

Renal Department

Welcome to haemodialysis

This is a general guide to the Haemodialysis Units. It aims to answer some questions you may have about your treatment. It can be used alongside other information leaflets which will go into more depth about some of the issues and subjects discussed in this booklet.

The Renal Unit is led by a team of senior nurses, at least one of whom should be on duty on each shift. They will be pleased to answer any queries about your care and give you any further information you may need.

The main unit

The main unit is at University Hospitals Coventry & Warwickshire NHS Trust Hospital, based at Walsgrave. The Unit consists of 5 teams. One of these teams is the High Dependency Team. Four of the teams in the unit have 6 dialysis stations and one team, the high dependency, has 6 individual rooms which can be used for isolation purposes. Each team consists of a group of nurses, with a senior nurse leading.

Once a dialysis regime has been prescribed, you will be given a permanent day and time for treatment, either at the University Hospital, one of the four satellite units in Rugby, Nuneaton, Stratford, Whitnash, or at the Coventry Clay Lane unit.

Dialysis start times are staggered in each team depending on the duration of your treatment and to reduce unnecessary delays for treatment to begin.

The Unit is climate controlled for both patient and staff comfort. If you feel



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cool, please ask staff for blankets or bring in a jumper or cardigan to wear. You will receive your treatment on special dialysis chairs which can be adjusted to your requirements.

The University Hospital Renal Unit is open Monday to Saturday, and presently the Unit is open from 7am to 11pm. Opening times at the Main unit at UHCW may change to accommodate patient numbers and staffing. The Unit is closed on a Sunday but will be covered by staff on call from the Haemodialysis Unit for emergencies.

Dialysis

To receive dialysis treatment, we need to be able to access your blood to clean it. This can be done in three ways:

- If you have started treatment as an emergency, you will have a temporary catheter inserted into a vein either in your neck or groin.
- This will be replaced by a tunnelled line that is in a major vein in your neck and tunnelled to exit on your chest wall, at the front, just below your shoulder.

It is important that under no circumstances this line get wet as this will increase the risk of infection. The line will be covered by a dressing which will allow the nurse to observe the position of the catheter and for any signs of infection. This dressing will be changed weekly in the Dialysis Unit by your dialysis nurse.

- You may also be required at some point, to have a small operation in your arm to make a “fistula”. This is the preferred option for dialysis access, but it is not always possible for some people to have one. If you have had a planned admission and have been attending a renal clinic, you may have already had a fistula created. You will need to check your fistula regularly at home for a bruit or buzz which can be felt over the operation site. **If this stops, please contact the unit immediately.**

More detailed information about the procedure relevant to you will be given to you by staff on the Unit. Please ask if this additional information is not offered to you.

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Satellite units

The satellite units enable those patients who are stable on treatment to have their dialysis nearer to where they live. As these units are nurse led without a renal doctor on site, there are strict criteria that patients need to meet. We endeavour to teach all patients to do as much as possible for themselves, which will include setting up their own machines to completing all of their dialysis treatment.

Patients must have permanent established access and be stable during treatment. If at any time the nurse is concerned about your safety and well being, you will automatically be transferred back to the main unit until your condition is stable again.

If you are going to be receiving dialysis at one of the four satellite units, you will find that they have different opening hours.

Loss of essential services

Due to unforeseen circumstances, there may be an unexpected loss of service, for example, water supply. This may mean your planned dialysis session will have to take place at another unit that is unaffected by the emergency. Your kidney doctor or nurse will advise you of the plans for the provision of your dialysis treatment if an emergency occurs.

Team care

Each patient in the Renal Unit is allocated a team of staff who are responsible for their care. This team will be able to help and advise you on how well your dialysis is going. All patients will have a named nurse who will be available to discuss your blood results, along with your plan of care. They may not however always be on duty during your dialysis treatments.

If you are not aware of your named nurse, please ask and feel free to discuss any problems or concerns with your named nurse or the nurse looking after you on the day.

A senior nurse will also be on duty co-ordinating each shift within the Unit if you need to discuss any issues or concerns. If you need to know who the unit co-ordinator is on your shift, you can ask your nurses in your team, or

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you will find this information displayed at the nurses desk. They are also identified by the yellow epaulettes that they wear.

Once patients have become established on dialysis in the main Unit, patients may transfer to either one of the satellite units at Rugby, Nuneaton, Stratford, Whitnash or the Coventry Clay Lane Unit for their haemodialysis. The senior nursing team try to plan that patients receive haemodialysis at their local renal satellite unit. The decision to transfer patients is made by the senior nursing team and is planned to ensure that the main Unit can treat those patients that are acutely unwell or those patients that have just commenced haemodialysis.

Student nurses

Teaching Student Nurses is an important part of the work of University Hospitals Coventry and Warwickshire NHS Trust. Students who are working and learning in the renal units may be involved in your care. If you have any concerns about this or wish to refuse their involvement, please inform the nurse in charge of the area.

Medication

Most patients are required to take several different tablets each day.

As most of these tablets are taken indefinitely, before the initial supply has run out, it is necessary for all patients to get further tablets from their own General Practitioner (GP).

Your GP will be informed by letter of any changes with your tablets or treatment following a clinic appointment.

Whilst receiving treatment, the nurse will administer all patients with vitamin B, vitamin C and Folic Acid tablets after each dialysis and so you do not need to take extra vitamin supplements.

Patients may need an injection to boost the number of red blood cells which carry oxygen around the body. This is called darbepoetin (Aranesp) or EPO for short. This can be administered by your nurse in the dialysis unit during your dialysis, depending on your red blood cell count and blood pressure. EPO is supplied via the hospital pharmacy.

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Some patients are prescribed IV iron therapy. This involves iron being administered through the dialysis machine in the last hour of dialysis treatment. It works with EPO therapy, allowing the body to make more red blood cells. This increases the amount of oxygen transported around the body.

All patients will receive Hepatitis B vaccinations. This involves one injection each month for two months, a booster at six months and then one booster each following year. This offers protection against Hepatitis B.

There are two renal pharmacists available to answer any questions regarding your medication. They can be contacted by contacting the main hospital switchboard on **Telephone 024 7696 4000** and asking for bleep **2644**.

Blood tests

In order that you receive an adequate amount of dialysis, it is necessary to take regular blood tests.

These tests are generally taken every 5 weeks if you are dialysing in the main unit, but monthly in the satellite unit. These results will tell us how efficient your dialysis is. It may be necessary to increase your dialysis time or change the actual size of your dialyser (artificial kidney).

Your blood results will be reviewed by a doctor and a senior nurse who will discuss them with you and any changes necessary to your treatment, for example, increasing your dialysis time.

These tests are:

- Hb (haemoglobin) or red blood cells (to check for anaemia)
- Biochemistry (level of waste products cleared by dialysis which can be harmful)
- Other tests are taken monthly, 3 monthly, 6 monthly and annually. These will include Ferritin (Iron levels) and screening for Hepatitis B, Hepatitis C and Human Immunodeficiency Virus (HIV) which are all viruses that can be found in blood.

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Patients who have a low haemoglobin level will need blood to be taken if they require a blood transfusion. If you have concerns regarding accepting or declining a blood transfusion, please discuss this with a senior nurse in the Haemodialysis Unit and/or your renal consultant.

Patients who are prescribed warfarin tablets will need to have a weekly blood test to check the clotting time of their blood. The dose of the tablets may need to be changed depending on the blood result.

Patients on the Renal Transplant List are required to have blood taken every 3 months for tissue typing.

If you are a diabetic, you will have your blood glucose monitored during dialysis so that we can monitor your blood glucose levels during treatment and reduce the risk of a hypoglycaemic episode.

All blood tests are taken through the dialysis needles or vascular catheters before dialysis. It is not usually necessary to have to use another needle.

Patients starting haemodialysis will have swabs taken for MRSA and MSSA screening on admission and thereafter swabs for MRSA and MSSA are taken every 3 months from your nose and groin. Please ask your nurse if you have any questions or concerns about these tests.

Diet and fluid management

When you commence haemodialysis, you will need to be seen by a renal dietician within 3 weeks. You will be given detailed advice on your diet based on your blood results and eating habits.

The renal nurses in the renal unit will talk to you about fluid intake and advise you if you need to restrict your fluid intake. If you currently drink more fluid than you pass as urine, any extra fluid will need to be removed on dialysis. The dietician will advise you further on this, if necessary.

The doctors or nurses will give you a 'dry weight'. This is the weight we estimate that you should be with the correct amount of fluid in your body. This weight will change if you are losing or gaining flesh (i.e. muscle or fat weight).

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It is important that you tell the nurses on the renal unit if you are eating poorly or especially well, as your dry weight may need to be adjusted.

If necessary to keep your blood results within safe limits, you will be advised how to achieve an adequate nutrient intake and if necessary dietary restrictions will be discussed. **Please note unless blood levels highlight a need for dietary restrictions, they should not be considered without discussing with a renal dietician.**

The dieticians can be contacted on 024 7696 6151 or ask the Renal Unit nurses to ask the dietician to visit making them aware that you have started dialysis and we will see you on the Haemodialysis Unit.

Weighing

In the main Dialysis Unit, patients need to be weighed before starting dialysis. We would ask that all patients are weighed by a member of staff so that your weight management can be correctly entered into your dialysis machines, and the correct amount of fluid can be removed during your dialysis treatment. However, some patients may choose to weigh themselves and will complete assessments to ensure they carry out this important observation correctly, as if this measurement is incorrect it can make you very unwell during and after dialysis.

Hand washing

The Unit applies strict infection control policies to prevent transmission of infection between patients and healthcare workers. Strict hand washing should be observed. Please feel free to challenge any healthcare worker if you feel they have not washed their hands; in return we ask all dialysis patients to wash their fistula arms and hands at the sinks in the unit with the antibacterial soap before having their fistula needles inserted.

Generally feeling unwell

All patients at some time feel unwell and it is not always possible to see a doctor in the Unit. Unless it is related to your kidney dialysis, you should see your own GP.

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It is however, important that you attend for your dialysis no matter how unwell you feel. Missing a treatment may cause problems and further illness.

Transport

Patients are encouraged to use hospital transport for the first 6 weeks of dialysis unless they have someone who is willing to drive them in and out. This is because nurses are not sure how the patient may feel following their initial treatments. After the 6-week period, if the patient wishes to drive themselves to and from dialysis and they are considered physically fit by the consultant, they will be allowed to do so.

Patients will be brought for dialysis as a group from similar postcodes to avoid long journeys. These journeys will be arranged by the Ambulance control based on information given to them by the staff in the Haemodialysis Unit.

Bookings will be based on the expected 4 hour dialysis session and then arrangements made for the same patients to travel home together. To avoid unnecessary delays caused by the fact that all patients do the prescribed 4 hours, the unit will aim to put 4 hour patients on dialysis first. This should reduce the need to re book patients which causes inevitable delays.

The Ambulance Service plans these journeys alongside other duties, and it is therefore essential that you are ready for your transport up to one and a half hours before you are due on dialysis, as transport cannot wait. Do not turn it away if it arrives early, as we cannot guarantee another ambulance. The transport booked will depend on your needs and may be a car, minibus, or ambulance. All drivers will carry identification.

At UHCW, we do not always have a ward clerk on duty, and therefore the Ambulance Service have asked that patients be encouraged to cancel journeys themselves and check if they are on the transport list. The number for the Ambulance Service can be obtained by asking your nurse.

If you need to travel in your own wheelchair to and from treatment, this needs to be mentioned at the time of organising your transport.

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If possible, it is better for you if you can provide your own transport to and from dialysis. If you receive benefits, you can claim back travel costs. If you receive mobility allowance or have a 'mobility' car, you are not eligible for ambulance transport unless there is a medical need.

At the end of your treatment, we aim to get you home as soon as possible. It is important that you wait for your transport, but you may have to wait up to 1 hour as stated in the transport contract. Unfortunately, if patients have booked transport home but then make their own way home on 3 occasions, transport will be withdrawn and you will have to make your own arrangements to make your own way to and from your appointment.

If your transport does not arrive before your dialysis time, please telephone the renal ward clerk on 024 7696 7765 so that they can contact the Ambulance Service. They will telephone you back if needed.

Please let the nurse in charge know of any queries or problems regarding transport. There is also the Patients Advisory Liaison Service (PALS) who independently receive and deal with complaints regarding the ambulance service. They can be contacted on free phone 0800 028 4203 or by email feedback@uhcw.nhs.uk

Lifestyle advice

Please ask your named nurse or nurse in charge if you need any advice or support on the following,

- Support for smoking cessation
- Support regarding alcohol problems.
- Programmes of physical activity and weight management
- Sexual health, contraception and pregnancy

Smoking

Smoking tobacco carries a risk of damaging blood vessels and having a heart attack. Smoking can also cause lung cancer. Because renal failure increases the risk of heart attacks and diseased blood vessels even in non-smokers, continuing to smoke with kidney failure carries an extremely high risk. Your nurse can assist you in being referred to the smoking cessation team. Please ask your nurse if you wish to do this.

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Exercise

General health benefits from regular exercise. This does not have to be vigorous, and people should work within their limits while making a point of being active and mobile. This keeps the muscle strength up and helps the heart. Some people find it helpful to take part in organised exercise at gyms or health clubs. Ask one of the doctors for advice before starting.

Sex and fertility

Sexual problems are common for men and women who have kidney failure. Research has shown that people of all ages may have sexual problems. Some people worry that sex may not be possible when they are receiving dialysis treatment. This is not the case. People should still be able to enjoy a normal sex life.

Kidney failure reduces fertility, particularly in women. Men are likely to have reduced sperm count but are still able to father children at any stage. Women often stop ovulating, but this is not always the case, so proper means of contraception should be used too.

Useful contacts

UHCW stop smoking service 024 7696 4760 or ask your nurse for more information or referral

Coventry Stop Smoking Service

For people who live, work or have a GP in Coventry

Call: 0300 200 0011 or Email: smokefree.coventry@covwarkpt.nhs.uk

The Recovery Partnership

Help support and treatment for people with alcohol and drug problems

Telephone 024 7663 0135

Health Trainers (health and lifestyle support)

Telephone: 0300 200 0011 or email health.trainers@covwarkpt.nhs.uk

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Integrated Sexual Health Services

Advice testing and treatment for all sexual health problems and contraception advice

Telephone 0300 020 0027

ISHS clinic is now located on 3rd Floor, City of Coventry Health Centre, Stoney Stanton Road, Coventry, CV1 4FS.

Home training

We actively encourage patients to participate in their own care and encourage training so that patients can be self caring throughout dialysis. In some cases, patients may be able to carry out their treatment at home. There are many benefits of home dialysis, for example, no worry about transport to and from hospital, dialysis can be carried out at a time that suits the patient (as long as the carer is present), a patient can dialyse for longer hours and achieve a good clearance of toxins from the blood.

The NHS Trust can renovate an existing room on the ground floor for treatment or provide you with a cabin in the garden. Upstairs rooms are not appropriate as the dialysis machines are heavy and the NHS Trust operates a 'No Lifting' Policy. Full training is given to ensure you are competent and safe to perform your own treatment at home.

The dialysis units also offer a 'shared care' programme which enables patients to be self caring in the hospital environment with support, if required, from the nursing team. If you are interested or require any more information about home dialysis or self care, please speak to your named nurse or senior nurse.

Clinics

Every 6 months, haemodialysis patients are seen in clinic by their Renal Consultant. It is important to keep these appointments, as it is an opportunity to discuss any problems or ask questions. Blood results and medication are looked at and adjusted accordingly with letters sent to the GP and Renal Unit.

It is important to inform the Renal Unit staff of clinic appointments which coincide with the dialysis times. It may be necessary to change either the appointment time or your dialysis time.

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Out of hours

If you are unwell with a non-dialysis related problem, please contact your GP. The renal doctors are not always available so to avoid unnecessary delay please contact your GP.

If it is an emergency, 999 should be called and asked to bring you into University Hospitals Accident and Emergency Department. If you can, explain that you are a dialysis patient. If emergency dialysis is required out of hours, the consultant on-call will contact the Renal Unit Staff. There is always an experienced nurse and support worker available for emergency treatment.

Visiting

All visiting to the Renal Unit is at the discretion of the nurse in charge. Owing to limited space and patient safety, we allow no more than 2 visitors at a time. No children under the age of 16 are allowed in the unit. This is because of safety regulations and the risk of infection from needles and blood.

We would appreciate it if the visitors of inpatients visit when dialysis has finished. This will help to reduce the number of visitors to the Unit.

We ask relatives or carers who accompany outpatients coming for dialysis to wait outside the Unit whilst treatment is either initiated or terminated. This is because of the lack of space and to allow patient assessment to take place. Once established on dialysis treatment, you may visit.

Holidays

It is possible to go on holiday whilst on dialysis, but it needs advanced planning.

Dialysis spaces may be limited in other Renal Units. We therefore need at least 3 months' notice or more to arrange these sessions. Haemodialysis treatments are also paid in countries within the European Community through the European Health Insurance Card (EHIC) reimbursement

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scheme, as long as arrangements are made for treatment before you travel.

The EHIC card allows you to access state-provided healthcare in all European Economic Area (EEA) countries free of charge. However, please be aware that in some countries, such as France and Switzerland, there may be a percentage payment. This means you will need to pay a proportion of the cost of the provision of your holiday haemodialysis. If this is the case, you will need to apply for partial or full refund from the Department of Health (see the Department of Health website at www.dh.gov.uk/travellers). Further information can be obtained from www.ehic.org.uk

Australia is the only country outside the European Economic Area (EEA) and Switzerland in which haemodialysis is covered by a reciprocal healthcare agreement.

Not all renal centres accept the EHIC system, so it is important to check this information before travelling with the Holiday Dialysis Coordinator.

Haemodialysis patients visiting countries outside of the EEA countries are responsible for meeting the whole cost of their dialysis, for example, if travelling to India, Pakistan, or Bangladesh. Please speak to the Holiday Dialysis Coordinator.

Patients going on holiday are required to have their blood tested for Hepatitis B, Hepatitis C, and HIV, and may need certain swabs taking, such as for MRSA (this is routine for all Renal Units).

After visiting certain countries, it may be necessary for you to dialysis in isolation for 8 weeks. This is whilst we monitor your blood as there may be an increased risk of infection. If you are unsure, please ask one of the senior nurses for verification of countries which will require isolation.

It is important that we book your dialysis treatments first before any deposit is paid on your holiday, as we can change treatments but are not able to refund deposits.

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All holiday dialysis should be booked through the Holiday co-ordinator, Sukhvinder Bhachu, telephone number 024 7696 4590.

There is further information available in the Renal Unit on receiving dialysis treatment on holiday. Please feel free to ask the nurses regarding this.

Benefits

Some patients are entitled to certain welfare benefits.

Pat Watson and Paramjeet Grewal are the renal social workers and are available to answer any questions and give advice. However, due to the complexity of the benefits system they may have to sign post patients onto other agencies who have more expertise and knowledge.

Pat and Paramjeet can also assist with housing issues and liaise with other authorities who can help with aids and adaptations around the home. They can also assist with patients who are suffering hardship by approaching renal charities who can offer financial assistance in some circumstances. They can be contacted on telephone 024 7696 8263 or 024 7696 8302. They share an office on 5th floor, East Wing, but will visit patients in the Unit as well as at home, whichever is more appropriate.

Clinical psychologist

There is a clinical psychologist, who works within the Renal Service whom you may wish to talk to. The clinical psychologist can offer you the opportunity to discuss your difficulties, and give you support to understand how you might deal with these. For referral, please ask any member of the Renal Unit.

Code of conduct

The University Hospital operates a zero tolerance to both aggressive behaviour and verbal abuse. Whilst staff appreciate 'frustrations' that a renal patient may have, there is an expected code of conduct that both patients and staff are expected to adhere to. Shouting and swearing is not tolerated.

Privacy and dignity

All patients should expect their privacy and dignity to be respected while receiving their haemodialysis treatment. Staff should be polite and courteous, treating each person as an individual while aiming to enable you to retain the maximum possible level of independence, choice and control over decisions and treatments being offered. You should be encouraged to raise concerns, be listened to, and supported by staff to do this. If you do feel your privacy or dignity has not been respected, please do not hesitate to speak to a senior member of staff.

Equality and diversity

We aim to promote a culture within the haemodialysis unit that values equality and values both patients and staff. Staff and patients are encouraged to challenge any inappropriate behaviour, conduct and language and to report any unfair treatment.

Mobile phones

At present, mobile phones are not allowed to be used within the Renal Unit. You will see signs around the Unit and in the reception areas informing you of this. There are designated mobile phone areas, such as the waiting area where you can make or receive a call.

Protecting your information

All health care professionals working for the National Health Service (NHS) have a legal duty to maintain the highest level of confidentiality about your patient information. In some instances, you may be receiving care from other people as well as the NHS. We may need to share some information about you with them, so we can work for your benefit. Anyone who receives confidential information about you from us is under a legal duty of confidence. Unless there are exceptional circumstances, for example, when the health or safety of others is at risk (including child protection), we will not disclose your information to third parties without your permission.

If you require further information regarding protecting your information or sharing confidential patient information, please ask your named nurse or any member of the haemodialysis nursing team who can obtain this for you in the form of a patient information leaflet produced by the Trust.

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Useful telephone numbers

Haemodialysis Unit 024 7696 7777

Reception: 024 7696 7765

Ward 50 (the renal ward) is also able to give help and advice 024 7696 8256/8258

Satellite Units

We currently have 5 satellite units.

12 station unit at Nuneaton, George Eliot Hospital
Lucy Deane Renal Unit, Telephone Number: 024 7686 5692

12 station unit at Rugby, St Cross Hospital.
Ash Dialysis Unit, Telephone Number: 01788 663236

12 station unit at Stratford, Stratford Hospital.
Stratford Dialysis Unit, Telephone Number: 01789 265520

7 station unit at Royal Leamington Spa Rehabilitation Hospital.
Whitnash Dialysis Unit, Telephone Number: 01926 470309.

12 station Unit at Clay Lane Dialysis Unit Coventry.
Clay Lane Dialysis Unit, Telephone Number: 02476964592.

Useful sources of kidney information

Kidney patients often feel they need some extra help and information at some stage during their treatment. You, your family, friends and carers may need some information or advice about your condition and treatment. You may find the following sources of information useful as it includes national support groups and other useful organisations.

Patient Information

Walsgrave Hospital Kidney Patients Association (KPA) is a registered charity, originally set up to raise money for equipment for various renal units/wards. It is a support group for all kidney patients, pre dialysis, dialysis, transplant and families. Meetings are held Bi-monthly at Clifford Bridge Road School in Coventry. Membership is free and a magazine called Kidney Kourier is sent to all members.

Telephone 024 7638 4061 (Vivienne Dodds Secretary)

The KPA Website is www.kidney.org.uk for local information.

The BKPA (British Kidney Patient Association) helps support patients and their families with aids and finances to help maintain as normal a life as possible.

Telephone: 01420 472021 / 2 or visit their website www.britishkidney-pa.co.uk

The Polycystic Kidney Disease Charity (PKD) is dedicated to the concerns of people affected by polycystic kidney disease. The charity provides information, advice and support.

Helpline: 01388 665004 or visit their website www.pkdcharity.co.uk

Other useful organisations

There are some well-established, reputable organisations that may be able to give you more information about kidney problems. Many of them have telephone helplines and produce a wide range of leaflets and booklets, often on quite specific topics. Many organisations have their own websites with information on kidney problems and related subjects, as well as details of the latest research going on in their area of interest.

The National Kidney Federation is a nationwide support group and resource for information. Their address is NKF, 6 Stanley Street, Worksop, S81 7HX.

Telephone: 0845 601 0209. Email: nfk@kidney.org.uk or visit their website www.kidney.org.uk

Kidney Research UK is the leading UK charity funding research that focuses on the prevention, treatment, and management of kidney disease.

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The charity also dedicates its work to improving patient care and raising awareness of kidney disease.

Visit their website: www.KidneyResearchUK.org

The Kidney Alliance is jointly formed by the Renal Association and the National Kidney Federation to bring together the patients' voice and professionals committed to renal medicine.

Telephone: 01483 724 472 Email: www.kidneyalliance.org

UK Transplant is the NHS's official transplant site. It features real life stories from people who have benefited from transplantation and provides lots of useful information.

Visit their website: www.uktransplant.org.uk

Additional Renal Resources

There are a number of specific renal projects which provide additional information and support to patients.

Kidney Care Matters Online is a communication tools from NHS Kidney Care that aims to keep you informed and aware of what is happening across England to ensure successful consistent implementation of the Renal National Service Framework.

Visit the website: www.kidneycare.nhs.uk

“Living with Kidney Disease: What should you know” are two DVDs aimed at raising awareness and education to support anyone who has been told by their doctor that they have some level of kidney damage. The first DVD is for people who have been newly diagnosed with chronic kidney disease. The second DVD offers practical advice for those patients with advanced kidney disease. There are options to view the DVDs with subtitles in English and audio in Bengali, English, Gujarati, Hindi, Punjabi and Urdu. Copies of the DVD can be obtained by calling Kidney Research UK's health information line on 0845 300 1499 or Email: kidneyhealth@kidneyresearchuk.org.

Useful contacts

Age UK Coventry

<https://www.ageuk.org.uk/coventry/our-services/>

Telephone: 024 7623 1999

Diabetes UK

Telephone 020 7424 1000

www.diabetes.org.uk

NHS 111

www.nhs.uk/111

National Institute of Excellence (NICE) is an independent organisation responsible for providing National guidance on promoting good health and life styles to prevent ill health. They produce guidance in three main health areas public health, health technologies and clinical practice.

You can access their website on www.nice.org.uk

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

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The Trust operates a smoke free policy.

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