Welcome to the Hemodialysis Unit

Unit Hours:
Monday to Friday: 7:00 am - 11:00 pm
Saturday & Sunday: 7:00 am - 7:00 pm

Hemodialysis Unit
Vancouver General Hospital
Jim Pattison Pavilion - Level 1
899 West 12th Avenue
Vancouver BC V5Z 1M9
Tel: 604-875-4181
The Vancouver General Hospital (VGH) Hemodialysis Unit provides dialysis care and treatment to people with kidney disease.

This pamphlet provides information about the Hemodialysis Unit and helps prepare you for your treatments. Your hemodialysis team is ready to support you during this change in care.

Map
Please refer to the map on the back of the booklet for the location of the following:

- Hemodialysis Unit
- Independent Dialysis Centre
- Vascular Access Clinic

Note: The hospital is fragrance free. Do not wear perfume, cologne or aftershave while you are in the Hemodialysis Unit or in other areas of the hospital.

Where will I receive my hemodialysis at VGH?
We currently have two areas where patients receive hemodialysis (see attached map on back of booklet):

- The VGH Hemodialysis Unit
- The VGH Independent Dialysis Centre

Go to the VGH Hemodialysis Unit for your first hemodialysis treatment. You will be advised which area to go to for your following treatments.

How will I get to the Hemodialysis Unit?

- During the first 3 weeks of hemodialysis ask someone to drive you or take a Taxi. Please do not drive yourself. Ask the Nephrologist (Kidney Doctor) to let you know when it is safe for you to start driving.
- For more information about getting to hemodialysis, please read the ‘Transportation and Parking Eligibility Information’ sheet provided with this package and ask your social worker if you have questions.

When should I come for hemodialysis?

- You will be called when to come for your first hemodialysis treatment. You will then be given a schedule with times and days of the week for your regular hemodialysis treatment.
- There are morning, afternoon and evening appointments. Please arrive on time for your treatment:
  7:30 am for morning
  12:30 pm for afternoon
  5:30 pm for evening
- Due to the number of people having hemodialysis at the same time you might have to wait up to an hour until we can start your treatment. We appreciate your patience.
What should I do when I arrive at the unit?
- Take your weight and write it down for the nurse. Please try to use the same scale every time.
- Stay in the waiting room until you are asked to come into the unit.
- When you are asked to come into the unit, you may go and get your chair/bed ready. You will be provided with 2 blankets. If you prefer, you may bring your own blankets.

What do I do at the end of my hemodialysis?
- Stay in your chair/bed until your blood pressure has been taken and the nurse has told you it is safe to stand up.
- Take your weight with the same scale you used before hemodialysis and write it down for the nurse.
- Tidy your area.
- Stay in the unit (at your chair/bed) until your nurse tells you that you are well enough to go home.
- If you need to stay for medical reasons, you may be moved to another area for further care.

How might I feel during hemodialysis?
- During your hemodialysis, you should not experience any pain but you may experience some side effects like muscle cramps, headaches, nausea and low blood pressure (which can make you feel dizzy and weak). These symptoms can be managed, so be sure to report them to your nurse. Do not wait.
- While on hemodialysis, you will be monitored by nurses and your blood pressure will be taken at least every hour. For your own safety you will need to keep the blood pressure cuff on for the entire treatment.

What can I do during hemodialysis?
You will be asked to sit in a large reclining chair or a bed. During your hemodialysis you can:
- Watch television (TV), DVD
- Read/study
- Sleep
- Listen to music with earphones
- Work on your own computer (including playing video games) but there is no Internet connection available.

How long will my hemodialysis take?
- Your doctor orders the length of time you will be attached to the hemodialysis machine.
- Your first hemodialysis usually requires 2½ hours attached to the machine. However, plan to be in the hemodialysis unit for about 3½ hours. Your team needs time for hooking you up and taking you off the machine.
- Regular hemodialysis usually requires 4 hours attached to the machine. Plan to be in the unit for about 5 hours each visit to allow for the hook up time and take off time.
**Are family and visitors allowed in the unit?**

- Yes, family members, visitors and care givers are welcome to stay with you.
- However, please understand that they may be asked to leave the hemodialysis unit at any time if there is a medical emergency in the unit.
- Children (under the age of 12) must be with another visiting adult. They cannot stay alone with the patient.
- A volunteer may be available to visit with you. Please let your nurse know if you are interested.

**Can I eat during hemodialysis?**

- Please eat a light meal *before* you arrive. And bring a snack or supplement to have after your hemodialysis treatment.
- Eating during hemodialysis may cause your blood pressure to drop so it is better if you do not.
- No food or snacks are provided in the unit.

**What if my needle site starts to bleed after hemodialysis?**

- If your needle site starts bleeding while you are still at VGH, apply pressure on the site right away and return to the hemodialysis unit.
- If bleeding starts after you leave the hospital apply pressure for 10 minutes. If the bleeding does not stop, continue to apply pressure and go to the nearest hospital emergency room.

**What about my medications?**

- It is very important to keep a current record of all your medications (prescription, non-prescription and herbal supplements) in your hemodialysis chart.
- Please bring all your medications to your first hemodialysis treatment including your Aranesp® or Eprex®. Keep them cold when transporting.
- Bring any non-prescription medications or herbal products you are using.
- If you are diabetic, bring your glucose monitoring record.
- The British Columbia Provincial Renal Agency (BCPRA) will pay for any medications that are related to your kidney disease (e.g. Renavite, Calcium, Aspirin, blood pressure medications).
- Your kidney medication orders will be sent to a central pharmacy and delivered to you.
- When you need a refill, call the central pharmacy to reorder using the phone number on the medication label. Or, ask your Kidney Doctor to reorder it.
- Some medications may be ordered for you for non-kidney related conditions. These medications are not covered by BCPRA but may be covered by Pharmacare. These medications can still be dispensed by the same central pharmacy or from the pharmacy of your choice.
- Every 6 weeks you will be asked to bring all of your medications to the hemodialysis unit. The nurse, physician or pharmacist will review them and discuss any medication changes. You can ask for a computer print out of all your medications.
- If another doctor orders a medication for you, or you start using an over-the-counter medication or herbal product, please bring them to the dialysis unit at your next visit. It is important to make sure the medications and dose are safe for dialysis patients.
What about my blood tests?

- From now on all your blood tests will be drawn during hemodialysis. Do not continue to use community laboratories unless asked by your Kidney Doctor or nurse.
- Blood tests will be done at your first hemodialysis, weekly for 2 weeks and then once every 6 weeks or as ordered by the doctors.
- If your family doctor or specialist wants you to do blood tests, bring the lab request form to the hemodialysis unit and ask your Kidney Doctor to order those tests through the hemodialysis unit with a copy of the results to be sent to the ordering doctor.
- However, if you have to fast before the blood test, the hemodialysis unit will only do the blood tests if you have your dialysis in the morning. If you have afternoon or evening hemodialysis you will need to get your fasting blood tests done at a community lab.
- Hepatitis B and C screening blood tests will be done at your first hemodialysis, and then yearly. If you have not already received the Hepatitis B vaccine it will be offered to you if necessary. If you require more information about Hepatitis B and C vaccination, please ask your nurse.

What about other tests and procedures?

- Swabs for some bacteria, like MRSA and VRE (see glossary), will also be done on your first visit, then twice a year.
- During the first hemodialysis you will be asked some questions to complete a survey about Tuberculosis and you will have a chest X ray done.
- You may require an ECG test.
- The Nursing Unit Coordinator books any tests/procedures/consultations with other specialties that have been ordered for you by the Kidney Doctor.
- If you are unable to come to your booked appointment it is up to you or your family to reschedule or cancel. Specialists see you in their office, not in the Hemodialysis Unit.
- You or your family must make transportation arrangements to and from any tests or procedures that have been booked for you. Please see the transportation information sheet for further information.

Should I still see my family doctor, dentist and specialists?

- It is very important that you continue to see your family doctor and dentist for regular check ups and other non-kidney related concerns.
- If you are seeing any other specialists continue with those appointments. Remember to bring in any new medications to your next hemodialysis.
What if I have a special occasion and wish to change my hemodialysis schedule?

• For special changes to your regular hemodialysis schedule you must speak directly with the Patient Services Coordinator or Charge Nurse at least one week in advance unless it is an emergency.
• We will make every effort to meet your special requests but are not always able to do so.
• If you are planning to travel while on hemodialysis, please ask the Patient Services Coordinator or your Social Worker for more information.

What if I have to miss a hemodialysis treatment?

• It is very important for your safety that you come for your hemodialysis regularly. If for any unexpected reason you cannot make it to your scheduled hemodialysis treatment please call the unit to let us know.
• If you are admitted to any hospital please ask your nurse there to phone the VGH Hemodialysis Unit to let us know that you are admitted and to make arrangements for your next hemodialysis.

How long will I continue to get my hemodialysis treatment at the VGH Hemodialysis Unit?

The VGH Hemodialysis Unit and VGH Independent Dialysis Centre are only for new patients starting hemodialysis, patients admitted to VGH or those patients needing a higher level of dialysis care.

• Once your hemodialysis treatments and medical condition is stable, you will be assessed by your Kidney Doctor for transfer to one of the community dialysis units closest to your home:
  • East Vancouver
  • Vancouver Community
  • North Shore
  • Richmond
  • Surrey - Newton, Panorama
  • Coquitlam Tri Cities
  • Abbotsford
  • Squamish
  • Powell River
  • Sechelt

A team of Nephrologists, nurses, technicians, social workers, dietitians and pharmacists will continue to provide quality care in the community units.
Your Hemodialysis Team

The following team members will work with you to provide the best possible hemodialysis care.

**Nursing Unit Coordinator (Unit Clerk)**
The Nursing Unit Coordinator updates the information on your chart. They will also assist you in arranging tests and transportation for dialysis.

**Patient Services Coordinator (PSC)**
The Patient Services Coordinator’s will assist you with any questions and will coordinate your transfer to other units when space available. They will assist you with changing your schedule for special events or travel, if it is possible to do so.

**Dietitian**
The renal dietician will regularly assess your nutrition needs and provide education and information to help you make healthy food choices.

**Kidney Doctor (Nephrologist)**
The kidney doctors take turns visiting you every time you have hemodialysis. If you have any concerns you do not wish to discuss in the dialysis unit, you may call the Nephrology office to request a separate appointment with your kidney doctor.

**Nephrology Fellow**
This is a medical doctor in training in the area of Nephrology (kidney medicine, dialysis and transplant). VGH is a teaching hospital, therefore you may be seen by a Nephrology Fellow who is under the supervision of the attending Nephrologist.

**Medical Resident**
This is a medical doctor in training in the area of internal medicine, anesthesia or surgery. They work with us to gain expertise in the area of kidney disease and hemodialysis. They may visit you with the regular Nephrologists.

**Nurse**
The nurses start and stop your dialysis and monitor you during your treatment. They will provide education for you and your family and help you with your treatment plan. Please let them know if you have any questions or concerns.

**Vascular Access Nurse**
This nurse will monitor your Vascular Access and schedule clinic appointments if needed.

**Triage Nurse**
The triage nurse will visit you during your first few hemodialysis treatments and will provide you with information about your dialysis treatment options. For some of you this will be a review and for others it will be brand new information. Together you can decide on the best dialysis treatment for you at this time.

**Pharmacist**
The pharmacist reviews your medications, makes sure you know how to take your medications and communicates any issues with your community Pharmacy where you fill your medications.

**Social Worker**
The renal social workers will help you with emotional and practical concerns related to your health including:

- Individual/family counseling and support to help you cope with your situation.
- Information about community resources such as home support services, financial aid programs, employment/retraining, housing, etc.

**Technician**
The technician sets up and maintains the hemodialysis machines. They also take care of the water filter system.
Glossary

**Blood test** – is a laboratory analysis performed on a blood sample that is usually drawn from the dialysis machine during treatment but can also be extracted from a vein in the arm using a needle.

**Darbepoetin (Aranesp®) & Erythropoietin (Eprex®)** – are medications used in the treatment of low red blood cell count resulting from chronic kidney disease.

**Dialyzer** – The part of a dialysis machine that acts like a filter to remove wastes from the blood.

**ECG Test** – The electrocardiogram (ECG or EKG) is a diagnostic tool that measures and records the electrical activity of the heart, which can lead to a diagnosis of a wide range of heart conditions.

**Hemodialysis** – the process of cleaning wastes and removal of extra fluid of the blood artificially. This job is normally done by the kidneys, but if the kidneys fail, the blood must be cleaned artificially with a special machine, called the dialyzer.

**Hepatitis B** – is a liver disease caused by hepatitis B virus. It is spread from one infected person to another by contact with blood or body fluids.

**Hepatitis C** – is a chronic liver disease caused by hepatitis C virus. It is spread from one infected person to another by contact with blood or body fluids.

**“Hook-up” time** – it is the time period at the beginning of your dialysis treatment when your nurse will assess you and connect you to the hemodialysis machine.

**MRSA** – Staphylococcus aureus (SA) are bacteria that live on human skin and in the nose. In some cases, these bacteria may develop resistance to our usual antibiotics (i.e. Methicillin). This leads to Methicillin resistant Staphylococcus aureus (MRSA) bacteria which may cause difficult to treat infections in humans.

**“Take-off” time** – it is the time period at the end of your hemodialysis treatment when your nurse will disconnect you from the dialysis machine and make sure you are well enough to go home.

**Tuberculosis** – Is an infectious disease caused by a germ called the tubercle bacillus. Tuberculosis is contagious - anyone can catch it. The TB germ enters your body as you breathe. It usually settles in your lungs. From there, it can spread to other parts of your body, including your central nervous system, your bones, and your joints.

**VRE** – Enterococcus is a bacterium that normally lives in people’s bowels. Sometimes it can cause infections. Vancomycin resistant enterococcus (VRE) is a type of bacteria that has developed resistance to many commonly used antibiotics (Vancomycin).

Where Can I Find More Information?

- www.kidneycommunitykitchen.ca
- www.davita.com
- www.kidney.org
- www.kidneyschool.org
- www.nutritiondata.com
- www.rsnhope.org
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