Renal (Dialysis) Patient Handbook

Main Unit: Victoria General Hospital site
6th Floor Dickson Centre
 Telephone numbers:
  902-473-7544
  902-473-5518
 www.cdha.nshealth.ca/renal-program
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Introduction

A message from your health care team

Welcome to dialysis!
We understand that this is a new and challenging experience for you. Your health care team is made up of many different care providers. We are all here to help you adjust to living with dialysis and to help you with your experience. Your input is very important to us as we work together with you. We want to be sure that your treatment is designed with your individual health care needs and lifestyle in mind.

This handbook will help to answer some of your questions. Please feel free to ask if you have any other concerns.

As your dialysis begins, it is important for you to understand your treatments, medications, and blood test results. Knowing these things can help you feel more comfortable, cared for, and safe. You may feel overwhelmed, but remember, you are not alone! Your health care team is here to work with you.
About the renal (kidney dialysis) program

Patient rights and responsibilities
Understanding your rights and responsibilities is important. Please read the pamphlet Your Rights and Responsibilities (www.nshealth.ca/sites/nshealth.ca/files/patientinformation/0466.pdf). The pamphlet explains how you may talk to a patient representative if you need one, or you can visit the Nova Scotia Health Authority (NSHA) Patient Feedback page (http://www.nshealth.ca/contact-us/patient-feedbackcommentaires-des-patients).

Ethics
Ethics NSHA offers support to all patients, families, volunteers, staff and health care providers at NSHA when they need help making tough choices. To request an ethical consultation or for more information on ethics support, visit www.nshealth.ca/content/ethics-nsha.

The renal (dialysis) program
The renal program (also called nephrology program) offers different ways to get dialysis:
• Hemodialysis in the hospital
• Community hemodialysis in a “satellite unit” closer to home
• Peritoneal dialysis (at home)
• Home hemodialysis (at home if you and your family have been trained to do your hemodialysis)

Hemodialysis for NSHA, Halifax, Eastern Shore and West Hants

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<tr>
<th>Location</th>
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| Halifax: | Dickson Building, Victoria General (VG) site, 1276 South Park Street  
Halifax Infirmary (HI) site, 1st Floor, 1796 Summer Street |
| Dartmouth: | Dartmouth General Hospital (DGH) site, 325 Pleasant Street |

For this type of dialysis, you must come to the hospital hemodialysis unit 3 to 5 times per week. How often will depend on what you and your health care team decide is right for you.

Each treatment lasts about 4 to 5 hours. Treatment helps to remove some of the fluid and waste products from your blood.
Hemodialysis in your community

If you are medically stable on hemodialysis, you may be able to have hemodialysis in or near your home community at a “satellite” dialysis unit. There are a number of smaller dialysis units in Nova Scotia:

- Antigonish: St. Martha’s Hospital
- Berwick: Western Kings Memorial Hospital
- Liverpool: Queens General Hospital
- Pictou: Sutherland Harris Memorial Hospital
- Port Hawkesbury: Strait Richmond Hospital
- Springhill: All Saints Community Hospital
- Truro: Colchester Regional Hospital

All medical and technical matters and some nursing support are looked after by the Home Dialysis Unit.

Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) are hired from your local community and trained in the Home Dialysis Unit. The RNs and LPNs work with the staff in the Home Dialysis Unit to provide you with safe hemodialysis treatment. They are trained to manage the common complications of hemodialysis.

There are no doctors routinely at the satellite clinics. A doctor at your local hospital will not be looking after you while you are on hemodialysis. The doctor looking after the Home Dialysis Unit will give any needed medical advice (related to your kidney disease and hemodialysis treatments) over the phone or during your clinic visit to the Home Dialysis Unit.

There are no beds available in the satellite dialysis clinics.

If your medical condition becomes unstable while in the satellite clinic, you may need to transfer back into the in-centre unit for a period of time.

Any questions or concerns that happen during dialysis are handled by the satellite clinic. The nurses and doctors in the Home Dialysis Unit are always available to talk with you about any questions or concerns. Their number is 1-800-268-8646 or 902-473-2154 Monday to Friday 7:30 a.m.-3:30 p.m.
Home therapies — Having dialysis in your own home

Peritoneal dialysis (PD)
This type of dialysis involves putting dialysis fluid into your own abdomen (stomach area). This fluid helps to take away waste products and extra fluid from your body. You and/or a support person can be trained to do this at home. VON may provide some support if the dialysis team decides it is necessary for you. You will have a check-up at the Home Dialysis Unit Clinic about 1 month after you have finished your PD training. This is usually followed by regular appointments about every 3 months. A registered nurse is on call 24 hours a day, 7 days a week to answer any questions.

Peritoneal dialysis can happen 3 different ways:
1. **Continuous Ambulatory Peritoneal Dialysis (CAPD):** You do about 4 or 5 exchanges a day by hand.

2. **Automated Peritoneal Dialysis (APD):** A machine does most of the exchanges overnight.

3. **Combined CAPD and APD:** This involves overnight dialysis (cycler) with 1 or 2 manual exchanges during the day.

Home hemodialysis
You may be able to have hemodialysis at home. Our team will train you and your helper if needed. About 1 month after training ends, we will ask you to have a check-up at the Home Dialysis Unit Clinic. Check-ups are required every 3 months. We will also provide home visits. A nurse and/or biomedical technician will visit your home to make sure you are following proper procedures and that your equipment is working properly.

Your health care team will help you figure out the best dialysis treatment for you.
Your first day of hemodialysis

Where is the Hemodialysis Unit?
In Halifax, the Hemodialysis Unit is on the 6th floor of the Dickson Centre at the Victoria General (VG) site of the Queen Elizabeth II Health Sciences Centre on University Avenue. When you take the elevator to the 6th floor of the Dickson Centre, the waiting room is straight ahead (see map to the right). Please wait there for your name to be called.

We also have a Hemodialysis Unit at the Halifax Infirmary (HI) site on Summer Street. Once you enter the HI site from the Summer Street entrance, the dialysis waiting room is immediately to your left before you reach the central staircase. Please wait there until your name is called.

In Dartmouth, the Hemodialysis Unit is on the lower level (Level 1) of the Dartmouth General Hospital (DGH), just past the cafeteria, at the end of the hall.

Where can I park at the Victoria General (VG)?
Enter the parking lot from South Park Street or University Avenue. Please allow time to find a parking spot as it can be quite busy.

Where can I park at the Halifax Infirmary (HI)?
If entering the parking lot from Summer Street, there may be spots in front of the entrance. If entering the parking lot from Robie Street, there are spots available in the parkade. Please allow time to find a spot as it can be quite busy.

Parking is provided by the Foundation for hemodialysis patients at the VG, HI, and DGH sites if a dialysis parking pass is used. Parking is not free for other medical appointments. Please ask the unit clerk or nurse in the dialysis unit for parking passes on your first day so you won’t have to pay.
Parking at all of the satellite dialysis units is free, except for Port Hawkesbury and Antigonish, which have a one-time $10 parking pass fee that is refunded upon return of the parking pass.

**Note: For your first 3 to 6 treatments someone else should do the driving.** You may feel tired or lightheaded after your treatment or your blood pressure may be low. You may be at a higher risk of having a car accident. Some people are able to drive themselves once they get used to dialysis.

**Where can I find a telephone?**
There are free taxi phones, or a phone is available outside of the waiting room at most of the dialysis sites.

**What should I bring to my treatments?**
Hemodialysis treatments are about 4 to 5 hours long so **you should eat before you come or plan to eat once your dialysis has been completed.** Eating while on the dialysis machine should be avoided if possible as this can cause problems with your blood pressure. **We do encourage anyone with diabetes to bring a snack with them in case they experience low blood sugar while they are at dialysis.** Allowing extra time before and after a treatment can mean being at the unit for up to 6 hours. A book, magazine, laptop, crossword puzzle, or knitting can help pass the time. While on dialysis, some people nap, watch one of the TVs available in the unit, or use the wireless Internet (Wi-Fi) that is available for dialysis patients at the VG, HI, and DGH sites and in the Liverpool, Antigonish, and Port Hawkesbury satellite dialysis units.

Dressing in loose, warm, washable clothing is a good idea. It makes it easier to get to your “access site” (catheter or fistula). Front-opening clothing works well with catheters. A short-sleeved shirt will make it easy to get to a fistula or graft. Hospital gowns are available if you prefer to wear one. A warm blanket or comforter from home can help keep you warm in the dialysis unit where the air can be cool, even during the summer. Warmed flannelette sheets are usually available, but there may not be enough for everyone. Some people find that a hat holds body heat and sunglasses cut glare. You may bring whatever helps you feel comfortable and pass the time.
Dialysis routines

Please stay in the waiting room until your chair (or bed) in the Hemodialysis Unit is ready for you. Your name will be called. We are sorry that there will be times when your dialysis start time will be delayed due to unexpected problems. These may include machines breaking down, transportation delays, patient complications, and other issues. We ask for your patience and understanding when this happens.

At the VG, HI, and DGH sites, the dialysis area is a secured location. The doors are locked. When a patient or family member is entering the main unit hallway, a button on the wall must be pressed in order to get clearance to enter the unit. When a staff member tells you to come in, press the automatic door button. During your first visit, a nurse may meet you at the door.

Before dialysis, we will help you to “weigh in” on scales located near the dialysis areas. Your blood pressure will be checked both standing and sitting (or lying down). Checking your blood pressure and weight helps to find out the amount of fluid that needs to be taken out or added during dialysis. Your doctor will establish an ideal weight with you. The medical team calls your ideal weight your “dry weight” or “target weight”. You will be expected to keep this dry/target weight through diet and fluid intake, such as drinking less water or other fluids, and cutting back on salt intake.

While on dialysis, you will be checked as often as necessary to assess your health problem and how you are feeling. Dialysis machines have built-in monitors and beepers that help with this process.

If you feel any unusual symptoms during or after your treatment, such as lightheadedness, headache, dizziness, nausea, blurred vision, loss of hearing, or leg cramps, please tell your nurses right away so they can treat you.

After dialysis, your weight is checked again to show how much fluid was taken away during your treatment. Keeping a consistent healthy weight for dialysis is very important for your treatment.
How can I speak with a member of the dialysis team?
If you would like to speak to a specific member of your dialysis health care team, please tell the dialysis unit staff. If the issue is urgent, please ask the nurse caring for you to call the team member while you are on dialysis. If you would like to speak privately with one of the health care team members, ask the charge nurse for an appointment.

What is the dialysis schedule?
There are specific days and times for dialysis. Each session lasts about 4 to 5 hours. Treatments are usually 3 times a week on:

› Mondays, Wednesdays, and Fridays OR
› Tuesdays, Thursdays, and Saturdays

Morning, afternoon, and evening (in-centre Halifax/Dartmouth only) dialysis times are available.

Please note: this schedule may change based on the needs of the patients receiving hemodialysis at the time your care is planned.

We will tell you if we need to change your schedule. Schedule changes can happen at any time. The schedule may change for the time of day of your treatment, or the day of the week.

When you first start hemodialysis, you may be on a day shift for 3 treatments. This allows the team to meet with you and talk about your needs. You will then get a regular time on the dialysis schedule. Your preferred times or treatment days may not be available right away. Some days and times are more popular than others. When making schedule changes, we consider:

› Your level of wellness
› Transportation availability
› Work and study schedules
› The length of time you have been waiting for a schedule change

If you wish to change your schedule, please ask the charge nurse for a “Shift Change Request” form as soon as possible. If you wish to change your dialysis time for a special reason, please let the charge nurse know as soon as you can. We will try to help you.

If you know you will be arriving late, please call the dialysis unit you are receiving treatment in at 902-_____________. Please remember that when
you arrive late, others who use the same chair or bed later in the day will be late too. If you cannot come at all on a dialysis day, please call the unit. Sometimes stormy weather is the problem. Poor road conditions in the morning can cause delays all day or even cause some people to change their day.

Please tell us if you are having a hard time physically or emotionally. Advanced kidney disease, treatments, and possible complications can be overwhelming but we are here to help you and your family.

You will not have the same nurse for each treatment. You may not have the same chair for each treatment.

Doctors and/or nurse practitioners will do rounds once a week while you are on hemodialysis. During those rounds they will address all kidney/dialysis-related concerns, including prescription refills. During the rest of the week, they will focus on dialysis treatment and bloodwork reviews and will only address urgent patient care issues.

**How does the schedule change on holidays?**
Christmas Day and New Year’s Day are the only holidays that the schedule will change.

Around these holidays, the dialysis schedule will change for a short time to include Sundays. This way, no one will have dialysis on Christmas Day or New Year’s Day.

**How do I handle problems after dialysis?**
If you notice a dialysis-related problem while at home (such as problems with your fistula or central catheter), please let the dialysis unit know by calling the unit you attend for treatment.

Your dialysis unit’s phone number is: 902-___________.

The dialysis units are closed on Sundays. For all non-dialysis-related problems, please see your family doctor. It is extremely important that all patients have a primary care provider (e.g. family doctor or nurse practitioner) to help look after all their non-dialysis-related health concerns. Regular appointments with your health care provider are important because he or she is still responsible for helping you with your health issues and planning your medical care.
Satellite unit hemodialysis patients should **NOT** contact satellite staff nurses at home. If you have concerns about your treatment, please speak with the nurse when you are in for your dialysis treatment or contact the Home Dialysis Unit directly.

If your medical condition becomes unstable, you may need to transfer back to the in-centre unit for a period of time.

**If you have a medical emergency, call 911 or go to your local hospital Emergency Department.** For your safety, make sure the emergency room staff know the following:

› That you are a hemodialysis patient
› If you are on the transplant list
› What medications you are on

**What medications do I need to bring with me?**

Bring all medications with you on your first visit and whenever you are asked to bring them. This includes any medications given to you by a kidney doctor or by any other health care providers. It also includes any medications you buy over the counter (Gravol®, Tylenol®, TUMS®, etc.). Please follow the directions for taking your medication. Let your nurse know if you can’t take your medication for reasons such as:

› Nausea and vomiting
› You are not sure about when or why to take them
› You can’t pay for them

During the first few weeks of dialysis, your medications will be reviewed and changes may be made by the kidney doctor or nurse practitioner. The reasons for these changes will be explained to you. If an outside doctor or other health care provider changes your medication, please tell the dialysis unit staff so your medical records can be updated.
Who is on the dialysis team?

You
You are part of the team and we want you to be as independent as you can. We ask that you be involved in your own care. There are many things you can learn to do to help with your treatment. You play an important part in keeping yourself safe. When you are at our clinics, please remember to wash your hands often. Having clean hands is one of the best ways to keep you safe.

Please tell us if you have been admitted to the hospital or Emergency Department, or if you are feeling unwell. Sharing this information helps us to give you the safest care possible.

We review your medications on a regular basis. When we do the reviews, it is important that you bring in all medications you take (including patches, vitamins, inhalers, creams, herbal, and over-the-counter medications).

If you don’t think something is right, please tell us.

The Physician Leader, Health Services Manager, and/or the Clinical Operations Leader can help with issues that are not resolved within the Dialysis Unit.

Registered nurses (RNs)
Dialysis RNs are specially trained to give professional, personalized care. They will look after your well-being and plan your care with you during dialysis. They will answer any questions or concerns you may have. Your nurse can teach you about dialysis and related treatments. They will work with other members of the health care team to solve any problems that come up during your dialysis.

Licensed Practical Nurses (LPNs)
LPNs do some of the same tasks as RNs during your treatment. If there is a change in the way you feel during treatment, they will work with the RN to decide how best to manage your care.

Charge nurse
There is always an RN in charge. The charge nurse is available Monday to Saturday. He or she makes sure that the days run smoothly in the dialysis unit. If you have any concerns about your dialysis care or scheduling, please let the charge nurse know and he or she will try to help you.
Nurse practitioners (NPs)
NPs are RNs with advanced nursing and medical knowledge, decision-making skills, and clinical skills. They can do some of the same tasks as doctors, such as diagnosing illness, prescribing medications, and ordering and explaining tests to you. They teach and support families and patients with chronic kidney disease. They also monitor patients’ health and well-being, and work with other health care team members, patients, and families to promote improved health and decision-making and prevent illness.

Nephrologists (kidney doctors)
Nephrologists can see patients on dialysis as needed. Nephrologists can also handle any dialysis problems. While you may see many different nephrologists over time, every person on dialysis has one primary nephrologist. He or she will work with you to develop your goals of care and manage your overall care, including following regular bloodwork. If you are unsure who your primary nephrologist is, please ask. Please speak to the nephrologist about dialysis-related issues.

A letter about your dialysis care is sent to your family doctor once a year or as needed.

It is very important that you continue to see your family doctor regularly and for any problems not related to your kidney disease. If you are not sure about which doctor to talk to, call the dialysis unit and ask the charge nurse. Your family doctor is welcome to call and speak to the nephrology staff about your health concerns.

Please let the nurses know if your family doctor has started you on any new medication or asked you to see a specialist. If you see a specialist or have a test done, ask that a copy of the report be sent to both your family doctor and the dialysis unit. This is very important to keep your medical records up to date.

You should talk with the doctor, NP, or nurse before taking any over-the-counter medications (laxatives, antacids, pain pills, herbal remedies, etc.). These medications may be harmful to people on dialysis. Help us keep your record up to date by telling your nurse of any changes in your medications, including those you are no longer taking. Make sure your community health care providers, including your pharmacist, know that you are on dialysis.
Pharmacist

Your renal pharmacist is here to help you better understand your medications. Pharmacists work Monday to Friday in the dialysis units and can be reached by the nursing staff. If you would like to talk to a renal pharmacist, let your nurse know.

Your renal pharmacist can:
1. Give education on medication changes.
2. Gather allergy histories.
3. Review vaccine history, making vaccination recommendations.
4. Provide medication review and check drug dosing in chronic kidney disease.
5. Monitor medications, especially for anemia and bone mineral management, (e.g. iron therapy, Sensipar®) or drugs that require adjustment with levels (e.g. warfarin, antibiotics).
6. Answer drug information questions.

Social workers

Social workers are here to help you and your family with non-medical issues related to your condition. They can help you understand and learn to adapt to the lifestyle changes that may go with your condition. Your social worker can:
1. Offer counselling and emotional support for patients and families.
2. Offer education and information about support groups.
3. Help with social and financial concerns.
4. Advocate with employers and agencies (e.g. Department of Community Services, Continuing Care, Kidney Foundation).
5. Help with referrals to community resources (e.g. housing, home care).
6. Help you to arrange to have your out-of-province dialysis expenses approved for reimbursement.
7. Help with information about transportation options.

Social workers are here to help Monday to Friday. Contact names and phone numbers are posted in the waiting room.
**Dietitian**

Your diet is an important part of your treatment. When you come to dialysis, your dietitian will talk about a diet that will work for you. By following the dialysis diet given to you by the dietitian, you will be able to help keep your phosphorus and potassium levels in check. When your levels are regulated, you are on your way to feeling better.

You will learn about:

- Calories
- Fluid
- Phosphorus and calcium
- Potassium
- Protein
- Sodium (salt)

Your dietitian is here to help Monday to Friday. They will see you during your treatment on a regular basis after routine bloodwork is completed or if you ask to speak to them during your dialysis treatment. For those patients receiving dialysis at a satellite site, the dietitian may call you to talk about your diet over the phone and they will see you during your clinic visits in the Halifax area.

**Access nurse**

The access nurse can suggest ways to help with your fistula and the lines used to enter your bloodstream during hemodialysis.

**Dialysis technologists**

Dialysis technologists look after the operation and safety of all our equipment. They make sure the water treatment system for hemodialysis is safe.

**Patient representatives**

More details about patient and family representatives can be found in the pamphlet on Patient Rights and Responsibilities and on the following website: http://www.nshealth.ca/contact-us/patient-feedbackcommentaires-des-patients.

**Clerical staff**

The unit clerks help make appointments for you. They make and receive many phone calls and help the rest of the staff and patients in any way they can. The clerks can answer your questions and direct you to the right team member.
A note from the Patient Committee

A group of patients and their family members have formed a Kidney Patient Advocacy Committee (KPAC). We invite you and your family or caregivers to join us. We hope that at least one person from every dialysis shift will join the Committee. Much of our business is done by email so people on all shifts can take part.

We spend many hours a week in the dialysis units and many concerns, questions, and frustrations come up along the way. We have a caring dialysis staff who work with us to improve our units. The committee meets with staff representatives on the second Tuesday of each month.

If you don’t wish to join the active committee, we will present any concerns or ideas that you have on your behalf. Just fill out one of the blank cards on the bulletin board, or talk to or email a committee member. Committee member names are on the bulletin board in the waiting room.

The date, time, and location of meetings will be posted in the waiting room. Information from all meetings will be posted for you to read. Please let us know your thoughts so that we can be representative of the whole unit.

Travel while on dialysis

Hemodialysis patients who want to travel must plan in advance to be sure there will be room in the dialysis unit where they are going. Travel within Canada often needs at least 6 weeks’ notice, while outside the country may take longer. Your social worker can help you find a dialysis unit, if needed. There are units around the world and they are even available on some cruises.

The hemodialysis patient or family member must call ahead to arrange dates for dialysis. The receiving dialysis unit will send transfer forms here for us to complete. Medical tests will be needed, so please allow plenty of time for these to be done and for the results to be sent. Most places will not confirm your visit until all information is received.

If approved ahead of time, the Nova Scotia Department of Health and Wellness will reimburse you up to a maximum of the current “inter-provincial rate” for each dialysis treatment (in a privately-run clinic). A request is submitted to the Department of Health and Wellness by your social worker to get pre-approval.
You must save your receipts to submit upon your return. Private dialysis clinics generally ask for payment before your treatments can be done.

Additional doctor and lab fees may also be charged. Be sure to get additional costs charged at the dialysis centre you visit “in writing”. We encourage people to take vacations and we will do our best to help you organize an enjoyable holiday away from home. Please tell the nurses and social worker as early as possible.

PD patients who want to travel must notify the Home Dialysis Unit and Baxter. Supplies will be sent upon approval from Baxter, to the location where you are vacationing. For travel to the United States, a minimum of 8 weeks’ notice before you plan to travel is required. To travel outside of Canada or the United States, 3 months’ notice is required. You must take your own dressing supplies and peritonitis kit. The Home Dialysis Unit staff can tell you about the forms needed to travel with supplies.

Other information

Kidney Foundation of Canada
Your provincial branch of the Kidney Foundation of Canada (KFOC) is here to help patients and families in many ways, including:

- Visits with peer support volunteers.
- Kidney disease research.
- Short-term financial assistance. The dialysis social workers can help you arrange emergency funding for kidney-related expenses if no other funding is available to you.
- Other resources and educational materials.
- Peer support is available at 1-866-390-7337 (ask for the Kidney Connect program). Trained volunteer kidney patients offer visits or telephone support.

If you would like to be a Kidney Foundation volunteer, please call your provincial office:

› Nova Scotia: 902-429-9298
› New Brunswick: 506-453-0533
› Prince Edward Island: 902-892-9009
Visitors
Visitors are welcome. We ask that visitors stay in the waiting area while patients are being put on or taken off the machines. You may notice that some areas are “isolation rooms” and need special precautions.

Taking your medications
It is important that you take all medications as prescribed. If you do not have a drug plan, you may need information about options to get your medications. Your social worker can help you apply for the Nova Scotia Family Pharmacare Program and may make referrals to the Metropolitan (non-profit) Dispensary program at the IWK, if appropriate. Some medications that are covered by the Nova Scotia Family Pharmacare Program need special authorization or exception status approval. If your pharmacist tells you that your medication is not covered, ask if it needs special authorization. One common medication that requires special authorization is Renagel®. Your social worker and pharmacist can also tell you about some of the patient assistance programs available for medications such as Renagel® and Sensipar®. If you have any problems getting the medications you need, please tell your nurse and/or social worker.

Point Pleasant Lodge (PPL)
Some dialysis patients who live more than 50 km from Halifax may need to stay at Point Pleasant Lodge (PPL) on a short term basis. PPL is also sometimes used by patients and families during their Home Therapy training. The dialysis clerical staff can book a room for you if needed.
› In-centre clerk: 902-473-7544
› Home Dialysis clerk: 902-473-2154

Transportation and housing
For information about what is available, please call the social workers.

Financial concerns
Dialysis travel, medications, special diets, taking time off work, or dealing with less income can be stressful for many dialysis patients. If you need to talk about your options, please speak to the social workers. All dialysis patients are eligible for the Disability Tax Credit Certificate. You must apply and once approved, you are able to claim this significant deduction to help lower the amount of income tax you pay. The category “Life-Sustaining Treatment” includes dialysis. Sometimes, this credit may be used by a supporting person if it is not needed.
by the dialysis patient. The Kidney Foundation’s annual version of “Tax Tips for Kidney Patients” gives other useful ideas on claiming medical and travel expenses (www.kidney.ca/taxtips).

**Personal directives and future care planning**

Everyone is encouraged to think about what the future may hold. Preparing a will and arranging a Personal Directive and an Enduring Power of Attorney can give you and your family peace of mind at any stage in your life. You will be asked by members of your dialysis team what you want done if your heart stops and/or if you stop breathing while you are in the dialysis unit. NSHA has a Personal Directives pamphlet you may find helpful. You can also ask for more information from members of your dialysis team. Please visit [http://novascotia.ca/just/pda](http://novascotia.ca/just/pda) for more information.

**Stopping dialysis — What if I change my mind about dialysis?**

If you decide that you no longer want to continue with dialysis, we will help you to explore this idea and prepare for the changes that will result from stopping treatments.

**Dialysis unit evacuation**

In an emergency, the dialysis unit may be evacuated. This could mean that your dialysis treatment is stopped so that we can move you outside or to another area of the hospital until the emergency has ended. The nursing staff will continue to monitor and take care of you.

**Conclusion**

We hope this pamphlet has answered some of your questions, but we know you may have other questions. Feel free to tell us about your dialysis issues and what you may need so that we can better help you. **You are the reason we are here and we would like to work with you.**

What are your questions?

Please ask. We are here to help you.
## Important contact information

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<thead>
<tr>
<th>Contact</th>
<th>Phone # / contact details</th>
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<tbody>
<tr>
<td>Main Dialysis Unit Reception</td>
<td>902-473-7544</td>
</tr>
<tr>
<td>Your dialysis unit</td>
<td>902-</td>
</tr>
<tr>
<td>Dietitian</td>
<td></td>
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<td>Social Worker</td>
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<td>Pharmacist</td>
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<td>Others</td>
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## Questions for my health care team:

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The information is not intended to be and does not constitute health care or medical advice.
If you have any questions, please ask your health care provider.

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The information in this pamphlet is to be updated every 3 years or as needed.