

## Renal Services

# Everything I need to know if I want to go on holiday whilst receiving dialysis treatment, including information about going abroad

This information leaflet is for patients who are considering receiving temporary dialysis away from their home base, for example, taking a holiday. It is to advise you of the options available and the support that the Haemodialysis Unit and Peritoneal Dialysis Unit can offer in terms of making appropriate arrangements and facilitating payment for your dialysis (this is dependent on where you are going on your holiday)

This leaflet also provides information about some of the risks when dialysing abroad. It goes through some top tips when planning to dialyse abroad and explains the special checks and arrangements that may be taken when you return to your home unit.

Additional information has been included about the tests you will be required to have if you plan a holiday and require haemodialysis outside of Warwickshire and abroad.

## Can I go on holiday while having dialysis treatment?

Yes you can. Renal Services at University Hospitals Coventry & Warwickshire NHS Trust has a policy for offering all patients the opportunity to have treatment whilst on holiday. This reflects the standard of provision for dialysis away from home as recommended by NHS England – ‘Guidance for Dialysis Away from Base’.



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If you return from holiday earlier than planned for any reason, particularly if you are feeling unwell, you must let your dialysis unit know that you have returned from holiday as soon as possible, so that your dialysis can be organised in a timely manner – this means you will not miss a dialysis treatment.

Your dialysis Unit Manager will contact you to let you know when your dialysis has been planned. If you do not hear from them, you (or a family member) are advised to telephone the unit again to confirm dialysis arrangements.

If you are feeling unwell, you must seek advice from your GP and let your dialysis unit know that you are home and need to re-start your dialysis sessions.

## Peritoneal dialysis

If you have **peritoneal dialysis** and wish to travel to a holiday destination that supports 'Therapy Costing', you can have up to 3 months holiday dialysis in one year.

If you plan to take a holiday to an area that does not recognise the 'Therapy Costing' system, you will be allowed to have up to 4 weeks of holiday abroad each year. We will arrange the delivery of fluid supplies to your hotel or holiday accommodation.

## Haemodialysis

If you receive **haemodialysis**, you are eligible to receive temporary haemodialysis away from your 'home unit' up to a period of 6 months in any one year anywhere. You can take a maximum of 56 day break or take many shorter breaks in a year up to the 6 month provision.

It is advised that you do not take a prolonged period of time, for example, 3 months, from your 'home unit' as your renal consultant will have to transfer your care over to the holiday medical team. Additionally, if you take a prolonged period of time away from your 'home unit' you may not be able to resume your original dialysis slot upon your return.

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### Within the EEA:

- **NHS providers:** Within the European Economic Area (EEA) patients can use their European Health Insurance Card (EHIC) if the provider is within the NHS sector. The EHIC will entitle the patient to renal dialysis for free or at a reduced cost, but patients will need to make arrangements directly with the provider in advance of the holiday. Patients should take this opportunity to find out what financial contribution (if any) is required under the health system of the country they are visiting as the NHS will only pay the NHS dialysis national tariff
- **Private Care providers:** If the provider is in the private sector of another EEA country, patients can claim reimbursement from NHS England under the 'EU Directive route' (also known as Article 56), up to the cost of the equivalent treatment under the NHS (only paying the national tariff rate). Patients will need to make arrangements with the provider in advance of treatment and will also need to apply for funding to NHS England beforehand. More information about the EU Directive funding route and how to apply can be found here:  
<http://www.nhs.uk/NHSEngland/Healthcareabroad/plannedtreatment/Pages/Article56.aspx>

Applying to NHS England in advance will enable patients to be clear on the level of reimbursement that they can expect after treatment. Following treatment, patients must send original receipts and proof of payment to NHS England's European Team, quoting the reference number that they were given pre-treatment.

### Outside the EEA:

- **Reciprocal / bilateral agreements:** The UK has reciprocal healthcare agreements with a number of non-EEA countries and territories. Patients visiting any of these countries should be able to access renal dialysis for free or at a reduced cost. Again, patients must make arrangements for the renal dialysis directly with the provider, in advance of treatment. Different countries require different proofs of identity and/or residency. Further information about which countries the UK has reciprocal healthcare agreements with and how to access treatment in those countries can be found here:  
<http://www.nhs.uk/NHSEngland/Healthcareabroad/countryguide/NonEEACountries/Pages/Non-EEACountries.aspx>
- **Cruise ships:** Renal patients will initially be required to pay for their on-board dialysis on a cruise ship and will be entitled to reimbursement

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upon return from their holiday (funded up to the national UK tariff only) – if dialysis costs more the patient will be responsible for funding the difference in cost). Patients will be risk assessed upon their return from holiday to identify if they need isolation for their dialysis treatment.

- **Other countries:** Patients will have to fund their own renal dialysis if travelling to a country, outside of the EEA, with which the UK has no reciprocal agreement. Reimbursement is not available in these circumstances.

Remember, if you are planning to go to Europe, you must also apply for an EHIC card. Forms are available from your local post office or online at <https://www.nhs.uk/using-the-nhs/healthcare-abroad/apply-for-a-free-ehic-european-health-insurance-card/>

It is important for you to know that your home unit will not be able to give you any equipment to take on holiday with you, for example, dialysers, blood lines or needles. If travelling to India, Pakistan or Bangladesh, you will need to buy this equipment yourself when you arrive at your holiday dialysis centre.

Each dialysis centre including private providers choose their own equipment/consumables/medications (including iron/locking solutions) based on clinical evidence and the units own experience. This may differ to the equipment/consumables/medications (iron/locking solutions) that are used at UHCW.

If you are taking a holiday in the UK and you are eligible for patient transport services for your normal dialysis treatment – this will be the same for your holiday dialysis.

If you plan to receive dialysis away from your home unit and your holiday is taken outside of the UK and you require transport to and from your holiday dialysis unit, please be aware that you will need to plan and pay for all of your transport requirements throughout the duration of your holiday.

## How do I make arrangements to have treatment on holiday?

**For haemodialysis** – contact Suki Bhachu (Holiday Coordinator) on 024 7696 4592. She will be able to give advice and assist with finding an appropriate centre for you to attend for haemodialysis treatment, providing they have spaces to accommodate your treatment.

You are required to give **3 months notice**, or longer if you intend to go abroad and require isolation on your return, for example if you are having dialysis in a high-risk country.

It is extremely important that you book your holiday dialysis with Suki to ensure plans are put in place. This normally takes approximately 3 months. All countries ask you to have special tests before you go, so it's important to plan well ahead. Suki will let you know how the special checks and arrangements will affect you on your return to the dialysis unit. This may be where there is a dialysis machine at either the main unit or a satellite unit.

**However, if you choose not to plan your holiday in advance and take an unplanned holiday and if you require isolation upon your return (holidays taken in high-risk areas) you may receive your dialysis at an isolation unit that is outside the Coventry and Warwickshire area.**

Suki will also be able to give advice on insurance companies. Insurance companies can be found via the Internet. It is important to ensure that you take out the necessary travel insurance. It can be more difficult to get travel insurance when you have a long-term condition, so it is a good idea to start looking for travel insurance before you book your trip. Some insurance companies may ask for a 'fit to travel' letter from your kidney doctor that says you are well enough to travel. Specialist insurance companies often cover a wider range of people with long-term conditions but can be expensive. It may be worth shopping around.

**For peritoneal dialysis (PD)** – contact Tracy Spencer (Renal Service Coordinator) on 024 7696 7732. She will assist you with making the appropriate arrangements for you to receive dialysis treatment while you

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are away. This will include arranging for your PD fluid to be delivered to your holiday accommodation.

## Preparing for my holiday

### Tips when considering going abroad -

- Check with the nurses whether you are protected against Hepatitis B
- Ensure your dialysis arrangements are in place before you book and pay for your trip. EuroDial publishes a directory of dialysis units around the world and Global Dialysis provides independent information about dialysis units, holiday dialysis and dialysis travel (see details at the end of the leaflet)
- You will need to take a letter which lists all the medicines you'll be taking on the plane, especially if you're diabetic or taking erythropoietin (EPO).
- You will need to obtain a letter from your kidney doctor to state you are 'fit to travel'.
- Discuss the risks with your kidney doctor or dialysis nurse especially if you are visiting a high-risk country. You will also need to let the transplant team know when you are planning to take your holiday.
- Find out from your dialysis unit how the special checks and arrangements for isolation will affect you on you return from holiday
- **Please confirm that your holiday dialysis is going to be funded prior to taking your holiday – the holiday Coordinator will be able to help you with this.**

**If you are going on holiday within the British Isles**, the dialysis centre where you will receive treatment will request the following blood tests:

- Hepatitis B and Hepatitis C
- Human Immunodeficiency Virus (HIV)

Swabs will be taken for Methicillin Resistant Staphylococcus Aureus (MRSA) at the time of booking your holiday and then 4 weeks before you go on holiday. These will all be taken by your dialysis nurse.

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**If you are going on holiday abroad**, the dialysis centre where you will receive treatment will request for the following blood tests:

- Hepatitis B and Hepatitis C
- Human Immunodeficiency Virus (HIV)

Some countries, for example, America may also request a chest X-ray and an electrocardiogram (tracing of your heart).

We will need you to sign a consent form so that we can release your medical information to third parties, for example, holiday dialysis providers.

## **‘Carbapenemase-producing Enterobacteriaceae’ (CPE)**

### **What are ‘carbapenemase-producing Enterobacteriaceae’? (CPE)**

Everyone has bacteria that live in the bowel that are generally harmless and can even help with digestion. These bacteria are harmless because our immune system keeps them in check and prevents them from spreading elsewhere in the body.

However, sometimes these bacteria can become antibiotic-resistant (this is where certain antibiotics no longer work against bacteria) and, in certain situations, can cause infections.

Some of these bacteria can develop into Carbapenemase-producing Enterobacteriaceae (sometimes abbreviated to CPE) as they have become resistant to certain powerful antibiotics known as carbapenem antibiotics.

## **Why does carbapenem resistance matter?**

Carbapenem antibiotics can only be given in hospital directly into the bloodstream. Until now, doctors have relied on them to successfully treat certain ‘difficult’ infections when other antibiotics have failed to do so. Therefore, in a hospital or other care setting, where there are many vulnerable patients, spread of these resistant bacteria can cause problems.

### **Why are patients screened for CPE?**

The majority of patients who are found to have CPE do not have symptoms and are known as carriers. CPE can cause infection in patients, for example, wound infections. By knowing which patients are carrying CPE, we can make sure that they receive the best care to prevent the spread of CPE and to prevent CPE infections.

Infections caused by CPE can be difficult to treat. It is very important to know that someone is carrying CPE so that if an infection develops, medical staff can quickly identify the best antibiotic to treat it.

### **Does carriage of CPE need to be treated?**

Should you or a member of your household be admitted to hospital or other healthcare facility, you should let the hospital staff know that you are, or have been, a carrier.

### **How is CPE Spread?**

The bacteria (CPE) can be spread from one person to another on unwashed hands, and on equipment that is contaminated and not been sufficiently cleaned or may be picked up from the environment. This can happen in the community and in hospital.

### **How can the spread of CPE be prevented?**

The most important measure you can take is to maintain effective hand hygiene, washing your hands well with soap and water, especially after going to the toilet. You should avoid touching any medical devices (such as your vascular catheter or fistula needle sites), particularly at the point where it is inserted into the skin.

Your dialysis nurses will be vigilant in washing their hands when caring for you in the dialysis unit – they will clean their hands before and after providing direct care to you. They will use gloves and an apron or long-sleeved gown when caring for you.

## **How are patients screened for CPE?**

Patients who are admitted to University Hospitals Coventry and Warwickshire are assessed at the time of admission to decide if they are at risk of carrying CPE.

## **You may be asked to be screened for CPE if you have:**

- been in a hospital outside the West Midlands area (including receiving holiday dialysis outside West Midlands or abroad)
- been in contact with someone with CPE; or
- been identified as having CPE in the past.

## **How will I be tested for CPE?**

If you are planning to take a holiday and require Haemodialysis whilst on holiday, you will need a sample to be taken for testing before going on holiday, to do this we will require a stool specimen. Some holiday centres may require more than one specimen, but this will be discussed individually with you.

Before you go on holiday you will be given a stool pot to bring in with you when you come in for your first dialysis after your holiday; a further test for this infection will need to be taken to check if you have contracted CPE whilst being away. This means we will require a second stool specimen.

You will need to dialyse in isolation until the test results are back. It is expected that this will be approximately 48 hours and before your next dialysis. Once the result comes back and is negative you will return to dialysis in a bay – this may not be your allocated dialysis station prior to going on holiday – but we will do our best to give you your original day and time.

If you do not provide a stool sample upon your return from holiday – you will need to remain in isolation for the duration of your dialysis regime. This will also affect your suitability for going on further holidays.

## **What are the risks of dialysing abroad?**

There is an increased risk of developing infections of the blood such as hepatitis B, hepatitis C and HIV when travelling to some dialysis centres abroad. These infections can cause serious illness such as liver disease or AIDS and can make your dialysis more difficult when you return to the UK.

If you are planning a holiday, you must inform one of the Transplant Team members of your intention of going away on holiday, so that they can update your contact details. If you are planning a holiday to a medium or high-risk area you will be suspended from the National Transplant List until your bloods are reported on when you return from holiday.

Some countries are 'high risk', particularly countries in Africa, Asia, the Caribbean, South America, Eastern Europe and the Middle East. Countries in the Indian subcontinent (for example India, Pakistan, Bangladesh) are considered very high risk. These countries are high risk areas because:

- Hepatitis B, Hepatitis C and HIV infections are much more common
- Buildings and equipment are not always of the same standard as the UK
- Infection prevention and control practices are not as strict as in the UK and the risk of infections passing from one person to another is higher

Countries that are considered 'medium risk', for example, Portugal, Italy, Greece, Cuba, Russia, Jamaica, and Spain – you will have a blood test and your nurse will carry out a risk assessment upon your return to assess if you require isolation when receiving Haemodialysis.

Some countries are considered to be low risk, for example, Australia, Japan, Western Europe, North America (including Canada) and New Zealand.

## **What special arrangements and monitoring will be needed on my return from dialysing abroad?**

On returning to the UK, you will have your bloods tested for Hepatitis B, Hepatitis C and HIV on your first dialysis session. Also, swabs will be taken for MRSA. You will be dialysed in a single isolation room and your

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dialysis nurse will ask you some questions which will identify any risks or concerns.

For example, it is important to let your dialysis nurse know if you have been ill, had any blood transfusions, surgery or dental treatment whilst abroad and if any dialysis lines, dialysers or needles were shared between you and any other patients.

### **What special arrangements and monitoring will be needed on my return from dialysing in a ‘high risk area’?**

If you have been dialysing abroad in a ‘high risk area’ the following special checks and dialysis arrangements may be needed:

- Extra blood tests to check for infections in your blood. These blood tests will be taken every 2 weeks for up to 8 weeks.
- You will use a dialysis machine that is for your use only and will dialyse in a single isolation room for at least 2 months. If you receive your dialysis at a satellite unit and you have travelled to an area regarded as ‘high risk’, on your return you will be dialysed in an isolation area to ensure that you have not contracted any infection whilst you have been on holiday.
- There is a waiting list for patients wishing to travel to areas requiring isolation on their return. This arrangement will also require a change to your dialysis days or times, so please **contact Suki first, before you arrange your holiday.**
- You will be suspended from the transplant list for the duration of your holiday and if you have travelled to a medium risk country you will be suspended from the list until your bloods have been reported on. If you have travelled to a high-risk area you will be suspended for 2 months following your return to ensure that you have not contracted any infection whilst you have been on holiday.
- It is important not to book another holiday within the 2-month screening period following a holiday in a medium or high-risk area. You will be undergoing regular blood tests that need to be taken for the 2-month period (after your return) to check that you have not contracted an infection.

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- Patients that dialyse at home and plan a holiday to either a high or medium risk area will need to have a risk assessment and blood tests upon their return. Thereafter, bloods will be taken upon your return and at the 6 and 8 weekly intervals. If during the 2-month screening period you are admitted to hospital – a follow-up programme will be followed.

After 2 months one of the kidney doctors will look at your blood results. If the blood results show you are free from infection you will be able to stop using your own dialysis machine and come out of the isolation room. The doctors will decide when you can go back on the transplant list. If you have picked up an infection it will need to be treated first.

### **Are these checks and arrangements necessary?**

We do not want to put you off travelling abroad. However, it is important to protect everyone in the dialysis unit from infection and reduce the risk of spreading infection.

If you are on CAPD you will not be required to have any bloods or swabs taken on your return from your holiday.

### **What if the results show that I have an infection?**

If your blood tests show you have an infection you may need to continue to have your dialysis in a single isolation room. Your dialysis nurse and doctor will talk to you about the infection, your personal care plan and you will be referred to a specialist doctor for treatment of the infection.

### **Having a kidney transplant abroad?**

We strongly recommend that you do not go abroad to obtain a kidney as you are much more likely to die or suffer serious complications.

Common complications include:

- death
- life threatening infections such as hepatitis B, hepatitis C and Cytomegalo virus (CMV)
- failure of the kidney transplant

If you are thinking about going abroad to obtain a kidney, please talk to your kidney doctor and nurse.

### To summarise

There is a risk that a patient will contract a blood-borne virus (such as Hepatitis B, Hepatitis C and HIV) whilst being dialysed abroad. The risks depend on:

- i) Prevalence of BBV infection in the country visited  
<http://www.hpa.org.uk/web/HPAweb&Page&MigrantHealthAutoList/page/1271066169950>
- ii) Infection control practices in the dialysis unit where they were dialysing. In addition, there is a risk that patients will become infected with CPE.

### Action to take before you travel on holiday

- Discuss risks as outlined above with your dialysis nurse
- Your dialysis nurse will undertake screens as required by the patient's holiday unit
- Your dialysis nurse will give you a Microbiology Laboratory request form – “Screening for CPD for a Haemodialysis patient returning from holiday” and a stool pot to bring in on your first dialysis session on return from holiday.

### Action to take on return from holiday

- Your dialysis nurse will carry out a risk assessment
- Your dialysis nurse will obtain initial BBV screen and follow actions for isolation (if required)
- Your dialysis nurse will send your stool sample to the Microbiology Laboratory
- Remember, if you return from holiday early for any reason, you must contact your dialysis unit immediately so that your dialysis can be recommenced as soon as possible so that you do not miss a dialysis treatment
- If you are feeling unwell, contact your GP as well as your dialysis unit to let them know

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### **Additional sources of information**

If you have any questions, please speak to Suki or Tracy. Further information can also be obtained from:

The National Kidney Federation has tips on holidays for kidney patients on their website: [www.kidney.org.uk/holidays/tips.html](http://www.kidney.org.uk/holidays/tips.html)

NHS Choices website has more information about a wide range of health topics <http://www.nhs.uk/Pages/HomePage.aspx>

West Midlands Renal Network [www.wmrn.co.uk](http://www.wmrn.co.uk)

EuroDial [www.eurodial.org/](http://www.eurodial.org/)

Global Dialysis [www.globaldialysis.com/](http://www.globaldialysis.com/)

Freedom Holidays <http://www.holidaydialysis.co.uk/>  
(Information about dialysis centres abroad) and  
[www.dialysisfreedom.co.uk/](http://www.dialysisfreedom.co.uk/)  
(Information about dialysis centres in the UK)

For information about the European Health Insurance Card (EHIC) visit [www.ehic.org.uk/](http://www.ehic.org.uk/)

You can also contact them by telephone on 0845 605 0707 or by post:

EHIC Enquiries  
PO Box 1114  
Newcastle upon Tyne  
NE99 2TL

NHS Kidney Care website [www.kidneycare.nhs.uk/](http://www.kidneycare.nhs.uk/)

The Trust has access to interpreting and translation services. If you need this Information in another language or format, please contact us on 0247 696 8264 and we will do our best to meet your needs.

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#### **Document History**

Department:	Renal
Contact:	28264
Updated:	February 2023
Review:	November 2024
Version:	15.1
Reference:	HIC/LFT/524/07

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