. You can contact this service by calling: 1-866-390-PEER (7337) or visiting: www.kidney.ca/peer-support

If you are considering Kidney Transplant as an option our program has Transplant Ambassadors who are available to speak to you. Our Ambassadors are people who have received a kidney transplant or donated a kidney to a loved one. They are available to meet and speak to you and your family about their lived experience as either a donor or recipient. They understand the process and may be able to assist you as they know first-hand what you are going through. If you would like to speak to a Transplant Ambassador please ask a member of your health care team.

Education
We give all patients and their families an opportunity to get involved in their hemodialysis care. Our education program gives you the information you need to make decisions about your health and treatment. During your hemodialysis treatment, we will share information about available education materials and services. Please do not hesitate to ask us for information.

Communication
If you do not speak or understand English well enough to have conversations about your health or to make medical decisions, we can book an interpreter to help us communicate. You do not pay for this. You are welcome to bring a relative or friend who speaks English for general conversation and questions.

If you have concerns about your care or safety, we would like to hear from you! We are committed to working with you to address concerns and find a reasonable solution.

- If you have a concern or complaint, please first speak with the person who provided the service, or to the charge nurse or manager of the unit.

- If you still have a concern and would like to make a formal complaint, please contact Patient Relations by calling 705-743-2121 x 3674

What we expect from you

Respect
Please respect those around you by:

- Respect other’s privacy
- Take responsibility for your behaviour and actions
- Keep the volume of the TV or radio low or use headphones
- Do not bring in any strong smelling foods to eat
- Do not use any scented products such as soaps perfume, cologne, or aftershave

Confidentiality
While you are receiving dialysis, you might hear conversations that are private. We ask you to respect the privacy of each patient on our unit and not talk to anyone else about what you hear.

Get involved
While on hemodialysis we encourage you to take part in caring for yourself. Tell us about your health. Let us know if you have any worries and concerns about your disease or care.

Ask us about joining the Renal Patient and Family Experience Council. This council is made up of renal patients, family members, and staff. The Council provides an opportunity to shape decisions, influence change and improve care. The council allows patient and family members the opportunity to share their perspective and ideas about how the hospital can better serve our patients and family members. For more information, see below.

PRHC has a Partnership Pledge that further outlines what is expected of staff, patients, visitors, physicians and volunteers. The Partnership Pledge is included on page 31 for your reference.

Renal Patient and Family Experience CounciL (PFEC)

The PFEC is currently looking for members to join our Council

If you think you may be interested in volunteering some time each month to:

- Represent the voice of patients and family members

- Provide input and advice on specific issues related to health care delivery and services

- Participate in the development of new programs, services and patient/family tools

- Assist with the creation of long term strategies for Patient and Family engagement.

The Council seeks members who are interested in collaborating to create positive change. New members are recruited all year.

If you are interested in becoming a PFEC Advisor, attending a meeting, want more information about the PFEC or would like to speak to an Advisor please contact:

The Renal Nurse Navigator at
705-743-2121 x 3770 or krmorgan@prhc.on.ca

Your hemodialysis schedule

We give you a schedule when you start hemodialysis. This schedule may be temporary for the first couple of weeks, especially if you are admitted to hospital when you first start dialysis.

To decide on your permanent hemodialysis schedule, we consider your medical needs and other issues that can influence your care. Hemodialysis units provide care for many patients and it may at times be necessary to change patients' schedules. We appreciate your understanding.

You will be given a treatment time. Please arrive on time for your scheduled treatment. Upon arrival to the unit, please register with the Dialysis Clerk inside the Dialysis Unit. You will be asked a couple of registration questions and given a patient identification wrist band. You will then be asked to wait in the waiting area. A nurse or 'Dialysis Assistant' will come to the waiting area and call your name. They will assist you to the scale and weigh you. They will then take you to your hemodialysis machine.

Once we bring you into the unit, it can take 15-30 minutes or more to start your treatment. Our nurses always attend to patients based on their medical and dialysis needs. There may be times when your hook up time may be delayed because of issues with other patients or the machine. We thank you for your patience.

Plan for another 15 – 30 minutes at the end of hemodialysis to finish your treatment and for us to make sure you are well enough to go home.

If you rely on transportation home after dialysis please keep in mind that your pick up time may vary day to day.

How long are hemodialysis treatments?
Your doctor decides how often and long you dialysis treatments should be based on:

- the results of your blood tests
- your body size
- the amount of fluid retained between your hemodialysis treatments (measured by weight gain)
- how well your fistula, graft, or catheter is working
- our standards of care and current research

This may change over time. Your doctor may recommend longer treatments.

Usually people will have three (3) dialysis treatments scheduled throughout the week, some people may need five (5) or six (6) treatments per week.

Most people's hemodialysis treatment will be about four (4) hours, but remember you need to also add the time before and after your treatment, so expect to be in the hemodialysis unit for about five (5) hours.

Do I have to stay on the hemodialysis machine for the whole time?
Our goal is to try and keep you as healthy as possible while on hemodialysis. Many people ask us if their treatment time can be shortened or be done less often through the week. It is important that you stay for your full hemodialysis treatment. Hemodialysis treatments only replace a small part, less than 5 to 10%, of the normal function of your kidneys. This is far below the 100% of normal kidney function.

If you don't get enough dialysis, your blood will hold on to more waste products and over time, you will feel unwell. This can affect your overall health. In general, you will do better with more dialysis rather than less.

DID YOU KNOW?

If your hemodialysis treatment time is shortened by 10 minutes a run, this means losing out on 26 hours or 2 weeks of dialysis time in a year!

What if I need to miss a hemodialysis treatment?
Generally, it is best not to miss treatments. If you absolutely must miss your treatment, please call the unit as soon as you know. We may be able to reschedule your treatment.

If it is unsafe to travel to the hemodialysis unit because of bad weather please call the dialysis unit to reschedule.

If you do not call the unit, and do not show up for a treatment, we will attempt to call you. If we cannot get a hold of you, we may call the local police to visit your home to make sure you are okay.

What if I feel too sick to go to hemodialysis?
The reason for feeling sick may be related to your kidney disease, so coming for dialysis is very important. If you feel sick, call the dialysis unit and get instructions from them. If you have a severe problem such as shortness of breath, chest pain, abdominal pain, unusual weakness, excessive bleeding, etc., call 911 or go to your nearest Emergency Room.

If you are admitted to hospital, please ask your nurse at that hospital to call the Hemodialysis Unit. We will arrange for you to receive your next hemodialysis treatment.

What if I want to change my hemodialysis schedule?
Please do your best to keep all your hemodialysis appointments. If you need to change your schedule to attend an appointment or special event, please give as much notice as possible.

Please note: While we will do our very best to adjust your hemodialysis times, we may not be able to re-book for missed or cancelled treatments.

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The hemodialysis unit facilities and guidelines

Waiting area
Please wait in the waiting area until you are called in for your treatment.

Washrooms
We have washrooms in the unit for patients. Each washroom has a call bell in case you do not feel well or need help. Visitors are asked to use the public washrooms.

Smoke-free and scent-free
There is no smoking anywhere in the building or on hospital grounds.

Many people are sensitive or have allergies to fragrances. Use only unscented soaps and shampoos. Do not wear perfumes or colognes.

Food and drinks
We do not routinely provide meals or snacks. Nutritional supplements may be provided to some patients if they are medically necessary as determined by the dietitian and/or nephrologist. We suggest you eat a meal at home before hemodialysis. You should continue with your regular three (3) meals a day, even on dialysis days.

We encourage that you to bring a small high protein snack to your dialysis treatment. This can help prevent protein loss in your body, which is a common side effect of dialysis. A high protein snack would include a boiled egg or salmon and crackers. For more snack ideas ask to speak to your dietitian.

Eating during your hemodialysis treatment may make you feel unwell and lower your blood pressure so let your nurse know if you begin to have symptoms of this, which may include nausea or a sudden urge to have a bowel movement. Let you nurse know right away if you suddenly start to feel unwell.

It is also a good idea to have a small snack with you in case your dialysis treatment is delayed or you are required to stay longer than usual.
If you have diabetes, remember to always bring a snack, in case you need it during hemodialysis.
We have a water and ice machine. Check with your nurse to see if it is okay for you to have ice or ice water during your treatment as you may need to restrict your fluid intake. Please ask for help to get ice or ice water.

What to bring
Bring a small notebook to write down questions you have or suggestions you are given.

Bring a blanket for your comfort. Choose one that can be washed easily in case blood spills on it, and wash it often.

Bring a pillow or cushion for your comfort.

Bring something to do, watch or read during your hemodialysis treatment. Suggestions of things you could bring are:

- music players (with headphones)
- hand held games
- books or e-books
- laptop or tablet (we have Wi-Fi)

Visitors
You are welcome to bring one or two visitors with you. We may ask your visitors to leave for a short time during certain situations. Some examples are during hemodialysis 'hook up' or 'take off' time, and during special procedures. We ask that if your visitor is sick (a cold or the flu for example), they reschedule their visit to when they are well.

Preparing for hemodialysis treatments

Clothes
Wear loose comfortable clothing that allows easy access to your dialysis access site. Wear clothes that can be washed easily, in case blood or other liquids are spilled on your clothes. You may be asked to change into a hospital gown.

Medicines
Bring all medicines you are taking to your first treatment, including:

- prescribed medications
- over-the counter medicines
- herbal medicines, vitamins, and supplements

Our pharmacist, nurse or doctor will check your medicines with you. After your first treatment, notify your healthcare team of any new medicines you are taking or of any changes. Discuss with your doctor or pharmacist whether your medicines or the timing of your medicines needs to change on dialysis days.

Every couple of months you will be asked to bring in all your medications for the pharmacist or nurse to review.

It is very important that we have a correct and up to date list of all medications, including over the counter, herbal medicines, vitamins, and supplements you are taking as this plays a big part in dialysis management

Arriving
Please arrive on time for your scheduled treatment. Coming in earlier does not get you on hemodialysis faster. You might have to wait a long time before we can start your treatment. Every time you arrive, register with the ‘Dialysis Clerk’ and then wait in the waiting area until we come to get you. This keeps the treatment area clear and is safer for everyone. When it is your turn, we bring you to your hemodialysis station. Please let the Dialysis Clerk know if:

- your Health Card information changes
- you have a change of address
- your contact information changes
- your next of kin or emergency contact changes
- your family doctor changes

Weighing in
Healthy kidneys control the fluid balance in our bodies, and dialysis does this job when your kidneys stop working. Healthy kidneys work 24 hours every day removing extra fluid and waste products.

When kidneys don’t work properly, urine production slows down and sometimes stops completely. This makes it very important to remove the leftover fluid during your dialysis treatment.

We use a “target” or “dry” weight to tell us how much extra fluid is in your body and has to be removed during your dialysis treatment.

A staff member will help you use the scale to weigh you before and after each hemodialysis treatment. Your doctor decides what your ‘target’ weight should be. This is the weight that is best for you to be at the end of each dialysis treatment.

Weighing in before your treatment helps us figure out how much water needs to be removed from your body during your treatment.

Your nurse will calculate using your in-weight and target weight to see how much fluid needs to be removed. The amount of fluid to be removed during your treatment is called your ‘goal.’ The nurse will subtract for any extra weight if you are wearing shoes, boots or heavy clothing when you weigh in and out.

As you start to feel better, you might have a better appetite. We might need to increase your target weight. We are only able to remove fluid weight with dialysis, not muscle or fat tissue. Let your nurse and dietitian know if you think you might be gaining weight so your target weight can be assessed.

DID YOU KNOW?

One kilogram (Kg) of body weight is equal to one litre (L) of body fluid. If you need to lose 2 kilograms, the hemodialysis machine removes 2 litres of body water. 2 kilogram equals 4.4 pounds.

Before your dialysis starts
Wash your hands with soap and water for at least 45 seconds or use the hand sanitizer rub. Remember the best way to stop the spread of infection is to wash your hands.

If you have a Fistula or Graft in your arm, wash your access site before your treatment.

Collect what you need before you settle into your dialysis chair.

The nurse will want to complete a detailed check of your health.

Tell us:

- If you have had any doctor appointments or had to stay in the hospital since your last treatment
- If you have had any changes to medicines since your last treatment. Remember to bring in any new medicines
- If you have had any unusual health events since your last treatment
- If you have had a fall since your last treatment
- If you do not feel well

We check your heart rate, temperature, and blood pressure (both standing and sitting). We will need to check your blood pressure during your treatment, so please leave the blood pressure cuff on.

When you settle into your chair, make sure you can always reach the patient call bell located on your TV remote.

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The hemodialysis treatment

Before your treatment
It is normal to feel nervous when you first start hemodialysis. Your nurse will explain how the hemodialysis machine works. Ask as many questions as you need to ask.

If you have a fistula or graft, we insert two needles into your fistula or graft to begin dialysis. One needle takes the blood out of your body and the other returns the cleaned blood to your body. To keep your fistula or graft working properly, we place the needles into different parts of the fistula or graft with each treatment. If you have a catheter in your upper chest, we connect you to the hemodialysis machine using the two ends or 'ports' of your catheter.

You should not feel any pain once the needles are in place. Tell your nurse if you do have pain or discomfort during your treatment.

Blood may be drawn before dialysis is started. Blood tests are done routinely to see if changes to your treatment are necessary. The blood tests are drawn from the dialysis tubing so you do not need to be poked with a needle.

During your treatment
During hemodialysis, only about 1 cup (250 ml) of blood is outside the body at any time. You do not feel the blood moving in or out of your body. You may get low blood pressure during hemodialysis.

Tell us right away if you start to feel:
- dizzy
- faint or lightheaded
- restless
- sweaty or warmer than usual
- sick to your stomach (nauseated)
- you need to have a bowel movement
- your heart is racing
- you have blurred or double vision

If this happens, ways we can treat your low blood pressure are:

- We lower the head of your chair to lay you down flat
- We can raise the foot of the chair. This will help move blood back towards your head and heart
- We can give you some extra fluid through the hemodialysis machine

Muscle cramps or a headache can happen, but are not common. If you feel anything unusual, let us know right away so we can help you.

You can help yourself by following your diet and fluid limits between treatments. Going over these limits will increase the amount of fluid that must be removed during treatment. Taking away the extra fluid is one of the things that may make you feel sick.

After your treatment
When your hemodialysis is finished, your nurse removes your fistula or graft needles. You or a staff member will apply pressure to the needle sites for at least 10 minutes to stop the bleeding.

To hold pressure over the needle sites:

- Put on a pair of gloves
- Hold a gauze pad over the needle site using two fingers. Press at the needle site and just above
- Hold constant firm pressure for at least 1O minutes
- We may take out one needle at a time and ask you to hold each site separately

Once the bleeding has stopped we will:

- Place a clean gauze pad over the needle site and tape it in place. Never wrap the tape around your arm as this can reduce the blood supply to your fistula or graft
- Remove and discard your gloves
- Wash your hands with soap and water or with hand sanitizer rub

Before you leave

We check your heart rate and blood pressure (both standing and sitting) and your temperature.

Some people get a low blood pressure after the treatment. If you feel faint, dizzy, or lightheaded after your hemodialysis:

- Sit down right away.
- Tell one of us that you do not feel well.

For your safety, we do not let you leave until you are feeling better. If you do not recover right away, we might arrange for you to go to another area for care until you feel better.

A staff member will weigh you before you leave the unit.

Remember to wear the same clothing and use the same scale as when you weighed in. This will help us check that the right amount of water weight was removed.

Carry packets of gauze with you in case your fistula or graft needle sites start to bleed after you leave the unit.

Have someone drive you home after the first few treatments (longer if possible). You might get very tired after hemodialysis so it is safer if someone drives you.

Kidney doctor rounding days

While you are on hemodialysis, the kidney doctors will see you at the dialysis unit once a week, usually on a Monday or Tuesday. This is called ‘Doctor’s Rounding Day’. This schedule may vary at different times of the year. The doctor will see you less often if you are at a satellite unit.

The kidney doctors can renew your routine medications during regular rounding days. The kidney doctors will not renew narcotics. This must be done by your family health care provider.

Questions for the kidney doctor:

At home after hemodialysis

Take it easy
Rest when you get home from dialysis.
You might feel quite tired. Many people feel better once they have been on hemodialysis for a few weeks.

Care of your access after dialysis

If you have a fistula or graft:

- Take the gauze and/or band-aid off four (4) to six (6) hours after your dialysis treatment. If you receive dialysis in the evening, ask your nurse when to take off the gauze and/or band-aid. You may be told to do this the next morning

- Be careful not to pull off the scab when you remove the band-aid

- Avoid scratching or picking at the scabs

- If you have a catheter, remember not to get it wet, a tub bath instead a shower is the safest way to keep the site dry and reduces the risk of infection

If your access starts to bleed after you leave the hemodialysis unit:

- Put firm pressure over the needle sites again for 10 minutes. Keep the pressure constant. Do not peek under the gauze during this time

- After 10 minutes, check to make sure that the bleeding has stopped. Tape a clean gauze pad over the area. Leave the new gauze on for four (4) to six (6) hours before you try to remove it

- If the bleeding does not stop within 20 minutes, call the dialysis unit, or go to your nearest emergency department if outside of regular hours

Every day
Check your fistula, graft, or catheter to make sure there are no issues by:

For Fistula or graft:
Feel for a buzzing sensation, called the ''thrill," under the skin where the fistula or graft is

Catheter (neck line):
- Check that all the clamps are closed and the caps are on tightly

- If you have pain, redness, swelling or discharge around the catheter you might have an infection. Let your nurse know

When at home, call your Hemodialysis Unit right away if:

- You can't feel the "thrill" or if it feels different than usual

- There is redness, warmth, pain or swelling in your fistula or graft arm or along your catheter or in your neck or face

- There is any oozing or drainage from your fistula, graft or catheter exit site

- You are feverish and have any of the above symptoms

- Part of your catheter outside your skin seems to be getting longer

- Your catheter is accidentally pulled partially or completely out and you are bleeding around the exit site. If this occurs:

    - Do not panic
    - Sit in a chair or lie down in bed

- Apply pressure at the exit site and over the tunnel area
- Call for help from anyone who is at home with you
- Call your hemodialysis unit if open
- If the bleeding does not stop or starts to get worse, continue with the pressure and call 911 for assistance

Save your veins!
If you have a fistula or graft, never let anyone:

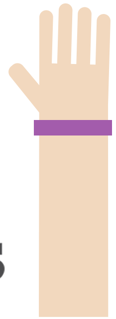
- Take your blood pressure on that arm
- Put an IV (intravenous) in that arm
- Take blood work from that arm

Do not be afraid to tell health care professionals to use your other arm. Some may not know what a fistula or graft is or that you have one.

To let healthcare professionals know that you are a kidney patient and need to protect your veins you can:

Wear a Medical Alert bracelet
To get one go to www.medicalert.ca
or call 1-800-668-1507

Wear a "purple"
Save My Veins bracelet



About your medicines

Medication record
We record all medicines you are currently taking in your patient record. Periodically throughout the year, the dialysis team will ask you to bring in all your medicines for a full Medication Review.

All your medicines mean:

- all medicines ordered by your doctors, including injections, inhalers, nasal sprays, cream/ointments and eye/ear drops
- medicines you can buy without a prescription such as cold medicines, laxatives and antacids
- pain medicines
- medicine samples
- vitamins
- herbal supplements
- natural remedies
- nicotine replacement therapy

Changes in your medicines
If another doctor orders a medicine for you, or you start a new medicine or herbal product, please bring it to your next hemodialysis treatment and show it to the renal nurse or pharmacist. Medicines can work differently in a person on hemodialysis. We will check to make sure they are okay with your hemodialysis. Always tell your other doctors and pharmacists that you are a hemodialysis patient so they can give you a dose that is safe for you.

For your safety, we strongly encourage you to get all of your medicines from one single pharmacy.

Be prepared for an emergency:
Always have at least a two (2) week supply of your medicines.

Tests, procedures, and appointments

Blood tests

We do blood tests during your first and sixth treatment, and then every 6 weeks after that. The doctor might order blood tests more often depending on the results from these tests. We use the results of your blood tests to help plan your treatment, diet, and what medicines you should take.

If you see your family doctor or specialist for a health problem and that doctor wants you to have blood tests:

- Bring the request form with you when you come in for your next hemodialysis treatment. We may be able to draw it or you may already have a recent result on your file that can be sent to the doctor
- We will draw the blood when you are here for dialysis. This way you will not be poked with another needle
- The results can be sent to your family doctor or specialist

- In rare cases, some blood work may not be able to be tested by our hospital lab, in this case you would need to get the blood work taken elsewhere

Other tests and procedures

When you come for your first treatment we will:
- Take swabs to check for bacteria
- Take blood to test for hepatitis and HIV
- Have you sign a treatment consent form (NOTE: this may have already been done in the Kidney Clinic)

When you come for your 6th dialysis treatment we will:
- Do a number of blood tests before and after your dialysis treatment
- Do an electrocardiogram (ECG)
- Do a TB skin test

Every six (6) weeks we will:
- Take a number of blood tests before and after your dialysis treatment

Every six (6) months to 12 months we will:
- Take swabs to check for bacteria
- Take blood to test for hepatitis and HIV

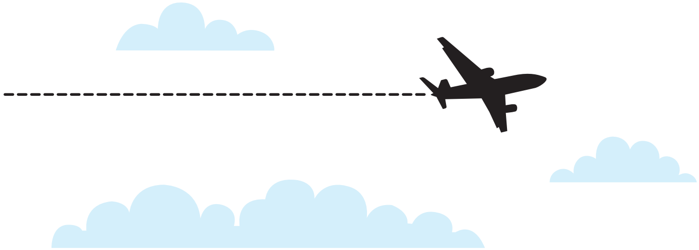
NOTES

Hemodialysis and travelling

It is possible for dialysis patients to travel, but you must make your own arrangements for dialysis at a dialysis unit where you are travelling. Once you find a dialysis unit, your home unit will coordinate your treatments with them. Your home unit must prepare paperwork before you travel. On average to arrange this it will take:

- at least four (4) weeks for travel in Ontario
- at least two (2) months for travel outside Ontario.

In cases where a family emergency occurs within Ontario and you only need one or two treatments away, it may be possible to lessen the time needed to prepare for travel. If you want more information or need help finding dialysis units in your destination city, please ask a staff member.



The hemodialysis care team

YOU and your family:
You play a key role in your dialysis care. Your role is to ask questions and our role is to try to help you find the answers and solutions to assist you. We are all here to help you to the best of our abilities. Different members of the team have different strengths and specialties. It is important that you ask questions and we will all do our best to get the answers that you need and to provide access to the community resources available to you and your family.

Nurses
Our nurses take care of you during your treatment and work with you to make a plan for your care. Hemodialysis nurses receive special education about caring for patients on dialysis.

Hemodialysis nurses will:
- check your condition and review blood test results
- connect you to the hemodialysis machine and monitor the machine for any alarms
- take you off the machine when your hemodialysis is complete
- check that you are well enough to go home

If you have questions about your treatment, please ask your nurse. The nurse will help you and your family to learn more about kidney disease.

Hemodialysis Charge Nurse:
These nurses are in charge of running one or more hemodialysis units. Speak to this nurse when:
- You have questions or concerns that your nurse or other team members cannot answer
- You would like to make changes to your treatment schedule
- You have any other concerns

Vascular access nurse:
The vascular access nurse talks with you about

the options for vascular access such as fistula, graft, or catheter and helps you decide which option is the best one for you.

The vascular access nurse works closely with the nurses in the hemodialysis unit to make sure your access stays healthy and helps with any problems with your vascular access. The vascular access nurse may arrange for special tests and procedures.

Nurse navigator:
This nurse helps patients learn about treatment options, including the different types or dialysis and transplant. The nurse navigator can assist you to have a smooth transition when transferring from one treatment option to another. This nurse can also assist you in finding resources and providing education to help make informed health care choices and develop a care plan.

Nephrologist (kidney doctor):
A nephrologist is a specially trained doctor, who cares for people with kidney disease. There are five (5) kidney doctors in our program.

You will see all five (5) kidney doctors in the dialysis unit. The doctors take turns rounding in the dialysis unit. If you are admitted to hospital, a kidney doctor will also assist with your care. The kidney doctors care for any concerns related to your kidneys and work in partnership with your family doctor, and other specialists who will look after your other health concerns. If you do not have a family doctor, we can give you information on how to find one.

Dietitians:
Eating well is an important part to improve your health and plays a big part in how you feel. The renal dietitian will provide dietary recommendations that will help you stay healthy. People on dialysis are more likely than others to be malnourished. Your renal dietitian will watch for any signs that may show that you are becoming malnourished and will work with you and your doctor to prevent or improve this.

The renal dietitian will:
- assess your nutrition state
- assess and recommend if you need nutritional supplements to get enough protein, calories, vitamins and minerals
- meet with you regularly, to go over your lab tests and to see how you are doing
- make dietary recommendations and provide counseling to help you stay healthy
- monitor and help you maintain certain blood values within their normal range.

You may require dietary modifications to maintain a healthy potassium, phosphorus, sodium and/or fluid balance.

Ask to speak to your dietitian if you have questions about food and your nutrition, or if you have changes in your appetite or weight, or trouble with digestion.

Social workers:
Whether you have known for some time that you would need dialysis, or it has come as a shock, starting dialysis treatments is a stressful time.

For most people and their family, starting dialysis can be difficult. It takes time to adjust and to find ways to fit dialysis into your daily routine. Over time you will begin to develop a ‘new normal’. Each person’s experience is different. It is normal to have feelings of sadness, fear and even anger when starting dialysis, and sometimes these feelings may reoccur when you have been on dialysis for a while. Social workers can meet with you and your family to talk about these feelings and explore ways to cope and adjust to the changes.

Social Workers can also help with things like:
- finding and accessing community resources
- Advance Care Planning and Advance Directives, including assistance with Power of Attorney and Living Wills
- transportation and parking
- financial assistance
- employment or retraining
- housing

If you want to speak with your social worker, ask your nurse to contact them.

Renal Pharmacist:
Our pharmacist regularly reviews the medicines you are taking to make sure they continue to be the right ones for you. The pharmacist will also work with you and your kidney doctor to make decisions about your medications. If you have any questions or concerns about your medicines, ask to speak to the pharmacist.

You will use a community pharmacy to get your medicines.

- Make sure that your community pharmacist knows you have chronic kidney disease. Ask them to attach a note to your personal file in their computer system
- Make sure that you ask your doctors and pharmacists, "Is this medicine okay with my level of kidney function?" You should do this for all prescriptions, over-the-counter medicine and herbal supplement that you plan to use

Hemodialysis assistants:
Hemodialysis assistants set up, take apart, clean the hemodialysis machines and assist you to and from the waiting area.

Together with the nurses, the assistants may:
- listen for and attend to machine alarms
- help provide hemodialysis care
- assist you to feel comfortable and safe during your treatment

Biomedical hemodialysis technologist
You might meet one of our technologists during your treatment. They have special training and maintain the hemodialysis machines and water purification system

Unit clerks
You will register with the unit clerk when you arrive for your dialysis treatment. The unit clerks keep your chart organized and process requests for tests, medicines or procedures that the kidney doctors have asked for. When your nephrologist wants you to see other health professionals or go for tests, the unit clerk makes the appointments and places a note in your chart for your nurse to give you.

Renal Leadership Team
The leadership team consists of a director, chief nephrologist, managers, administrative assistant, quality & safety consultant, and nurse educator. These team members are responsible for ensuring your health care team has the resources and knowledge to provide you with the best possible kidney care. They are accountable to meet the expectations of the organization, provincial and federal governing guidelines with external stakeholders such as the Ontario Renal Network, Accreditation Canada and the Ministry of Health. If you would like to speak with a team member, please reach out to the manager of the program and she/he will be happy to follow-up with you.

The Hemodialysis Unit Manager can be reached at 705-743-2121 x 3234

Community resources

CATEGORY	ORGANIZATION	CONTACT INFORMATION
Community and Home Supports	**Community Care Peterborough** Contact Community Care Peterborough for a full list of the services they provide	705-742-7067 www.commcareptbo.org
	VON (Victoria Order of Nurses)	705-754-9155
	Community Living Peterborough	705-743-2411
	Hospice Peterborough	705-742-4042
	Kidney Foundation	1-800-387-4474
	Peterborough Public Health	705-743-1000
	United Way Peterborough	705-742-8839
Accessible Transportation	**Community Care Volunteer Drivers program**	705-742-7067
	Handi-van (for city)	705-745-5801
	Caremobile (for County residents)	705-749-0036
	Driving Ms. Daisy	705-868-0074
	Capital Taxi (accessible van)	705-742-4242
	Call a Cab (accessible van)	705-745-2424
Meals	**Meals on Wheels of Ontario** Delivers nutritious, delicious and affordable meals to seniors, people with physical disabilities and cognitive impairments, individuals suffering from illnesses and recovering from surgeries, and those who need special dietary planning and assistance	mealsonwheels.of.ontario@gmail.com
	Heart to Home Meals	www.hearttohomemeals.ca
	Castle Keep Catering in Lindsay	705-320-9990 www.info@castlekeepretirement.com
Recipe Ideas for Kidney Friendly Diets (Websites)	**Spice it Up**	www.spiceitup.ca/recipes
	Kidney Community Kitchen	www.kidneycommunitykitchen.ca
	Davita	www.davita.com/diet-nutrition/recipes

Community resources

Financial Support and/ or Medication Coverage Ask a Social Worker for additional resources and contact information	**Ontario Disability Support Program (ODSP):** · Financial assistance for people with disabilities and their families · Covers essential living expenses and other benefits such as prescription drugs and vision care	705-742-9292
	Ontario Works · Income support to help with the costs of basic needs, like food, clothing and shelter · Health benefits for clients and their families are also included	705-748-8830
	Old Age Security Pension: The Old Age Security pension is a benefit payable to most Canadians age 65 and over who meet the Canadian residence requirements	1-800-277-9914
	Canada Pension Plan (CPP) Disability Benefit The Canada Pension Plan (CPP) Disability Benefit is a long-term disability insurance program in Canada. It is designed to provide financial assistance to CPP contributors who are not able to work regularly because of a severe and prolonged disability	1-800-277-9914
	Employment Insurance (EI) **EI Sick Benefits:** provides temporary support to people who are unable to work because of sickness, injury, or quarantine **EI Compassionate Care Benefits:** available to people who have to be away from work temporarily to provide care or support to a family member who is gravely ill with a significant risk of death	Service Canada Centre 1-800-622-6232
	Trillium Drug Plan (under 65) · The TDP helps people who have high prescription drug costs relative to their household income · It covers all drugs under the Ontario Drug Benefit (ODB) program	1-800-575-5386

Miscellaneous	**The Kidney Foundation of Canada** · Provides information, referrals and educational materials · Short-term and/or emergency financial assistance to cover expenses associated with kidney disease and its treatment · Living Organ Donor Expense Reimbursement (LODER) Program · Peer support program: connecting individuals who have been affected by kidney disease · Insurance and tax tips	www.kidney.ca
	Ontario Renal Network · Information about renal services across Ontario · Educational material about treatment options, vascular access, transplant, and diet	www.renalnetwork.ca
	Explore Transplant Ontario • Provides information to patients and their loved ones about kidney transplant	Ask a staff member for an Explore Transplant Ontario education package and website link
	Kidney Campus • To help you learn about kidney disease and the treatment options available to you. • A tool to guide you when making decisions about treatment types	www.kidneycampus.ca
	Advance Care Planning - "Speak Up" • Advance Care Planning (ACP) involves thinking about and sharing your wishes for future health and personal care. It can help you tell others what would be important if you were ill and unable to communicate • This website provides a communication tool kit that you can use to start the conversation about ACP with loved ones	Ask a Social Worker for resources and contact information

Glossary

Blood test
A sample of blood taken and sent to the lab for testing. This is usually taken from the hemodialysis machine during treatment. It can also be taken from a vein in the arm using a needle

CPO (Carbapenemase Producing Organisms)
A CPO is a normal bacteria, often found in your bowel, that has developed the ability to stop most antibiotics from working. A person can have normal CPO bacteria in their bowel and not have any health problems. If an infection develops from this bacteria, then treatment will likely be difficult. Sometimes these bacteria are called other names such as CRE or CPE.

Aranesp (Darbepoetin) and Eprex (Erythropoietin)
Medicines used to treat a person with a less than normal number of red blood cells (called anemia). People with chronic kidney disease can have anemia.

Dialysate, Dialysis Bath or K-Bath
Dialysate is a solution of purified water, electrolytes and salts, such as bicarbonate and sodium. The purpose is to pull toxins from the blood into the dialysate. The way this works is through a process called diffusion. The Dialysate is in a jug and can be called a Dialysis Bath or K-Bath.

Dialyze
To have your blood filtered through a hemodialysis machine.

Dialyzer
A special filter in the hemodialysis machine that removes wastes from the blood. The dialyzer is sometimes call an ‘artificial kidney’

Electrocardiogram (EKG or ECG) Test
‘Electro’ means electrical activity, ‘cardio’ means heart, and ‘gram’ means a print out. This is a test that checks the electrical activity of the heart and is represented as lines printed on paper.

Echocardiogram
Instead of electrical activity, this test uses sound waves to get images of the heart.

Hemodialysis
When a machine is used to clean or filter wastes and remove extra fluid from the blood (A job normally done by the kidneys).

Hemodialysis Schedule
You will be provided a Hemodialysis schedule which will include the days of the week and times that you will be having your dialysis treatments. Most people have dialysis treatments three (3) days a week but some people may need five (5) treatments per week. Most treatments can last from three and a half (3.5) to five (5) hours each. Most people will have hemodialysis on Monday, Wednesday and Fridays or Tuesday, Thursday and Saturday, each week. Hemodialysis treatments are scheduled in the morning, afternoon and evening.

Arrival Time
You will be given a time to arrive in the dialysis unit. This arrival time is about 15 minutes ahead of your estimated treatment start time. It gives you time to register with the Clerk, hang up your coat, visit with fellow patients and so on. You are asked to wait in the waiting area until a staff member calls you back to the Dialysis treatment area. You will be assisted to the scale by a staff member at this time.

Treatment Time
Your doctor will decide how long your hemodialysis treatment time should be. This is the amount of time that you are connected to the dialysis machine. It does not include the time it takes for your nurse to assess you before and after each treatment. For example, if your doctor orders a 4 hour hemodialysis treatment, you would need to include an additional 20 to 30 minutes before and after treatment to determine the length of time you will be in the dialysis unit. For example, if you are scheduled for a four (4) hour treatment you should anticipate being in the dialysis unit for four and a half (4.5) to five (5) hours.

Hook-up or Treatment Start time
The time your nurse assesses you and connects you to the hemodialysis machine. This time can vary from treatment to treatment.

Take-off time
The time when your nurse disconnects you from the hemodialysis machine and checks to make sure you are well enough to go home. This time can vary from treatment to treatment. As this is not a set time, if you rely on a driver to take you home, please allow for additional time when telling them when to pick you up.

Hepatitis B
An infection caused by the hepatitis B virus, causing irritation and swelling of the liver. Spread by contact with infected blood or body fluids. The liver usually recovers within four (4) to six (6) months.

Hepatitis C
An infection caused by the hepatitis C virus, causing swelling of the liver. Spread by contact with infected blood or body fluids. This infection can cause permanent damage to the liver.

HIV
Human Immunodeficiency Virus (HIV) causes an infection that damages the immune system. Your immune system helps you to fight infection and other diseases. HIV can be spread by contact with infected blood or body fluids.

MRSA
(Methicillin Resistant Staphylococcus Aureus)
An infection caused by the bacteria staphylococcus aureus, which is resistant to the antibiotic Methicillin. These bacteria normally live on human skin and in the nose. An infection from this resistant bacteria can be difficult to treat.

Tuberculosis (TB)
An infection caused by the bacteria ‘tubercle bacilli. You can breathe in these bacteria from someone who has the infection. While the infection starts in the lungs, it can spread to other parts of the body, such as the brain, bones, or joints.

Target Weight or Dry Weight
The kidney doctor decides what your target weight should be. This is the weight that is best for you to be at the end of each dialysis treatment. Your nurse will use your pre-treatment weight and your target weight to figure out how much fluid needs to be removed during your dialysis treatment.

Uremia
A term used to refer to symptoms associated with kidney failure such as feeling tired (fatigue), nauseated, itchy or losing your appetite.

VRE (Vancomycin Resistant Enterococcus)
An infection caused by the bacteria called ‘enterococcus’ and resistant to the antibiotic Vancomycin. These bacteria normally live in

the human bowel and can sometimes cause an infection. An infection from this resistant bacteria can be difficult to treat.

Vascular access
Can be a fistula, graft or catheter that allows access to your bloodstream. The vascular access takes your blood to the hemodialysis machine and returns your blood to your body after it has been cleaned. There are three kinds of vascular access:

Fistula
This is also called an AVF (arteriovenous fistula). To create a fistula you will need an operation. Needles are inserted to connect you to the hemodialysis machine.

Graft
This is also called an AVG (arteriovenous graft) or 'graft.' To create a graft you will need an operation. Needles are inserted to connect you to the hemodialysis machine.

Central Venous Catheter
This is also called a "perm cath," or a CVC. This tube is inserted into your chest. It might be used if your hemodialysis needed to be started urgently.

Other words I want to ask about:

Acknowledgments

This document was adapted from the BC Renal and St Mike's Hemodialysis Patient Booklet.

Additional information has been provided by the Kidney Foundation of Canada and the National Kidney Foundation.

PRHC Partnership Pledge

Together , we'll take care...

A PARTNERSHIP PLEDGE

Everyone at PRHC takes part in your care and keeping you safe. As an organization we will go above and beyond to ensure we exceed your expectations, every day, and provide you with the best possible care and hospital experience. Patients and family members also have a role. Please join us in creating the best care experience possible for you.

As your PRHC health care team, we will:

- Put you, the patient, at the centre of every decision that is made about your care
- Introduce ourselves and explain our role in your care
- Recognize your family (as defined by you) as important members of the healthcare team
- Share information in ways that you and your family will find helpful
- Deliver care that respects your values, preferences, and expressed needs
- Involve you and your family in all aspects of the planning, delivery and evaluation of healthcare services
- Be respectful and courteous to patients and family members

As PRHC patients and family members, we will:

- Ask questions and share our feelings and concerns with the healthcare team
- Work with our healthcare providers to develop our plan of care and follow it as best we can
- Be open and honest in providing health related information, including current medications
- Designate, where possible, one person to liaise with the healthcare team
- Provide feedback to support the improvement of care practices and services
- Be respectful and courteous to PRHC physicians, staff, volunteers and other patients

Thank you - your involvement is important and we want to hear your thoughts.
Your care team members and the manager in your area are available to speak with you.
For more details on any of the above, please see our Handbook for Patients and Visitors.

From Peterborough Regional Health Centre physicians, staff, and volunteers.

Hemodialysis Checklist

On your first visit:

- Bring all your medicines, including herbal medicines, vitamins, and supplements.
- Let us know at least one week before if we need to book an interpreter.

Preparing for every visit:

- Wear shoes with slip-resistant soles
- Wear loose fitting clothes that are easy to wash
- Bring any medicines you need to take during your treatment
- Bring in any new medicines for us to check
- Bring a book or electronic device to read or something to help pass the time
- Headphones for the TVs
- Bring a list of any questions you might have
- Bring a small notebook to write down questions or advice

Every visit:

- Arrive on time for your scheduled hemodialysis treatment
- Tell us about any changes to your medicines
- Tell us about any changes in your health or if you have stayed overnight in the hospital for any reason
- Wash your hands with soap and water or hand sanitizer rub
- Wash your fistula or graft site with soap and water
- Check to make sure your call bell is within reach

Regular checks:

- Check your fistula, graft or catheter daily
- See your family doctor for regular check-ups
- See your dentist for regular check-ups

PRHC
Peterborough Regional
Health Centre

Peterborough Regional Health Centre
1 Hospital Drive, Peterborough, Ontario K9J 7C6
705-743-2121
Form #4232, Revised February, 2019

Guided by you · Doing it right · Depend on us
www.prhc.on.ca