Welcome to the R. Fraser Elliott Hemodialysis Program

Information for patients and families

Read this booklet to learn:

- What is hemodialysis?
- Who is my clinic team?
- How do I prepare for my clinic appointments?
- Where do I get more information?

Dialysis machine

Image used with permission from:
what-when-how.com/acp-medicine/chronic-renal-failure-and-dialysis-part-3/
# My hemodialysis schedule

I am going to the:

- **East** Hemodialysis Unit  
  Toronto General Hospital  
  150 Gerrard Street  
  Ground floor, Gerrard Street entrance  
  416-340-5707

- **West** Hemodialysis Unit  
  Toronto General Hospital  
  150 Gerrard Street  
  Ground floor, Gerrard Street entrance  
  416-340-4072

### On these days:
- Monday, Wednesday and Friday
- Tuesday, Thursday and Saturday

### On these nights:
- Monday, Wednesday and Friday nights
- Tuesday, Thursday and Sunday nights

### At the following approximate times:
- Morning (7:30 am to 12:30 pm)
- Afternoon (12:30 pm to 5:00 pm)
- Evening (5:00 pm to 10:30 pm)
- Nocturnal (10:30 pm to 6:30 am)

Please be ready to start your shift on time. A unit staff will call you when they are ready. Please stay in the waiting area until you are called.
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Welcome

Welcome to the R. Fraser Elliott Hemodialysis program.

In our program a team of professionals will care for you. We are here to help you through hemodialysis and help you be as healthy as possible.

Read this handbook to learn more about the program. You are an important part of the team. If you have questions, feel free to ask any members of your hemodialysis team.

Your feedback is important to us. Please let us know what you found helpful in this booklet. Tell us what we should change or add to make it even better.

Give your feedback to:

Denise Williams at  416-340-4072
Annellie Cristobal at 416-340-5707
When is the Hemodialysis Unit open?

<table>
<thead>
<tr>
<th>Hours:</th>
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<tbody>
<tr>
<td>Monday to Saturday</td>
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<tr>
<td>Sundays</td>
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<tr>
<td>Closed</td>
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</tbody>
</table>

We are closed on Christmas Day and New Year’s Day. We will tell you when to come in, if you would normally come on one of these days. We are open on other holidays.

Hemodialysis shifts (times are approximate):

<table>
<thead>
<tr>
<th>There are 4 shifts every day:</th>
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<tbody>
<tr>
<td>Morning</td>
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<tr>
<td>Afternoon</td>
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<tr>
<td>Evening</td>
</tr>
<tr>
<td>Nocturnal (night)</td>
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</tbody>
</table>

Who is on my hemodialysis team?

Primary Nephrologist:

Nurse Manager:

Patient Care Coordinator:

Primary Nurse:

Vascular Access Coordinator:

Social Worker:

Dietitian:

Pharmacist:

Physiotherapist:

Spiritual Care:
About your hemodialysis team

We have a whole team of professionals working with you. Your team members have special training in treating kidney disease. We follow the best clinical practices. We also use new technology to give you the best care possible.

Please feel free to talk to any member of the team if you have questions. Tell the staff if it is urgent.

How can I contact a member of the team?

- ask your nurse
- call the hemodialysis (HD) unit

Who is part of the team?

You and your family
Think of yourself as part of your health care team. This will help you to play an active part in your health. It will also help you to be as independent as possible. Your family and friends also have an important role in your health. We look forward to meeting them. Please let us know who to contact in case of emergency. Also tell us who we can talk to about your health.

continued ➔
Program Leaders
The Program Leaders manage the hemodialysis program. They can help you if you cannot resolve a problem with other members of the hemodialysis team. The program leaders include:

- nurse managers
- a medical director
- a clinical director
- a technical manager

They are always available to listen to your concerns.

Hemodialysis Nurses
Registered nurses (RN’s) care for you during your hemodialysis. These nurses have special training for hemodialysis. They have the knowledge and skill to provide safe, quality care. There are many nurses in the unit. You will get to know them.

You will have a primary nurse who will help to arrange your care overall. You should talk to your primary nurse about general problems or concerns. You may not always have your primary nurse during your hemodialysis (HD) treatment. Your nurse for the day will help you with concerns that need attention right away.

Charge Nurse
The charge nurse makes sure that the HD treatments in the unit run smoothly and on schedule. The charge nurse will try to help you with any concerns.

continued ➔
**Doctors**
The doctors in the unit are all kidney specialists (nephrologists) or nephrologists in training. Each patient has a primary nephrologist, based on your HD schedule. Your primary nephrologist is in charge of caring for your kidney failure. This doctor is responsible for your HD treatment and medicines.

You will usually see your primary nephrologist once a week. On the other dialysis days, one of the nephrologists in training will see you.

These doctors will do rounds during your HD treatment. This is to take care of any important issues in your treatment that relate to your kidney failure. They can also give you a prescription for medicines when you need them.

**Family doctor**

It is important to have a family doctor to care for any problems that do not relate to your kidneys. Please let us know who your family doctor is. We need to let them know about changes in your medical condition. Make sure your family doctor and nephrologist know about any changes in the medicines you are taking.

**The Technical Team**

This is a group of Biomedical Engineers and Technologists. They make sure the HD machines and water treatment systems are working well. We also have technical aides who sterilize your dialyzer. They prepare it for you each time you come for HD.
### Hemodialysis Assistants

Hemodialysis Assistants are team members who help the nurses with your hemodialysis (HD) treatments. They do things like help to prepare your machine, help you weigh, and help you move around. They also bring supplies and equipment to where they need to go.

### Vascular Access Coordinator

Our vascular access coordinator helps you with your HD access to keep it working well. The coordinator can arrange for you to see a vascular surgeon. This person can also arrange tests or procedures you need for your HD access.

### Social Workers

When you begin HD, you will get a social worker. Your social worker is here to help and support you and your family/caregivers. They offer counselling to help you and your family cope with kidney disease and adjusting to HD. Social workers can help you with things like:

- transportation
- coverage for medicines
- housing
- home care services
- income support

They can help improve your quality of life. Talk to them about any concerns.

*continued →*
Dietitians
When you begin HD, you will get a renal dietitian. Renal dietitians are trained to help people with kidney disease get the foods and nutrition they need to be as healthy as possible. They will work with you to plan a diet for your special needs. To make this plan, they will keep many factors in mind, such as:
- blood test results
- medicines
- other medical conditions that you have

Chiropodist
We have a chiropodist to help take care of your feet, especially if you have diabetes. Tell one of the nurses if you have problems with your feet such as:
- pain
- sores
- ulcers
- change in colour

We can arrange for a chiropodist to see you during your HD treatments. We can also arrange a separate appointment for you, if you need it.
Pharmacist
The pharmacist is there to answer any questions about your medicines. The pharmacist can also update your chart and set up your own medicine schedule. The pharmacist works with the doctors and your own pharmacy to make sure you have the best medicine for you. To speak to the pharmacist, ask your hemodialysis (HD) nurse to arrange this.

Please tell your HD team about any new medicines and prescriptions that you get through other health care providers. We need to record the new medicines on your health records. We also need to make sure they are safe for you to take with other medicines and your HD treatment. You may need to bring all of your medicines in from time to time to make sure that all of them are right for you.

Unit Clerks
The unit clerks book your appointments and answer the phone. They also keep things organized and running smoothly. They will ask you for your health card, your first and last name, and date of birth at each visit. They will register you and give you an armband.

Housekeeping Staff
Our housekeeping staff members make sure we care for you in a clean and safe environment. They make sure that each hemodialysis station is clean and ready for your treatment.

Other Team Members
There may be other team members you may wish to see, such as someone in Spiritual Care, a Psychiatrist, Physiotherapist, or Occupational Therapist. We can arrange this for you.

continued
What else should I know about the Hemodialysis Unit?

UHN’s Declaration of Values

This document is our promise to patients to work together with you and your family, as partners in your care. Please read it to learn how we can work together.

University Health Network Code Of Conduct

Patients and hospital staff have the right to a safe environment, free from any kind of discrimination or harassment. We have a hospital policy that says we will not tolerate violence or any physical, verbal or mental abuse.

We expect our staff, patients and visitors to live by our code of conduct. This means that we expect everyone to:

- speak quietly
- treat others with respect
- help us create an area of calm in the treatment area

Patients or visitors who do not follow this policy will be asked to leave right away. We may call security or the police to help in some cases.

If you have concerns please speak with your Nurse Manager so that we can work together to find a solution.

Guidelines for patients and visitors

Please remember that the Hemodialysis Unit is a patient treatment area for you and many other people. We must respect the needs of all patients. This includes privacy, as well as a calm and quiet environment.
Perfume and scented products
Please do not use perfume and scented products while in hospital. This includes hair spray, lotions, and deodorant that are scented. These products can cause reactions such as breathing problems and headaches. We ask all staff, patients and visitors to respect these health concerns.

University Health Network (UHN) will do its best to provide a scent-reduced environment for all employees, patients and visitors. We will use cleaning materials that have no scents, when possible.

Visitors
• Each patient can have 1 visitor at a time.
• We expect visitors to treat staff, patients and other visitors politely and to cooperate with staff. We will ask visitors to leave the unit if they cannot do this.
• We will not tolerate using hurtful words, shouting and/or physical abuse.
• Visitors must stay in your care station and respect other patients’ privacy.
• There are times when no visitors are allowed in the treatment area. At these times visitors can stay in the waiting area. Some examples are:
  o When you start or finish your dialysis.
  o If another patient becomes sick in the unit. The nurse may ask visitors to stay in the waiting area to give the patient some privacy.
• If you have visitors under 12 years of age, another adult must be with them at all times.
• Visitors should not come to the hospital if they feel sick with fever, cough, diarrhea or vomiting.
• Visitors must use the public washrooms and not the patient’s washroom

Hand washing
Hand washing is the best way to prevent infections. To wash your hands:

• Use soap. Keep washing under running water for 15 to 20 seconds (the time it takes to hum the ‘Happy Birthday’ song twice). Be sure to wash your fingernails, thumbs, and your whole hand.
• Instead of using soap and water, you can also rub your hands with hand sanitizer until dry.

You and your visitors should wash your hands at these times:
• before you enter the unit and before your treatment
• before you touch any equipment such as thermometer, scale or HD machine
• after eating and using the bathroom
• before you leave the unit

Feel free to ask health care staff “Did you wash your hands?”

If you are ill
If you have a cough or fever, follow these steps before you come into the unit:
1. put on a mask
2. wash your hands with hand sanitizer
3. report to the receptionist

If you have nausea, vomiting or diarrhea, please call our main number at 416-340-4072 or 416-340-5707. Tell the staff about your illness before you come in for your dialysis.

If the person who is bringing you to the hospital is sick, please ask them to stay at home. Find someone else to take you to your hemodialysis (HD) appointment.

Fire Safety
• If you discover a fire, please pull the fire alarm.
• If you cannot pull the alarm, tell a staff member right away.
• Get to know where the exits are for the unit. Know which one is closest for you.

If there is an emergency and we need to leave the unit, we may need to stop your treatment. You may move to another area of the hospital or go outside. The nursing staff will continue to care for you, so be sure to follow the directions of the staff.
### About hemodialysis

**What is hemodialysis?**

Hemodialysis is also called “HD” or “Hemo”. It is a treatment that cleans the toxins from your blood. It also removes water from your body.

You are getting hemodialysis because your kidneys can no longer clean your blood as well as they should. There are also other kinds of dialysis, which you can find on page 18.

**How does hemodialysis (HD) work?**

During HD, your blood comes out of your body and passes through a dialyzer. A dialyzer is a machine that works like a kidney. The dialyzer cleans your blood and sends it back into your body. There is only about 1 cup of blood outside of your body at any time during the treatment.

Most people with kidney failure have HD 3 times per week. Each session takes 4 hours.

Starting on hemodialysis (HD) can be scary and strange. We will help you become more comfortable with your treatment and our program.
What is a vascular access?

We will connect your body to the dialyzer machine, so it can clean your blood. To do this we need to have direct access to your blood. This is called **vascular access**.

There are different kinds of **vascular access**. For some types, we need to use needles. Here are the different types of access:

**AV Fistula (Arteriovenous Fistula)**

A surgeon makes an AV fistula by joining an artery and vein in your arm. This is done by a small surgery. The AV fistula usually takes 6 to 8 weeks to “mature” (be ready to use). After it matures, we can use it for HD using special dialysis needles.

**AV Graft (Arteriovenous Graft)**

An AV graft is similar to the AV Fistula. It is also made during surgery. But, instead of joining your own artery and vein, the surgeon puts in an artificial vein under your skin. Your surgeon connects one end of the tube to your artery. The other end is connected to your vein. Your AV graft is ready for dialysis about 2 to 4 weeks after your surgery.

If you need dialysis sooner, your surgeon may be able to put in a special AV graft. It can be used in 2 days after your surgery.
We will need to change where we put the needles each time. This is important so that your access can last for a long time.

**Hemodialysis Catheter**

You may need a temporary hemodialysis catheter if your AV access site is not ready yet. We may use a hemodialysis catheter as a short term way to do hemodialysis. This is a plastic tube we put into large veins in your neck or groin area.

The dialysis nurses will change the dressings, but you should keep it clean and dry between treatments.
What are some other ways of doing dialysis?

You can also have dialysis at home or in a self-care hemodialysis unit. In either case, you can do the dialysis by yourself or get some help. Many people prefer the freedom of doing dialysis at home, rather than coming to the hospital.

**Home Nocturnal Hemodialysis**

Nocturnal Hemodialysis is another way of doing Hemodialysis while you are sleeping at home. You would do it up to 5 nights a week.

There are many benefits to Nocturnal Hemodialysis. These include: better heart function, more energy, better appetite, more sexual drive, less fluid or food restrictions, and fewer medicines. Ask your nurse or doctor about it, and ask for a copy of our Nocturnal Hemodialysis pamphlet. To learn more about it, ask your nurse or call the Home HD unit at 416-340-3736.

**Home Peritoneal Dialysis**

Peritoneal Dialysis (PD) is another way of doing dialysis at home. In order to clean the blood, a tube (catheter) is put in through the abdomen and special fluid goes into your abdomen area. You can do this during the day or at night, and it is easy to do. To learn more about it, ask your nurse or call the Home PD unit at 416-340-5672.

**Self-care Hemodialysis**

Self-care Hemodialysis is for patients who want to control their own care. A nurse helps you to gradually learn how to do hemodialysis treatment on your own. You do this in a friendly, home-like setting. We have a self-care centre at Sheppard and Yonge (Sheppard Centre), and one in Mississauga at Burnhamthorpe and Hurontario (Sussex Centre). Ask your nurse about it and ask for a pamphlet with more information about each centre.
Your hemodialysis appointment

How should I prepare?

1. **Learn all you can**
   It is important to learn about your condition and your care plan. This will help you to get the best care for you and be as healthy as possible.

2. **Be ready to ask questions**
   Your health care team is here to work with you. At first it may seem like you have a lot of information. We will help you to understand it. We will also help you to be a full partner in making choices about your treatment.

3. **Talk to others**
   It can help to talk to others who need dialysis. You can learn through their experiences. But, remember that every person is different. Not everyone needs the same care.

4. **Entering the hospital for nocturnal HD**
   You will register with the ward clerk at the Gerrard St. entrance. Please give the ward clerk your health card at each visit. If you arrive after 11:00 pm, you will need to enter from the emergency department and identify yourself as a nocturnal hemodialysis patient.

What should I bring?

1. **Something to do**
   Feel free to bring a book, small craft work, a music player, or DVD player with headphones to help you pass the time.

2. **Loose fitting clothes**
   Wear loose fitting clothes. This makes it easier to do the treatment. Do not choose your best clothes. There is a chance you clothes will get soiled during your treatment.
3. **Food**

Eat before coming for hemodialysis. You can also bring food from home to eat before your treatment. There is a refrigerator, microwave and ice machine for you to use in our patient kitchens. The kitchens are inside the Hemodialysis Unit.

Do not eat during your treatment. This can make your blood pressure drop.

Do not bring foods that have strong smells to the unit. This may cause others to feel unwell.

4. **Bedding**

Each patient station has 1 pillow, 1 sheet and 1 blanket. If you need more than this, you can bring them from home. These items need to be clean and with no scents. Please read our scent-free policy on page 11.

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**What if I am not feeling well?**

If you are not feeling well, it is still very important that you come in for your HD treatment. Missing even one treatment can affect your well-being.

If you have nausea, vomiting or diarrhea, please call us **before** you come in for your dialysis. Call our main number and tell us about your illness.

West Hemodialysis Unit 416-340-4072
East Hemodialysis Unit 416-340-5707

If you have a cough, fever, or other illness, follow these steps before you come into the unit:

1. Put on a mask
2. Wash your hands with hand sanitizer
3. Report to the receptionist

**How do I change the treatment time?**

To change the treatment time for a special event or appointment, please talk with the charge nurse for your unit. We will try to adjust your hemodialysis (HD) to fit your schedule.

To change your regular HD schedule, please contact the Nurse Manager/Patient Care Coordinator (PCC). We will put you on a waiting list for the time you prefer.
What can I expect when I come for hemodialysis (HD)?

When you arrive

- Please register with the ward clerk in the Gerrard lobby and give your health card to the ward clerk. The ward clerk will give you an armband.
- For nocturnal HD – if you arrive after 11:00 pm, you will need to enter from the emergency department and identify yourself as a nocturnal hemodialysis patient.
- Please stay in the waiting area until a staff member calls you. You may have to wait a little while. This is so we can prepare your HD treatment.

Inside the unit

- When you come in, you will meet with a nurse. The nurse will see how much you weigh and check your “vital signs”. Your vital signs are your blood pressure, respirations, temperature and pulse.
- Make sure to tell the nurse how you are feeling. Also talk about any problems you had between treatments. Tell the nurse if you would like to see any other team members.

When the HD treatment starts

- You will be sitting in your chair for the whole time. Feel free to read, watch TV, or just rest during the treatment.
- Each patient can have 1 visitor at a time. Please see the rules for visitors on page 12.
- The hemodialysis machine checks your blood pressure during the treatment.
- If you feel ill during the treatment, let the nurse know right away.
At home

How can I protect my fistula or graft?

Your vascular access is your “lifeline”. Here are some things you can do to protect your fistula or graft.

- Tell your nurse or doctor about any changes you notice in your access, such as redness, pus, or tenderness. Put your hand on your fistula every day. Check for a pulse or buzzing, called a “thrill”. If you do not feel a thrill, contact the dialysis unit. If you have a graft, you do not need to do this. People with grafts usually cannot feel a thrill. That is normal. Keep your access site clean.

- Be careful not to bump or cut your access site. If it is cut, go directly to Emergency Department at your nearest hospital.

- Do not lift heavy objects (such as grocery bags) or put pressure on your access.

- Let us know if you have any redness or tenderness. These may be signs of an infection.

When you see a health care professional:

- Do not sleep on your access arm.

- Do not wear tight fitting clothing around your access arm.

- Do not put these things on your access arm:
  - Elastic bands
  - Watchbands
  - Purses
  - Shopping bags

- Never pick at scabs near your graft or fistula needle sites. Tell the nurse about any new area or areas that are not healing.

- Do not keep your access arm bent for long periods of time.
Remember to tell all health care workers that you have an AV fistula or AV graft. Do not use the arm with your access site for:

- taking your blood pressure
- having blood taken
- having an intravenous (IV) put in

How else can I protect my health?

Wear your Medic-Alert® bracelet or necklace at all times

It is important that you wear a Medic-Alert® bracelet (this also comes in a necklace or watch). This will help in case of an emergency when you cannot speak for yourself.

The Medic-Alert® bracelet should say that you are on Hemodialysis. It should also list important medical information and allergies.

If you would like to buy a Medic-Alert® bracelet or necklace, ask your social worker for an order form. You can also order one online at:

www.medicalert.ca/en/members/products

Get your vaccinations

Hemodialysis patients should get vaccinations to protect their health.

There are 3 important vaccines:

1. Flu vaccine
   - Every fall, we will offer you the influenza (flu) vaccine. This is because people with kidney disease on dialysis are more likely to be very ill if they get the flu.

2. Hepatitis B vaccine
   - If your blood tests show that you do not have immunity against this virus, you will need the hepatitis B vaccine.
   - Once you get this vaccine, we will check your blood for immunity on a regular basis. We will offer “booster” doses of vaccine if your immunity drops below a safe level.
3. Pneumonia vaccine

- You will need this vaccine every 5 years.

You can refuse any of these vaccines. However, Health Canada and other organizations strongly recommend them for all hemodialysis patients. These vaccines not only reduce your risk of serious infections. They also reduce the risk of infecting other patients and staff in the Hemodialysis Unit.

If you have any questions or concerns about these vaccines, please talk to your Hemodialysis doctor or nurse.

What should I do in an emergency?

<table>
<thead>
<tr>
<th>Go to your local Emergency Department if:</th>
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<tr>
<td>• You cut your access site</td>
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<tr>
<td>• You have any other emergency medical concern</td>
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</table>

Tell them that you get hemodialysis regularly at Toronto General Hospital.

Bring a piece of paper with all your important medical information:

- your medical history
- contact numbers and doctors names
- allergies and medicines

Show this to the hospital or show it to Emergency Medical Services (ambulance) staff.

Always keep this piece of paper in your wallet with you. Your nurse or doctor at dialysis could help you with it.
Other helpful resources

<table>
<thead>
<tr>
<th>Name</th>
<th>Kidney Foundation of Canada</th>
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<tr>
<td><strong>Contact</strong></td>
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<tr>
<td>Phone:</td>
<td>416-340-4800 extension 3821</td>
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<tr>
<td>Website:</td>
<td><a href="http://www.kidney.ca">www.kidney.ca</a></td>
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The Kidney Foundation offers support for anyone with kidney disease. They have a peer support program which links people up with others who have gone through the same experience. There are also many other resources to help you such as their manual, “Living with Kidney Disease”, brochures, videos and patient-related conferences.

The pamphlets and manuals are available online in many languages on the website. You may also wish to provide support to others with end stage kidney disease.

Get involved!

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<tr>
<th>Name</th>
<th>Pharmacy at Toronto General Hospital</th>
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<tr>
<td><strong>Contact</strong></td>
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<tr>
<td>Phone:</td>
<td>416-340-4075</td>
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<tr>
<td>Location:</td>
<td>1st floor MUNK Building</td>
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Hours:  Monday to Friday,
        8:00 am to 6:00 pm
        Saturday, 9:00 am to 2:00 pm
        Closed Sundays and holidays

It is important that you do not run out of your medicine. Refill your prescriptions 2 weeks before you run out. Speak to the doctor who sees you during your hemodialysis if you need a new prescription.
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<tr>
<th>Name</th>
<th>Interpretation Services</th>
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<tr>
<td><strong>Contact</strong></td>
<td>Hemodialysis Unit</td>
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<td></td>
<td>Our Hemodialysis Unit staff members speak more than 14 different languages. We can often give you care in your own language. There is also an interpretation service through the hospital. You can use this if no one in the unit speaks your language.</td>
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<th>Name</th>
<th>Spiritual Care</th>
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<td><strong>Contact</strong></td>
<td>Hemodialysis Unit</td>
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<td>If you would like to see someone from Spiritual Care, please ask your primary nurse. We can arrange this.</td>
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<th>Name</th>
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<td>When your health has improved after being on hemodialysis, you may want to consider getting a kidney transplant. A transplant can come from someone who is living, or a donor who has died. First, we will need to see if you are able to get a transplant. You will need to have a medical exam and other tests and interviews. A Transplant Coordinator will explain the tests and help prepare you for transplant. If you want to find out more about a transplant, please speak to your primary nurse or your doctor. They will arrange for you to see the coordinator. The best option is to receive a kidney from a living donor, who may be a relative, spouse or friend. It usually takes a few months to prepare both the donor and the recipient for a living donor transplant. The other choice for a transplant, is to go on a waiting list for a kidney from a donor who has died. You should know that waiting on the list for a kidney transplant from a deceased donor may be a long process (6 to 10 years).</td>
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</table>
For more information, talk to your social worker. You can also call the Patient Travel Services at 1-800-634-6254.

It is a little harder to travel when you need hemodialysis. However, with good planning you can do it. It is important to keep your usual lifestyle as much as possible.

You can find a list of hemodialysis units around the world on the internet. **It is your responsibility to contact a unit and get a spot in the area you are visiting.** Please tell your primary nurse a few months before you leave. This will help us to make sure that everything is ready for you.

When you travel to other provinces in Canada, other hemodialysis centres usually accept your health card and will often bill OHIP directly. When you travel outside of Canada, you often have to pay in advance. Then you will send the information to OHIP, which may cover part of the costs.

**Lions Camp Dorset**

Website: www.lionscampdorset.on.ca

You can also get more information from the nursing staff or your social worker.

This is a camp that offers hemodialysis treatments during the summer and fall. Spots are limited. Patients who have never attended will be accepted first. It is in Dorset, Ontario, near Algonquin Park. The Lions Club and the Kidney Foundation of Canada are major sponsors. The camp gives patients and families the chance to get away, and stay in an environment like a cottage. There is a nominal fee. The camp usually assigns 1 week for patients from our hospital to attend. If you have your own cottage nearby, you can also go at other times.

Inquire early! Spots fill up quickly.
<table>
<thead>
<tr>
<th>Name</th>
<th>Hemodialysis Exercise Program</th>
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<tbody>
<tr>
<td><strong>Contact</strong></td>
<td>Hemodialysis Unit</td>
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<tr>
<td>We have an exercise program that gives you the chance to exercise while on Hemodialysis. Our physiotherapists run the program. It helps the time go by. It may also improve the quality of your treatment and your health. We encourage you to try it. If you are interested, tell your nurse or doctor. They can arrange this for you. Before you start a doctor and physiotherapists need to see if this is okay for you to join. You may need to have some heart tests before you start.</td>
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<tr>
<th>Name</th>
<th>Research Studies</th>
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<tbody>
<tr>
<td><strong>Contact</strong></td>
<td>Hemodialysis Unit</td>
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<tr>
<td>Our program is closely linked with the University of Toronto. This means that we often take part in research. The hospital reviews all projects to make sure that the research does not expose patients to any unnecessary risks. We may ask you to take part in some research projects. You can choose to take part or not. Your choice will not affect the care you get.</td>
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<tr>
<th>Name</th>
<th>Newsletter</th>
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<tbody>
<tr>
<td><strong>Contact</strong></td>
<td>Hemodialysis Unit</td>
</tr>
<tr>
<td>From time to time, you may also receive a special letter from the managers or doctors. Make sure you read these letters. If you need to have them translated, let us know.</td>
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This resource was written by:
Denise Williams, RN, MN, C Neph C, Linda Cerullo, RD, Deloris Bennett, RN and Annellie Cristobal, RN. In collaboration with the Hemodialysis team and TGH Patient Education department. Printed by a generous donation from UHN Volunteer Resources department.