

Patient Information

Renal Services

Terms of Treatment Agreement for Patients in Peritoneal Dialysis (PD)

Your doctor has informed you that you require dialysis as a treatment for your kidney failure. This is a treatment that requires interventional procedures for which we will need your written agreement.

If you are planning to have Peritoneal Dialysis you will need to have a catheter inserted into your abdomen so that you can have this treatment. The catheter allows special fluid to be drained in and out of your abdomen where it will remove waste products and fluid from your blood stream. This catheter can be put in under local anaesthetic or general anaesthetic and the doctors will advise which is most suitable for you.

In order for dialysis to be effectively carried out, it is important that there is a good working partnership between hospital staff and patients. The PD team will be available to assist you with this as much as possible but it is important that you are able to adhere with all aspects of the treatment. This document aims to set out the terms on which this can be achieved.

Peritoneal Dialysis is a self-care treatment programme and there are two variations available - Continuous Ambulatory Peritoneal Dialysis (CAPD) and Automated Peritoneal Dialysis (APD). We recommend that all patients start on CAPD for at least 4 weeks in order to understand the principles of dialysis and to gain confidence in the technique. We have found in the past that if a patient is experiencing any 'teething' problems then it is better for this to happen in the day rather than in the middle of the night.

Training will either take place at UHCW NHS Trust or may be organised in



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your own home. If training is booked at the hospital it will take place over a 5 day period (Monday – Friday 9am – 3 pm). The training room is opposite the entrance to Ward 50 (5th floor). If training is to take place in your own home then we will arrange a mutually convenient time.

By the end of the training week it is planned that you will be able to dialyse independently at home, but if you feel that you would like more training this will be provided.

Many patients prefer to change to APD - they will require further training to use the machine. This will normally be undertaken over a weekend period.

Patients on APD should also be aware that the machine will download results to the hospital on a daily basis using a computer programme called Sharesource. This allows the PD team to review your dialysis treatment on a regular basis. It is important to remember that although we can see this data, you should contact us immediately if you feel that there is something wrong or you feel unwell. The PD team can also remotely access the machine to change the programme and will contact you if your programme needs to change.

There may be occasions that we recommend you change PD modality and this will be dependent on blood results and results of tests we do to check how well dialysis is working. For medical reasons you may be required to transfer to Haemodialysis. This may be for a short period or may be a permanent transfer and will be on the advice of the PD team or Renal Consultant.

We take regular blood tests to ensure your dialysis is satisfactory and we aim to provide you with access to your personal blood results. These blood tests will include all of your regular clinic bloods and any additional blood tests that may be required by your Consultant. We encourage our patients to become as well informed about their condition as possible.

Blood results

Your results will be reviewed regularly by a member of the medical staff and nursing team and we hope you will feel able to discuss your results with us. A clinic specifically for all patients on PD is held and includes

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access to Doctor (PD Lead), PD nurse and Renal Dietitian. You will be seen in this clinic every 6 months. This clinic will be in addition to your visits to your usual Renal Consultant.

Many patients will now be able to access their blood results on Patient View – a national website for patients. www.patientview.org To arrange access to Patient View please discuss this with your nurse or doctor.

We also undertake tests to check how well your dialysis is working:

- Peritoneal Function Test (PFT) - every 6 months and following any regime changes
- Peritoneal Equilibration Test (PET) – every 12 months.

Additional tests:

- Hepatitis B screen (blood test) –every12 months
- Hepatitis C Screen (blood test) – every 12 months
- HIV screen (blood test) – every 12 months
- MRSA Screen (nose and groin swab) – every 6 months

MRSA

MRSA is a type of germ called staphylococcus aureus that are normally found on our skin and nostrils that have developed resistance to some antibiotics. Most people carry MRSA but are unaware because it does not harm them and they have no symptoms. MRSA can cause harm when it gets an opportunity to enter the body. It can cause simple infections such as pimples and boils, or more serious problems such as wound infections, chest infections or blood stream infections.

The monitoring of this infection requires the taking of swabs from nose and groin every 6 months. We can get rid of the germ by using an antiseptic wash to use daily along with a cream for your nose. Clothing needs to be changed daily.

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Hepatitis is inflammation of the liver. There are many causes but viral infection is one of the major causes. Hepatitis B virus is common worldwide and is very infectious.

It is transmitted by blood to blood contact and therefore can be acquired through transfusion of blood products (these are screened within the UK), using intravenous drugs, tattoos or by intimate contact with an infected person.

Symptoms may not occur for weeks or months after infection but the patient remains infectious. The acute illness can be severe but even after symptoms have gone, up to 10% of patients will remain infectious. Chronic infection with Hepatitis B will require specialist medical advice.

Hepatitis C Infection

Hepatitis is inflammation of the liver. There are many causes but viral infection is one of the major causes. Hepatitis C virus is common worldwide and is very infectious.

It is transmitted by blood to blood contact and therefore can be acquired through transfusion of blood products (these are screened within the UK), using intravenous drugs, being tattooed or by intimate contact with an infected person.

Symptoms may not occur for weeks to months after infection but the patient remains infectious. The acute illness can be severe but even after the symptoms have gone, up to 80% of patients will remain infectious. Chronic infection with Hepatitis C will require specialist medical advice.

Human Immunodeficiency Virus (HIV) Infection

HIV is a virus, which attacks the body's defence system, so that the body can no longer fight against infections. This may lead to AIDS (Acquired Immune Deficiency Syndrome).

It is transmitted by blood to blood contact and therefore can be acquired through transfusion of blood products (these are screened within the UK), using intravenous drugs, tattoos or by intimate contact with an infected person.

Early symptoms consist of a flu like illness which then settles. Serious and life threatening symptoms do not occur for some years but patients are not

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cured of this condition and will require long term treatment within specialist services.

Other useful organisations

Hepatitis B Foundation UK www.hepb.org.uk

British Liver Trust www.britishlivertrust.org.uk

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact us on 024 7696 7777 and we will do our best to meet your needs.

The Renal Registry

The UK Renal Registry is part of the Renal Association, a charity set up as the national association for Kidney Doctors and Researchers into Kidney diseases.

The Renal Registry collects and analyse information about the treatment of Kidney failure. This is done from the information kept by each Renal Unit, including how often treatment is provided, how the treatment is managed and the effectiveness of each type of treatment. The Renal Registry also keeps information about you - your name, date of birth, postcode and medical information such as blood pressure and blood tests.

If you are happy for the Renal Registry to use your personal information you need do nothing further. You do have the right to opt out of the Registry being sent information which identifies you. If you wish to opt out of the Renal Registry data collection please inform your Hospital Doctor or Nurse, who will record this locally. For further information about the Renal Registry please visit www.renalreg.org

Patient Forum

UHCW NHS Trust has an active patient forum group who meet on a quarterly basis. The meetings are attended by patients, relatives, carers as well as members of hospital staff. It is an opportunity to discuss any issues or concerns about the service provided and also to have a positive input into the future plans of the service. Anyone is welcome to attend so please ask for contact details.

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Holidays

When you are established on PD it is possible for the fluids to be delivered to a holiday address so that travel is much easier. You will be given more information regarding this during your training week but it should be noted that we require a specific notice period of up to 12 weeks in order to organise this fluid delivery.

A comprehensive list of countries and the associated notice period is available in the PD training room and can also be obtained from the Dialysis Co-ordinator on 02476 967732. Please be aware that it is your responsibility for ensuring that you let us know when you want to travel and that you provide us with adequate time to order the fluid. We will not order fluid if it does not comply with the notice period unless there are exceptional/emergency circumstances.

You should also be aware that you will need to take other supplies with you that relate to your dialysis as the company will not supply these abroad. Most patients chose to do CAPD on holiday. If you are on APD and wish to use this type of dialysis abroad then you will need to take your own machine and it will be your responsibility to arrange this with your travel company.

Assisted APD (aAPD)

A very small number of patients may be eligible for assisted APD if they meet the strict criteria. This is a service which is provided by our own Health Care Assistants (HCAs) or through a third party company contracted by Baxter Health Care.

This service involves a daily visit from a HCA who will strip down the machine from the previous dialysis and set up the machine for the next dialysis. Patients will be expected to be able to connect/disconnect themselves to the machine and to deal with any machine alarms that may occur.

Baxter will deliver fluid once a month and they will place the delivery in an area of your choice. Please note that the nurses who visit each day will not be responsible for moving fluid, they will just collect the fluid they need each day for treatment. Fluid should be stored in an area where there is

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enough room for the nurses to safely collect fluid and to manoeuvre without causing injury to themselves.

It should be noted that the nurses will need to access your home every day and will not be able to guarantee a specific time to visit.

HCA's from UHCW will visit between 8am and 3 pm and staff from the Baxter contracted company will endeavour to visit between 8am and 8pm.

If the nurse visits your home and is not able to gain access they will not be able to return. You may wish to consider a key safe in order that staff can access your home whilst you are out.

Please note that assisted APD visits cannot be organised if you wish to go away on holiday.

Please speak to one of the PD nurses for further information regarding this treatment.

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Please read this form carefully. Please ask if you do not understand anything

- I agree to screening for transmissible viruses and MRSA
- I agree to allow my personal information and blood results to be sent to the UK Renal Registry for audit purposes
- I agree to adhere to my peritoneal dialysis prescription as advised by the PD team
- I agree to switch to Haemodialysis if advised, and understand that failure to do so may be detrimental to my health.

Statement of Patient

Patient's Signature..... Date.....

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Name (print)

Signature of nurse Date.....

Name (print)

If the patient is unable to sign but has indicated his or her agreement, this form should be signed by a second nurse as witness. Young adults may also like a parent to sign here.

Witness Signature..... Date.....

Name (print)

Statement of Interpreter (where required)

I have interpreted the information above to the patient to the best of my ability and in a way in which I believe he/she can understand.

Signed.....Date.....Name(print).....

The Trust operates a smoke free policy.

To give feedback on this leaflet please email feedback@uhcw.nhs.uk

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