

Welcome to the Community Dialysis Units

Locations:

Richmond
Vancouver
East Vancouver
North Vancouver
Squamish
Sechelt
Powell River

The information in this document is intended solely for the person to whom it was given by the health care team.

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Richmond Community Dialysis Unit

Unit 120 – 4671 No. 3 Road
Richmond, BC V6X 2C3
Telephone: 604-207-2562
Fax: 604-207-2586

North Shore Community Dialysis Unit

144 W. 15th Street
North Vancouver, BC
V7M 1R5
Telephone: 604-984-5050
Fax: 604-985-5051

Squamish Community Dialysis Unit

Squamish General Hospital
38140 Behrner Drive,
Main Level, Squamish, BC V8B 0J3
Telephone: 604-892-8243
Fax: 604-892-8264

Sechelt Community Dialysis Unit

Sechelt Hospital
5544 Sunshine Coast Highway, Room 211
Sechelt, BC V0N 3A0
Telephone: 604-885-9183
Fax: 604-885-7564

Vancouver Community Dialysis Unit

Unit 100 – 520 W 6th Ave.
Vancouver, BC V5Z 1A1
Telephone: 604-660-1752
Fax: 604-775-1558

East Vancouver Community Dialysis Unit

2845 Grandview Highway
Vancouver, BC V5M 2E1
Telephone: 604-806-8765
Fax: 604-433-4519

Powell River Community Dialysis Unit

Powell River General Hospital
5000 Joyce Avenue,
Room 3004
Powell River, BC V8A 5R3
Telephone: 604-485-3287
Fax: 604-485-3288

*Please call your local unit
for hours of operation.*



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Welcome

The Community Dialysis Unit is part of the Renal Program at Providence Health Care in partnership with the Vancouver Coastal Health Authority. Our Community Dialysis Unit provides hemodialysis care, support, and treatment to people with kidney disease.

In this booklet, you will learn:

- About our unit
- What happens during your hemodialysis
- Who is part of your care team
- Tests and procedures you might have
- Answers to common questions

While having hemodialysis, you might hear or read some words or phrases that you are not familiar with. We included some of these words with their definition in the section called 'What the words mean' (on page 19). If you hear or read any words or phrases that you do not understand, please feel free to ask any of our staff.

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

Visitors

- We allow two visitors at a time, but we might ask visitors to leave during hemodialysis 'hook up' or 'take off' time.
- Your visitors could be asked to wait in the lounge during special procedures or in an emergency.
- Please do not bring children into the unit, as it could be upsetting to them. It could also disturb other patients who are resting.

Getting to the Community Dialysis Unit

By car:

You might feel tired after your first few treatments. Please plan to have someone drive you to and from the Community Dialysis Unit.

After your first few visits, check with your doctor to see whether you can drive yourself.

By HandyDART:

If you are eligible for the HandyDART, your social worker can help you arrange this service.

Parking at the Community Dialysis Unit

Parking at the Metro Vancouver units (Richmond, Vancouver, East Vancouver & North Shore):

These units have marked parking stalls for patients. If you park in any other stalls you could get a parking ticket or your car might be towed.

Parking at Coastal units (Squamish, Sechelt, Powell River):

There is limited free parking for patients in the hospital parking lot.

Safety

Patient safety is our first priority at Providence Health Care. We give you a selection of pamphlets on safety including:

- 'Patient Safety' – It's Everyone's Responsibility'
- 'It takes less than a minute' (Hand washing)
- 'How to use the Treatment Chair'

One specific safety issue for our patients is falls.

Preventing falls

During hemodialysis, patients can feel unsteady or light-headed.



To keep you safe:

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

During your first visit, we check to see if you are at risk for falling. Let us know if you have any difficulties that restrict your ability to move around. If you have trouble moving from sitting to standing, we might suggest you use an mobility aid to help you get up.

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.

Confidentiality

We keep your personal and health information confidential. We only share information with those team members who are involved in your care.

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 about your dialysis and treatment plan.

Education

We give all patients and their families an opportunity to get involved in their hemodialysis care. We have an education program which gives you 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.

Communication

If you do not speak or understand English well enough to talk 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.

What we expect from you

Respect

Please respect those around you.

- Respect other patients' privacy.
- Take responsibility for your behaviour and actions.
- Speak respectfully and in a low voice.
- Keep the volume of the TV or radio low or use headphones.
- Do not bring in any strong smelling foods to eat.
- When you wash, please use unscented products.
- Do not use any scented products such as perfume, cologne, or aftershave.

Confidentiality

While in the Community Dialysis unit, you might hear conversations that are private. We ask you to respect the privacy of each patient in 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.

Hemodialysis at the Community Dialysis Units

At Providence Health Care, we are responsible for delivering dialysis to a wide variety of patients. At times it is necessary to look at and change patients' schedules. This happens on an ongoing basis. We encourage patients to learn about dialysis and become as independent as they can be.

Talk to your nurse for more information on how you can become more independent with your dialysis.

We use a number of factors to decide which patients can receive hemodialysis in the Community Dialysis Unit:

- Your health status
- How stable you are on dialysis
- How well your blood access line functions
- How mobile you are
- If you are able to get in and out of a treatment chair on your own
- If you have transportation to and from a Community Dialysis Unit
- If there is space available in the Community Dialysis Unit

Patients might not be suitable for Community Dialysis Unit if they:

- Are hemodynamically unstable or have unstable or unresolved conditions
- Have a disease which other patients might catch, such as tuberculosis (TB) or chicken pox
- Cannot maintain Antibiotic Resistant Organism precaution standards
- Need regular blood transfusions
- Need help to get into and out of the treatment chair or to walk
- Need to be dialyzed in a bed
- Have mobility issues
- Have behavioural problems or need psychological support that may affect the care and safety of others.
- Have chronic incontinence that they need help to manage.
- Are receiving active medical treatment, such as acute care, rehabilitation, blood transfusions, pain management etc.
- Have open draining wounds, or
- Are receiving active treatment for acute medical conditions

Return to the home hospital

If there is a change in your medical condition, you may need to go back to your home hospital. If this happens, we will try to keep your spot in the Community Dialysis Unit.

If you are admitted to the hospital, you will dialyze in the hospital or the hospital will make other dialysis arrangement for you.

Emergency Ambulance or Taxi

In the event that you become unwell during dialysis, the Community Dialysis Unit nurse may need to call an ambulance or taxi to take you to the hospital. If this happens, you pay the cost for the ambulance or the taxi.

Keeping healthy

It is very important that you continue to see your family doctor for regular 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.

It is also important to maintain your dental health. See your dentist for regular check-ups. Get any dental problems treated as soon as possible. Make sure you tell your dentist that you are on hemodialysis.

Bring in any new medications and tell us about any changes to medications at your next hemodialysis treatment.

Let us know if you have been to Emergency or your doctor's office between hemodialysis sessions.

Your hemodialysis schedule

We give you a temporary schedule when you start hemodialysis. This schedule can change depending on your medical needs and other issues that can influence your care. Please check with your nurse.

| Regular Dialysis Times* | |
|-------------------------|--------------|
| Arrival Times | Finish Times |
| 7:00 am | 12:30 pm |
| 12:30 pm | 5:30 pm |
| 5:30 pm | 10:20 pm |

*Please check with your nurse for your dialysis schedule.

Please arrive on time for your scheduled appointment time. Not everyone starts as soon as they arrive. We bring you into the treatment area as soon as we can. Once we bring you in to the treatment area, it can take 30 minutes to start your treatment. Our nurses always attend to patients based on their medical and dialysis needs.

No matter what time you start, you must be off your machine by the finish time.

Your hemodialysis schedule, *continued*

Please plan for another 30 minutes at the end of hemodialysis to finish treatment and for us to make sure you are well enough to go home.

How long does hemodialysis take?

Your doctor decides how often and how long you dialyze based on:

- The results of your blood tests
- Your body size
- 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

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 the time can be shortened. It is important that you stay for your total hemodialysis time. If you don't, over time you will feel unwell and it can affect your overall health.

Did you know?

If hemodialysis treatment time is shortened by 30 minutes a week, this is equal to missing 6 ½ hemodialysis treatments a year. That is more than 2 weeks of hemodialysis in a year!

What if you 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. We prefer you to call us at least 4 hours before your scheduled time so we can use the time for another person's treatment and not waste your treatment supplies.

What if you want to change your hemodialysis schedule?

Please do your best to keep all your hemodialysis appointments.

If you need to change your schedule, please give as much notice as possible. Please speak to your nurse or the Clinical Nurse Leader at least one week ahead of time.

If an emergency arises, contact us as soon as possible. We will try to adjust your treatment times.

Please note: You might not be able to re-book missed treatments.

If you are admitted to any hospital, please ask your nurse at the hospital to call the Community Dialysis Unit where you receive your regular hemodialysis treatment. We will arrange for you to receive your next hemodialysis treatment where it will be best for your condition.

If you are planning to travel while on hemodialysis, please read the Travel Section. We do not arrange for your hemodialysis treatments while you are travelling.

Did you know?

You can ask your nurse or Unit Coordinator for a Community Dialysis Unit business card. Carry this card with you so you always have the address and contact information for your Community Dialysis Unit.

The Community Dialysis Unit

Access to the unit

- Some units may give you a security access card the first time they come to the unit.
- Please do not put the address of the Community Dialysis Unit on this card.
- If you lose the card, it is important to tell the nurse.
- You must return the card when you don't need it any more.
- Do not let anyone follow you into the building unless you know them.

Waiting area

There is a patient waiting area near the entrance of each Community Dialysis Unit. Please wait in this area until you are called for your treatment.



In the waiting area, you may find a bulletin board with information about kidney disease, support groups, and other topics of interest.

Patient kitchen

Some units will have a small kitchenette in the patient waiting area. This is a self-serve area shared by all patients. Please bring your own mug, plate and cutlery from home. Please remember to wash your own dishes and keep the kitchen clean for everyone.

Washrooms

We have washrooms in the unit for patients to use. Each patient washroom has a call bell in case you do not feel well or need help while in the washroom.



We are Smoke-free and Scent-free

There is no smoking anywhere inside and outside of the building. If you are a smoker and feel the need to smoke during the 4 hours, ask your family doctor for nicotine replacement therapy.



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



Food and drinks

We do not provide meals or snacks.

We suggest you eat a light meal at home before hemodialysis. Eating while having hemodialysis can make you feel unwell and lower your blood pressure.

If you have diabetes, remember to bring a snack, in case you need it during hemodialysis.

We have an ice machine in some of the Community Dialysis Units. Check with your nurse if it is okay for you to have ice or ice water during your treatment.

Linen Supply

We do not have blankets, pillows or any linen in Community Dialysis Units.

Please bring a bedsheet, blanket and pillow from home so you can be comfortable during dialysis. Choose a bedsheet and a blanket that can be washed easily, in the event that blood is spilled on it.

Lockers

There are lockers for patients in some of the Community Dialysis Units. Staff will give you a locker and you **bring your own lock**. You may keep your mug, headset, blanket and pillow in your locker. Please keep all personal things in the locker and keep it locked all the time. Community Dialysis Units do not assume responsibility for any lost or stolen items.

Television

Most of our hemodialysis stations have a television with basic cablevision. Sometimes our televisions are not available. This can be because there is an emergency with one of our patients, or because the television needs repair.

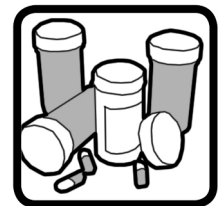
Your *first* hemodialysis treatment

Clothes

Wear loose comfortable clothing. *Loose clothing makes it easier for us to get to your fistula, graft, or neck line.* Wear clothes that can be washed easily, in case blood or other liquids are spilled on your clothes.

Medicines

The Community Dialysis Unit Pharmacist will make arrangement to check all your medicines with you, including herbal medicines, vitamins, and supplements.



Bring a list of the questions you might have about your medications.

Always carry an up-to-date list of your medications in your wallet or purse.

Arriving

Arrive 30 minutes before your first scheduled hemodialysis time.

When you arrive, wait in the waiting area until we come and get you.

We will show you:

- Where to weigh yourself
- Where the scale and the ice machine (where applicable) are
- Where to wash your hands and fistula or graft before starting hemodialysis
- How the treatment chair works
- How the call bell works

We will do some blood tests and take swabs for infection (Refer to the section on 'Tests, Procedures, and Appointments').

Weighing in

You weigh in before and after every hemodialysis. We show you how to take and record your weight measurement.



Your doctor decides on your 'goal' or 'dry' weight. Weighing before your treatment helps us figure out how much water needs to be removed from your body.

As you start to feel better, you might have a better appetite. We might need to increase your 'goal weight'. Watch your weight gain closely.

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.



Before every hemodialysis treatment

- Bring with you any medications you need to take during your treatment.
- Wear loose fitting clothing.
- Always plan to arrive on time for your scheduled hemodialysis time. Coming in earlier does not get you on hemodialysis faster. You might have to wait up to an hour before we can start your treatment.
- Every time you arrive, wait in the waiting area until one of us comes to get you. This keeps the treatment area clear. Too many people in the treatment area can be unsafe for everyone.
- When it is your turn, we bring you to your hemodialysis station.
- Tell us if you have seen any doctors or had to stay in the hospital since your last treatment.
- Tell us if you do not feel well before we connect you to the hemodialysis machine. The nurse will want to do a detailed check of your health.
- Weigh yourself. Write down your weight and give it to your nurse. Before and after your treatment, **remember to wear the same clothes and weigh on the same scale.**
- Collect what you need before you settle into your chair.

- ***Wash your hands with soap for at least 45 seconds.*** Remember the best way to stop the spread of infection is



to wash your hands.

- Wash your access site before your treatment. If your access site is in your leg, use the washroom to wash the area.
- We check your heart rate, temperature, blood pressure (both standing and sitting).
- Leave the blood pressure cuff on your arm so we can check your blood pressure during your treatment.
- Make sure you can always reach the patient call bell.
- Clean your hands with alcohol hand rub whenever you need to touch your access site.



The hemodialysis treatment

Before your treatment

It is normal to feel nervous when you first start hemodialysis.

Your nurse or technician explains how the hemodialysis machine works. Ask as many questions as you need to ask.

To begin hemodialysis, we insert two needles into your fistula or graft. We can numb the site with freezing if you find this painful. One needle takes the blood out of your body and



the other returns the cleaned blood to your body. If you have a neck line, we connect you to the machine using the two different ends of your neck line.

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.

To keep your fistula or graft working properly, we place the needles into different parts of the fistula or graft with each treatment.

During your treatment

During hemodialysis, only about 1 cup or 250 mL of blood is outside the body at any time. You do not feel the blood moving out and back into your body.

You could get a low blood pressure during hemodialysis. You might notice:

- You feel dizzy. You might even feel faint.
- You feel restless.
- You are sweating or feeling warmer than usual.
- You feel sick to your stomach (nauseated).
- You feel your heart racing.

Please do not cover your face, fistula or graft during your treatment. Tell us right away if you notice any of these signs of a low blood pressure.

To treat a low blood pressure:

- We lower the head of your chair to lay you down flat.

- We can raise the foot of the chair to move blood back towards your head and heart.



- We can give you some extra fluid through the hemodialysis machines.
- Some people get muscle cramps in their hands, feet, or the back of their legs.

If you start to feel a cramp, let us know right away so we can help you.

After your treatment

When your hemodialysis is finished, your nurse removes the needles.

To stop bleeding following your treatment, the needle sites must have pressure on them for at least 10 minutes. We teach you how to hold pressure over the needle sites.

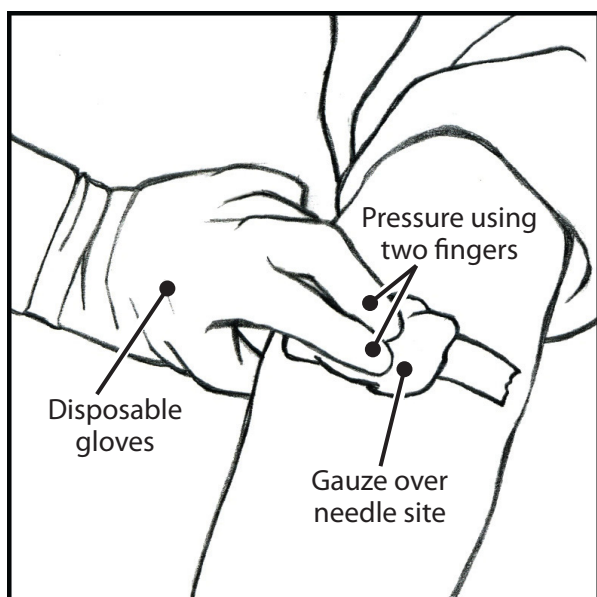
To safely stop bleeding and protect your fistula or graft:

- Always clean your hands.
- Put on a clean pair of disposable gloves.
- Hold a gauze pad over the needle site using two fingers.
- Put **firm pressure** directly over both the skin and access points of the needle sites.

- We might take out one needle at a time and ask you to hold each site, one at a time.
- Hold constant firm pressure for **at least 10 minutes**.

Once the bleeding has stopped:

- Place a clean gauze pad over the needle site and tape in place. *Never* wrap the tape around your arm (or leg). If you do, it can reduce the blood supply to your fistula or graft.
- Remove the disposable gloves.
- Wash your hands.



How to stop bleeding following your hemodialysis treatment

Before you leave

- We check your temperature, heart rate, and blood pressure. We check your heart rate and blood pressure while you are lying down and then when you are standing.

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 the hospital for more care.

- We make sure your fistula or graft is still working. We teach you how to do this.

- If you have a graft, we check for a strong pulse.
- If you have a fistula, we check for a buzzing sensation around the fistula. (We call this a 'thrill').

- Weigh yourself again.

Remember to wear the same clothing and use the same weight scale. We want to check that the right amount of water weight was removed.

- Always wash your hands with soap.

This helps stop the spread of any germs you might have contacted during the treatment.



Clear your table of all personal items.

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

If you start to bleed **before you leave** the Community Dialysis Unit:

- Stay calm
- Put firm pressure directly over the needle sites.
- Ask the nurse to look at the bleeding right away.

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

At home

Rest when you get home. You might feel tired after hemodialysis. Many people feel better once they have been on hemodialysis for a few weeks.

Your bandage

Remove your hemodialysis bandage 4 to 6 hours after you leave the Community Dialysis Unit. Be careful not to pull off the scab when you remove the bandage.

What to do if you start bleeding

Keep some gauze close by in case you start bleeding again.

If you start bleeding again:

- Put firm pressure over the needle site again for 10 minutes
- Do not peek under the gauze during

this time. The pressure must be constant over the 10 minutes.

- Check after 10 minutes to see if the bleeding has stopped.
- When the bleeding stops, tape a clean gauze pad over the area. Leave the new bandage on for 4 to 6 hours before you try to remove it.

If the bleeding does not stop:

- Continue to put firm pressure on the needle site.
- Go to the nearest Emergency Department right away.

Checking your access site

Check your fistula, graft, or neckline:

- Every morning
- Every evening when you get ready for bed.

You must feel your access site to make sure it is still working. We show you how to check your access site.

How to check your fistula:

- Feel for a buzzing sensation under the skin where the fistula is.

How to check your graft

- Feel for a strong pulse in the arm or leg where the graft is.

How to check your neck line:

- Check that all the clamps are closed and the caps are on tightly.
- If you have pain or swelling around the neck line, you might have an infection. Let your nurse know.

Call the Community Dialysis Unit right away if:

- You do not feel a buzzing sensation.
- You do not feel a strong pulse.
- You have any pain or swelling at the access site.

Tests, procedures, and appointments

Blood tests

We do blood tests during your first 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, what you eat, and what medications you are taking.

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

- **Do not** go to a community laboratory.
- Bring the request form when you come in for hemodialysis.
- Give us the form.
- We arrange for the tests to be taken while you are having hemodialysis. This avoids you being poked with another needle.
- We send a copy of the results of the tests to the doctor.

Other tests and procedures

- As part of your first treatment, we take swabs to check for bacteria if they have not been done in the hospital before your transfer.
- We repeat this test every year and every time you are admitted into the hospital for more than 24 hours or come back from travel where you have dialyzed in other facility.
- If you have not had an 'electrocardiogram', a chest X-ray, and an 'echocardiogram' done within the last year, we arrange this for you.

(Refer to section 'What the words mean' for an explanation of these tests.)

Appointments

We provide your hemodialysis care with a team approach involving social workers, pharmacists, dietitians, nurses and nephrologists. It is still **very important** to see your family doctor regularly for help with medical problems not related to receiving hemodialysis.

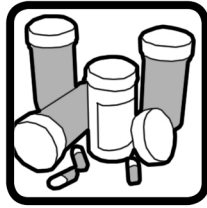
You will be scheduled for a Hemodialysis Clinic appointment at the Community Dialysis Unit every 6 months. We strongly encourage you to come to your clinic appointment with our care team. This will be a chance to address any medical or hemodialysis concerns. We will send an update on your medical status to your family doctor as well as other doctors involved in your care.

Please talk to your nurse about your Hemodialysis Clinic appointment.

About medications

Medication record

We keep a record of all your medications you are currently taking in your patient record.



‘All medications’ means:

- All medications ordered by your doctor(s)
- Medicines you can buy without a prescription such as cold medicines, laxatives, antacids, mild pain medicines
- Medicine samples
- Vitamins
- Herbal remedies
- Nicotine replacement therapy products
- Study or research drugs

Changes in your medications

If another doctor orders a medication for you, or you start using any medicine or herbal product, please bring them to the Community Dialysis Unit at your next visit.

We must check any new medications or changes in your medications. Medication can work differently in a person on hemodialysis.

Always tell your doctors or pharmacists that you are a hemodialysis patient so they can give you a dose that is right for you.

Medication costs

The British Columbia Provincial Renal Agency (BCPRA) pays for any prescription medications related to your kidney diseases.

Medications not related to your kidney disease are not paid for by the BCPRA. However, they might be covered by PharmaCare. You must arrange payment for these medications separately.

Your medication supplies

All of your kidney medications are ordered through a specific pharmacy. This pharmacy is one of the special pharmacies across the province that provides kidney patients with medications paid for by the BCPRA.

You can have your kidney medications delivered to you at home or to you at the Community Dialysis Unit.

When you have a 2-week supply of kidney medications left, call your specific pharmacy to order more using the phone number on the medication label.

Be prepared for an emergency.
Always have at least a 2-week supply of kidney medications.

Remember – *We do not order your kidney medications for you.*

For medications not related to your kidney disease, you can choose to order them from the same pharmacy as where you get your kidney medications or order them from your local pharmacy.

Hemodialysis and travelling

Some patients need to travel for business or want to travel for pleasure.



Plan ahead.

- Ask your doctor if you can travel.
- Contact the hemodialysis centre in the city you wish to visit.
- Find out if the centre accepts visitors for hemodialysis treatments.
- If they do, ask if they have space for you on the dates you need.

We need this time to:

- Collect a copy of your medical history, your hemodialysis orders, and your most recent blood test results.
- Organize any additional blood tests before you leave.
- Send all the information to the hemodialysis centre you are visiting.
- We charge a fee to any patient who does not give us at least 3 months notice to prepare and send all the documents.
- After you have confirmed your travel plans, tell the nurse in charge of the Community Dialysis Unit when you will be traveling and when you will return, We will adjust your hemodialysis schedule.
- Make sure that you have enough medication with you for your trip.

- You might need a letter from your doctor explaining why you need to carry certain medications.
- Before you leave, confirm with the hemodialysis centre(s) where you are going to make sure you are booked in for your treatment(s) when you arrive.

If you are travelling within BC

There are hemodialysis units across the province. For information about all the locations, go to the BC Renal Agency web site and look for 'Kidney Services by Region' at www.bcrenalagency.ca

If you are travelling inside Canada

The cost of your hemodialysis treatment is covered by the Provincial Medical Services Plan.

If you are travelling outside of Canada

The Provincial Medical Services Plan may pay some of your hemodialysis costs while you are out of Canada. Ask your social worker for more information.

You will probably have to pay for each treatment **before** you leave Canada. Ask each hemodialysis centre about the cost, how to pay, and when you are to pay.

Your Hemodialysis Care Team

Nurses

Our nurses take care of you during your treatment.

This includes assessing you, reviewing blood test results, connecting you to the hemodialysis machine, monitoring the machine for any alarms, taking you off the machine when your hemodialysis is complete, and checking that you are well enough to go home. Your nurse works with you to make a plan for your care.

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.

Clinical Nurse Leader

The clinical nurse leader (sometimes called the CNL) is in charge of running the Community Dialysis Unit. Speak to the clinical nurse leader when:

- You have questions or concerns your nurse or other team members cannot answer.
- You would like to make changes to your treatment schedule.

Nurse Practitioner

This is a nurse with advanced education. The nurse practitioner diagnoses and treats some medical problems, and orders medications. Our nurse practitioner manages your medical care and works with you and your doctors to make a plan of care that is best for you.



Vascular Access Nurse

The vascular access nurse talks with you about the options for vascular access such as fistula or graft, and helps you decide which option is the best one for you.

This nurse closely monitors the health of your access site and helps other team members with any problems with your vascular access.

If we have any concerns about your access site, our vascular access nurse can arrange for special x-rays and visits to the clinic once you leave the Community Dialysis Unit.

Nephrologist

This is a doctor who has advanced education related to diseases of the kidney.

A team of nephrologists share the responsibility for our patients' care. These doctors take turns looking after the patients on the unit. You might not see your nephrologists when you first start hemodialysis in the Community Dialysis Unit.

The nephrologist only looks after the medical care related to kidney disease. For medical problems not related to your kidney disease, please see your family doctor. If you don't have one, we can give you a list of doctors taking new patients.

Social Worker

Your social worker can help you and your family plan around some of the difficulties your illness might cause in your life. The social worker also helps you locate and access community resources and help with such things as transportation, home support, financial aid, employment or retraining, housing, etc.

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

Pharmacist

Our pharmacist regularly reviews the medications you are taking to make sure the medications continue to be the right ones for you. If you have any questions or concerns about your medications, ask to speak to the pharmacist.

Dietitian

Your dietitian helps you stay as healthy as possible. The dietitian works closely with you and your family to provide ongoing nutrition information, based on your bloodwork, lifestyle and the foods you like the most.

If you have nutrition questions or concerns, ask to speak with your dietitian.

Pastoral Care Worker

While having hemodialysis can be a challenge to your physical health, it can also be a challenge to your emotional health, spiritual health, and sense of well-being. A pastoral care worker is available for you and your family's

emotional and spiritual needs. Services range from connecting you with religious resources to giving advice on advance care planning (how to make your future health care wishes known).

Ask anyone on your care team for pastoral care services. Or you can call 604-682-2344 local 68163 (Monday to Friday between 8:00 a.m. to 4:00 p.m.).

Renal Technician

Our renal technicians set up, take apart, and clean the hemodialysis machines. Together with the nurses, the technician:

- Listens for and attends to any machine alarms.
- Helps provide effective hemodialysis.
- Tries to make you feel comfortable and safe during your treatment.

Biomedical Engineering Technologist

You might meet one of our technologists during your treatment. The technologist looks after and repairs our hemodialysis machines.

Unit Coordinator

Our unit coordinator keeps your chart organized and processes any doctors' requests for test, medicines, or procedures. When your nephrologist wants you to see other health professionals or go for tests, the unit coordinator makes the appointments and places a note in your chart for your nurse to give you.

What the words mean

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

Darbepoetin (Aranesp) and Erythropoietin (Eprex) –

Medications 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.

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 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).

‘Hook-up’ time – The time your nurse assesses you and connects you to the hemodialysis machine.

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 4 to 6 months.

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

MRSA (Methicillin Resistant Staphylococcus Aureus) – An infection caused by the bacteria Staphylococcus Aureus and resistant to the antibiotic Methicillin. These bacteria normally live on human skin and in the nose. An infection from these resistant bacteria can be difficult to treat.

‘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.

Hemodialysis Checklist



First visit only

- 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.
- Arrive 30 minutes before your first hemodialysis start time.
- _____
- _____

Preparing for every visit

- Wear shoes with slip-resistant soles.
- Wear loose fitting clothes that are easy to wash.
- Bring any medications you need to take during your treatment.
- Bring in any new medications for us to check.
- Bring a book to read.
- Bring a list of all questions you might have.
- _____
- _____

Every visit

- Arrive on time for your scheduled hemodialysis start time
- Weigh yourself before your treatment.
- Write down your weight.
- Tell us about any changes to your medications.
- Tell us about any changes in your health of if you have stayed overnight in the hospital for any reason.
- Wash your hands with soap.
- Wash your access site with soap.
- Check to make sure your call bell is within reach.
- Weigh yourself after your treatment.
- Write down your weight.
- Clear your table before you leave.
- Make sure you have some packets of gauze with you.
- Remove your bandage 4 to 6 hours after you leave the hospital.
- _____
- _____

Regular checks

- Check your fistula, graft, or neck line twice a day.
- See your family doctor for regular check-ups.
- See your dentist for regular check-ups.
- _____
- _____

The information in this document is intended solely for the person to whom it was given by the health care team.