



Royal Free London
NHS Foundation Trust

Welcome to haemodialysis

Information for patients

Welcome to haemodialysis at the Royal Free London. The purpose of this booklet is to welcome you to the service and to help prepare you to start haemodialysis.

In this booklet, we cover most of our commonly asked questions, take you through an average haemodialysis treatment and give you some information about each of our units and the other services offered.

We have four satellite dialysis units, along with a unit at the Royal Free Hospital – we aim to provide services as close to your home as possible and these include:

Barnet Dialysis Unit

Edgware Kidney Care Centre

St. Pancras Kidney and Diabetes Centre

Tottenham Hale Kidney and Diabetes Centre

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Haemodialysis

1A: What is HD?

One role of your kidneys is to filter out waste products and remove excess fluid and salts from your blood. HD helps to do this when your kidneys are not working properly.



- HD can be done in a dialysis unit by nursing staff or we can teach you to do it by yourself either in the unit or at home.
- HD involves small amounts of blood being drawn out of your body by either a needle or plastic tube which is inserted into your blood vessels.
- Your blood then travels through plastic tubes to a dialysis machine where it passes through a filter and the waste products are cleared.
- After that the tubes then return the blood back to your body. Only a small amount of blood is removed at one time.

1B: How often will I need HD?

- Usually people have HD **three times a week on a fixed schedule**. Either on a Monday, Wednesday and Friday or a Tuesday, Thursday and Saturday; there are no slots on a Sunday.
- The dialysis itself **lasts for around 4 hours**, but this is different for everyone and waiting times and travel can mean it will take more time than this out of your day. See section 2 for more information on a typical day on dialysis.

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- Dialysis **slots are available in the morning, afternoon and evenings (twilight)**, but are subject to availability – **talk to your named nurse if you have any queries.**
- If you need to change your session as a one off because of a family event or appointment please tell your named nurse so they can try and arrange it.
- Dialysing at home gives you full flexibility.

AM	7.30am
PM	1.00pm
Twilight	6pm

1C: Are there any side effects or complications?

Does it hurt?

At first putting the needle into your fistula may hurt, but this will lessen over time. The process of HD is not painful.

Tiredness

Some people feel tired after HD – you can reduce this by having the full treatment time recommended by your nurse and following advice you have been given about diet and fluid intake.

Fluid overload

Fluid can build up in your body because you may not be able to pass urine and the liquids you consume (including things such as gravy, yoghurts and soup) will stay in your tissues and lungs which can cause you to develop pneumonia. Over time, fluid overload can also lead to an enlargement of the heart and heart failure. In addition, increased removal of fluid due to fluid overload can lead to cramps on dialysis. Sticking to your fluid restriction and restricting salt in your diet will help avoid this.

Low blood pressure

This may cause you to feel dizzy or to get cramps. If this happens, your nurse may give you extra fluids to help you feel better. Sticking to your fluid restriction will help to avoid these problems as

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this reduces the amount of fluid that has to be removed during dialysis.

Infection

Lines, grafts and fistulas can all become infected. This is often serious and can lead to the development of infections in your heart and spine; one in five (20%) of these types of cases are fatal.

Infection rates with lines are 10 times higher than with fistulas so we would always encourage you to have a fistula formed for your long term dialysis access wherever possible.

We regularly monitor for serious bacteria on your skin and nose. We have strict infection control policies in place to deal with this and staff will inform you of what to do. More information about infection prevention and control at the Royal Free London can be found on our website: www.royalfree.nhs.uk/patients-visitors/advice-and-support/infection-prevention-and-control/.



Bleeding from your fistula or graft

It is normal to bleed a little when your fistula needles are removed. This is controlled by applying pressure to your fistula at the end of dialysis to stop the bleeding. Sometimes this takes a long time to

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stop. If this happens, we will ask the vascular surgeons to see you to arrange a scan and treat the problem.

1D: Shared care HD

We know that patients who take part in their own care have better outcomes than those who do not. We will teach you to carry out some, or all, of your own HD as you are able to. Anyone can do it, but you need to be willing to learn. We have special shared care areas at all of our units. If you decide to carry out some or all of your own HD:

- you will receive personalised training which will last as long as you need until you feel comfortable and confident
- a friend or family member can also be trained to help.

Please speak to your named nurse for more information about how you can take part.

Why shared care?

Shared care gives you increased flexibility, independence and freedom. It saves time and gives a sense of personal satisfaction. Here is what some of our shared care patients have to say:

“We support and help each other while we learn.”

“The shared care unit is bright, fresh and clean.”

“You don’t need to wait for a nurse to get you set up or help you off when you’re finished, by the time someone’s helped you off the machine you’re done have already left.”

“The responsibility that comes with shared care creates a sense of satisfaction...”

“It makes my life much easier, having flexibility with slots.”

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1E: Home HD

This involves you or a relative/carer performing your HD at home. **If you're interested, let your nurse or doctor know.**

Why home HD?

- You will have more **independence and flexibility** to fit dialysis around work, family and life.
- You **do not have to come to hospital, except** for your clinic appointments.
- You have the freedom to dialyse more often or for longer meaning you will feel better and have **fewer restrictions on what you can eat or drink.**
- If you are shielding then home HD is ideal as you will have less contact with others and be **less likely to contract COVID-19 or other respiratory infections.**

How is home HD arranged?

You don't need a lot of room to do this and we will visit your home to work out how best to do it. Usually people use their bedroom, lounge or spare room for their dialysis. We supply the equipment and advise of any changes needed to your home. There is no charge for supplies or reasonable adjustments to your home.

What training will I receive?

Either you, a relative or a carer will receive training. The aim of our training is to make you feel comfortable. You will be trained by our expert HD nurses. Training approximately takes 8-12 weeks.



1F: FAQs

Can I drive?

Being on HD doesn't stop you from driving unless there's another medical reason why you cannot.

Can I drink alcohol?

Yes, but only after advice from your doctor or dietician as certain types of alcohol are not recommended for some patients. You should also stick to your fluid restriction.

Will the unit arrange transport for me?

We encourage all patients to make their own way to dialysis if they are able to. Your transport needs will be assessed and you will have transport if suitable.

Will I be able to work or continue my studies?

Once you are established on HD you should feel well enough to go back to your job. Talk to your nurse and they will try to arrange a slot.

Can I go on holiday?

It is easier to go on holiday if you are on peritoneal dialysis but it is usually possible to arrange haemodialysis if you want to go on holiday in the UK or abroad. Depending on where you go there may be a fee to pay. Talk to your named nurse who can help point you in the right direction.

Will HD affect my sex drive?

HD does not mean you have to stop having sex. As long as you feel comfortable, you can continue as normal. For information about starting a family, contraception or erectile dysfunction, please talk to your GP or consultant.

A day on HD

If you are new to dialysis you will be told on your letter where and when your slot is (see section 1 for time slots).

We encourage all patients to make their own way to dialysis, if they are able. All patients' transport needs are assessed and you will have transport if you need it. Please note that sometimes there is a wait. We try to minimise this but we recommend you bring a book, headphones and music or something to occupy yourself

If you arrive early you will be asked to wait until your dialysis area and machine have been cleaned. Wash your hands thoroughly, wear a mask at all times and weigh yourself – someone can help you if needed.

Once you are settled in the dialysis chair your nurse will check your blood pressure and see if you have any fluid that needs removing.

You will then be connected to the machine via your access so your blood can be cleaned and filtered by the dialysis machine and returned to your body. You'll be able to see your blood going through the tubing and the machine.

The process takes 3-4 hours – it varies for each person. Your blood pressure will be checked intermittently and you may hear the machine bleep occasionally.

Many patients sleep, read, work, use their laptops during the treatment to pass the time. Some refreshments such as a cup of tea and biscuits are available, but please bring your own if you wish. WiFi is also available.

When the dialysis is complete, the needles are removed and pressure applied until bleeding stops. You can then weigh yourself. Providing you feel well enough you can then make your way home. If you feel unwell after, the nurses may keep you until you feel better.

The equipment is then cleaned and disinfected to stop the spread of infections, ready to be used by the next patient.

How to look after your dialysis access

3A: Fistulas and grafts

Dos

- **Exercise your hand regularly:** Squeezing a soft ball for three to five minutes, three or four times a day increases blood flow through the fistula/graft and hand.
- **Check your fistula/graft daily:** If it becomes red or tender contact your dialysis unit. If the buzzing/vibration sensation has changed or disappeared, contact your dialysis unit or if they are closed contact the Royal Free Hospital renal unit.
- **Check your hand:** If it becomes very painful, blue or swollen, contact the Royal Free Hospital.

Don'ts

- **Wear tight fitting** clothes, bracelets or watches on your fistula/graft arm.
- **Use your arm for carrying/lifting** heavy objects.
- **Let anybody take blood samples**, insert a cannula or measure blood pressure on your fistula/graft arm.

What to do in an emergency

- If the bleeding is not controlled, this should be treated as an emergency. Please call 999 and ask to be taken to the Royal Free A&E

3B: Line care

Dos

- **Make sure your line is covered with a dressing and secured in place** at all times. The less your line is able to move the less likely it is to become infected.
- **Wash your hands** first if it is necessary to touch your line.
- **Immediately report any swelling, tenderness, fever or oozing from the exit site** to your dialysis unit.
- **Immediately report any bleeding from the exit site** to your dialysis unit and apply pressure to the exit site.
- **Call 999 if the bleeding is heavy or doesn't stop after pressing.**

Don'ts

- **Get your dressing wet.** Keeping it dry avoids infection.
- Make sure your bath is waist level and do not submerge your dressing. Do not shower or swim.
- **Replace the dressing if it becomes dislodged.** Contact your dialysis unit for advice.
- **Play contact sports.** If you do play sports ensure your line is securely taped to your chest and the clamps are closed. Ask your nurse for advice.
- **Allow your line to be used for anything other than dialysis,** unless it's an emergency.

For more information:

Always feel free to speak to the doctors, surgeons or nurses who are looking after your haemodialysis treatment. We are here to give you all the advice and support that you may need.

Your dialysis unit

4A: Who is who?

Below are a few pictures of the different colour uniforms all our staff wear, just to help you know the different roles of staff at your dialysis unit.



Matron: This is the head nurse across all of our dialysis units.



Clinical nurse specialist: Specialises in different aspects of kidney care, usually in the clinic areas.



Nursing assistant: Assist nursing staff and patients with preparation for treatment.



Practice educator: Provides support, education and training to staff and patients.



Sister/charge nurse: This is the unit's senior nurse. They manage the unit on a daily basis. They also carry out your dialysis treatment.



Junior sister: May be your named nurse. Deputises to the sister/charge nurse in their absence, a team leader and carries out your dialysis.



Staff nurse: May be your named nurse, carries out your dialysis and administers your medications.



Assistant practitioner: May be your named nurse and carries out your dialysis.



Domestic staff: Provide cleaning and catering services in your unit.

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4B: Your named nurse (NN) is:

All dialysis patients are assigned a named nurse (NN) who acts as their care co-ordinator. All other staff will be happy to help you too.



During your first dialysis treatment you will be welcomed and orientated to the unit by a member of staff and your NN will **introduce themselves** to you at the first available opportunity. If you are not sure who your NN is, please ask or look at the staff picture boards.

Your NN will encourage you to take an active part in your own care and monitor your own results using Renal Patient View (www.patientview.org); this is an online system used by our dialysis patients and enables you to view your latest test results, letters and medicines.

Your NN will **review you at least once a month** to see how you are, and assess your dialysis. You'll have an opportunity to ask any questions about your dialysis care. They can also refer you to the other services we offer if needed (eg the venous access team, psychology service or citizens advice bureau).

Every month your NN will monitor your blood test results alongside your consultant and renal dietician and discuss this with you.

Please tell your NN if you have:

- a change in any of your medicines,

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- any admissions to hospital or other hospital appointments
- any tests or investigations coming up.

4C: Consultant cover

Consultants visit the units one to two times a week to coordinate care with the team – they run weekly clinics at a specific time. When starting haemodialysis, you will be seen by your dialysis consultant in the first available clinic and then every six months.



Your consultant will communicate with your named nurse before your clinic to discuss any dialysis related problems. Extra appointments can be scheduled if needed, for example if you have been in hospital.

The dialysis unit is an out-patient area and a consultant is not always present. If you would like to see a consultant in clinic to help with a dialysis related problem, please speak to your NN.

4D: Medical advice

- If you feel unwell while in the unit, your nurse will assess you and seek advice from the renal team at the RFH.
- If you are too unwell to attend dialysis, please call your unit for advice or visit the RFH emergency department.
- If you do need to visit an emergency department for a dialysis-related problem, please do still try to come to the RFH emergency department.
- For less urgent health problems, or if you are running out of some of your medications, please visit and speak to your GP.

Kidney patients are prone to infection

Patients with kidney disease tend to be more prone to infection and are less able to fight it than other people. Infection is now one of the biggest problems for renal patients; they can be serious and even fatal. Data from the COVID-19 pandemic demonstrates significantly lower rates of COVID-19 infection in patients having peritoneal dialysis compared to in-centre haemodialysis. This may be because of the need to attend hospital three times a week in haemodialysis patients.

To protect you against infection we advise:

- Considering peritoneal dialysis or home haemodialysis as your choice of renal replacement therapy.
- Having a fistula rather than a line to perform HD.
- Cutting down on salt and fluid if your nurse or doctor has told you to as this will help avoid infections in the chest.

We also advise you to have the following vaccinations every year:

- Hepatitis B
- Influenza (flu)
- Pneumovax® (only required once).

As patients with kidney disease are vulnerable to COVID-19 infection, we expect all patients to wear a face mask from the moment they leave the house, on public transport and during their stay in the unit. This is for protection of both staff and patients and we are thankful for your cooperation. Patients with suspected or diagnosed COVID-19 should travel separately and in their own transport if possible and may be asked to change appointment time or unit location to facilitate effective isolation.

Myth buster

Some people are worried about getting flu after having the flu vaccination; this is not possible because it does not contain any live flu viruses. You may have a tender area where the vaccine was given as the body develops immunity to this years' virus,

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which will protect you from what can be a life threatening illness for renal patients.

Holiday dialysis

If you decide to go on holiday, you need to identify where you want to dialyse too. Contact the unit you want to dialyse in and they will explain their procedures to you. Your named nurse will help get all the information together that the holiday unit needs for you to arrange your dialysis. It is your responsibility to forward this information to your accepting holiday unit. There is a holiday letter that you will have to sign before your departure and on your return you may have to dialyse at any of other units where isolation slots are available. When you return, you may need to dialyse in isolation for eight weeks and we may suspend you from the transplant list to ensure you have not picked up an infection while abroad.

4E: What else do we do?

Dietitians

This is a team of specialised renal dieticians. They're here to help you make any changes to your diet necessary to help manage your kidney disease. If your nurse or doctor feels you would benefit from our services they will refer you. However if you think you would benefit, please ask your named nurse for more information.

Psychology service

This service is for patients with psychological issues arising from their kidney disease and its treatment. It aims to help patients adjust to the emotional stresses and strain. They are unable to prescribe any medications, but are able to provide a brief therapy service. Nursing staff and doctors can refer you, or you can contact them on: 020 7794 0500 ext 37571.

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Royal Free Hospital Kidney Patients Association (RFHKPA)

This is a charity for the benefit of RFH renal patients. They champion issues on behalf of patients, provide support and organise social events. A newsletter is published on a quarterly basis. You can contact them by emailing: rfhkpa@gmail.com

Citizen's Advice Bureau

Camden CAB run clinics at our Tottenham and St Pancras sites. It is available to all renal patients who wish for advice on various issues such as debt, benefits, housing issues, employment and immigration. To make an appointment please contact 020 7397 0673 or: renal@camdenservice.org.uk.

Frailty

Frailty is a health state related to the ageing process in which the body systems gradually lose in-built reserves. This service is for a group of patients who may require additional support as they get older. The frailty lead nurse will work with your named nurse to assess your needs depending on your level of frailty. Please ask your named nurse for more information.

Palliative care

This is a team of specialised palliative care nurses, doctors, occupational therapists and physiotherapists. They take an approach that concentrates on providing quality of life for people with advanced illness and support for them and their families. They aim to identify and address physical, emotional and practical issues and end of life care issues where appropriate. Nursing staff or doctors can refer you.

Renal Patient View (RPV)

An online resource that allows you to securely access some of the information found in your notes, such as blood test results, allowing you to become more involved in your care. Talk to your named nurse if you are interested.

Peer support

Sometimes it is helpful to discuss things with people who have been through a similar experience and/or who share a similar lifestyle, belief system or language as yourself. The peer support team can put you in touch with another person with first-hand experience of kidney disease. Please contact: rf-tr.renalpeersupport@nhs.net if you are interested.

4F: Patient transport

Transport eligibility

We encourage all patients to make their own way to dialysis.

The NHS has universal eligibility criteria for transport that you will be assessed against to make the process fair and safe. All patient transport needs are assessed and you will have transport if you need it.

The transport team will be responsible for assessing if you meet the criteria within the first two weeks of dialysis.

If you meet the patient transport criteria

Your transport will pick you up before your dialysis treatment and drop you home afterwards. The type of transport that you get will depend on your current mobility and health which will change over time.

Most patients will share transport, so there will be delays in the journey as several are picked up and dropped off. The patient transport service is provided by an external company. The transport provider's aim is to pick you up within 60 minutes of your treatment time.

If you don't meet the patient transport criteria

You will need to make your own way to the dialysis unit. All of our units are accessible by public transport, as detailed later on. Other alternatives include driving yourself or asking a friend or relative to escort you.

If you feel one of our other units would be easier for you to travel to, speak to your named nurse.

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If you are on a lower income you may be eligible to have your travel fees refunded; please ask your named nurse for more information.

You may also be eligible for a 'Freedom Pass' which entitles you to free travel around London. Find out more here:
www.londoncouncils.gov.uk/services/freedom-pass

4G: Behaviour

We understand that attending the clinic for dialysis treatments can be stressful, frustrating and tiring. **Most people who attend dialysis are polite and co-operative and we thank you for your patience and understanding.**

The following behaviours are not acceptable. They have an adverse effect and distress our staff and disrupt the treatment of other patients:

- shouting, threatening or abusive language
- racist, sexist or other discriminatory language
- harassment of patients or staff
- any physical assault on patients or staff
- the abuse of alcohol or drugs in the dialysis unit
- damaging equipment or the unit itself

Incidents of verbal or physical abuse will be reported and dealt with by security or the police as required. You may be asked to leave the unit if you are behaving inappropriately and will be advised to attend the emergency department for assessment for emergency dialysis. Persistent or severe incidents may lead to prosecution, relocation of treatment to another site or a shift or withdrawal of treatment, as per trust policy. CCTV cameras are in operation 24 hours a day throughout the trust and are controlled by security staff.

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4H: Compliments and complaints

If you would like to share a positive experience or feedback on any aspect of your care, please speak to the person in charge of the ward, clinic or department. Alternatively you can email rf.pals@nhs.net.

If you are unhappy with any aspect of your patient experience please speak to the person in charge of the ward or clinic. We want all of our patients to have the best experience possible with us and our staff will do their best to resolve any issues raised. If you are unable to resolve an issue with the nurse in charge, you can ask to speak to the ward manager or matron.

You can also contact our patient advice and liaison service (PALS) on **020 7472 6446** or **020 7472 6447** or email rfh.pals@nhs.net. They will be happy to provide advice on and support with any aspect of your hospital experience. Alternatively, you can email the complaints team on rf.complaints@nhs.net.

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4I: How to get to: Barnet Dialysis Unit

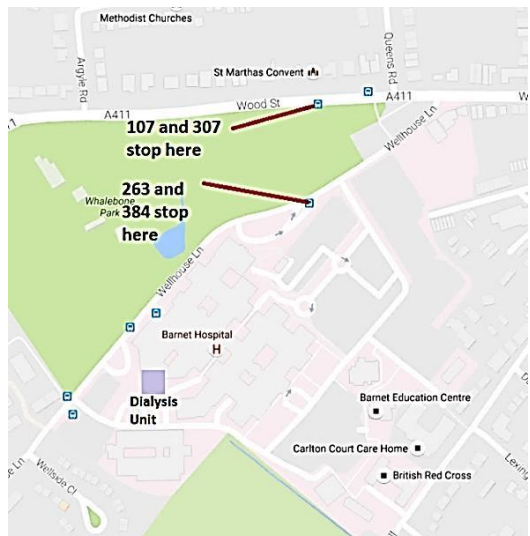
Barnet Hospital,
Wellhouse Lane,
Barnet, EN5 3DJ
Tel. 020 8216 4955/6
Opening hours: 7.30am-1am (the following morning)

Tube: High Barnet tube (Northern Line) is the nearest station, a 25 minute walk away or a 10 minute bus ride on the 263, 107 or 307.

Train: New Barnet is the nearest train station, on the Thameslink railway line from Moorgate to Welwyn Garden City. It is a 10 minute bus ride from here using 107 or 384, 307 stops nearby.

Bus: The 384 and 263 buses stop at the hospital or the 107 and 307 buses stop on Wood Street which is nearby.

Parking: Free parking is available for dialysis patients. Please talk to our unit receptionists if you need a parking permit.



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4I: How to get to: Edgware Kidney Care Centre

Edgware Community Hospital,
Burnt Oak Broadway,
Edgware, HA8 0AD
Tel: 020 8732 4164/5

Opening hours: 7.30am-1am (the following morning).

Tube: Edgware tube (Northern Line) is the nearest underground station, a 10 minute walk away. You can also get the 288 bus from the station which takes around 10 minutes. Burnt Oak Station is also nearby, a 15 minute walk or 10 minute bus ride (302 and 305).

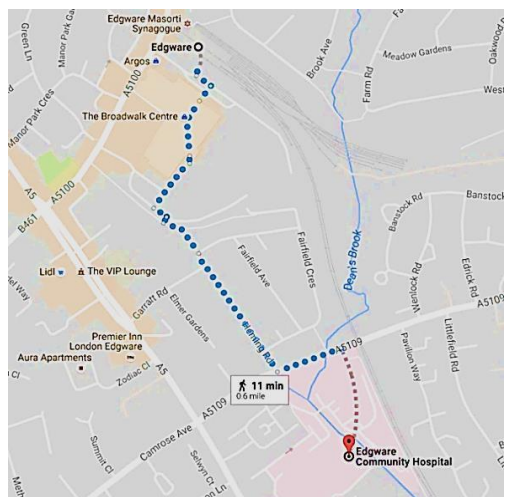
Train: Mill Hill Broadway is the nearest train station, served by Thameslink. The station is a 15 minute bus ride away (303 bus).

Bus: 32, 142, 204, 288, 251, 292, 614, 644, N5 and N64 all stop outside Edgware Community Hospital on Burnt Oak Broadway.

Parking: There is free parking for all dialysis patients. Please talk to our unit receptionists if you need a parking permit.

Walking from Edgware tube:

This takes about 11 minutes. Exit the station and walk through the Broadwalk Centre, exit onto Church Way. Walk along and turn right onto Heming Road, then turn left onto Deansbrook Road, the hospital is on your right.



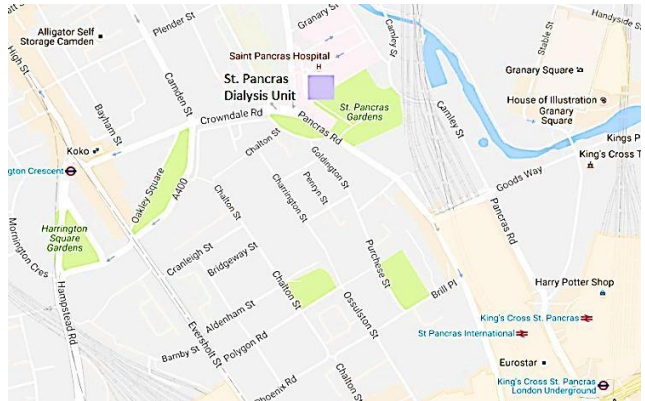
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4J: How to get to: St. Pancras Kidney and Diabetes Centre

St Pancras Hospital,
4 St Pancras Way,
London, NW1 0PE
Tel: 020 3758 2030

Opening hours:
7.30am-1am (the
following morning).

Tube: Mornington Crescent (Northern line) and King's Cross St. Pancras (Victoria, Northern, Hammersmith and City, Circle and District lines) are the nearest underground stations, both a short walk away (8-12 minutes).



Train: King's Cross St. Pancras is the nearest train station.

Bus: 46 and 214 stop nearby on St. Pancras road.

Parking: We have limited parking available and recommend using public transport. Please ask reception staff about permits.



Walking from King's Cross St. Pancras: Walk onto St. Pancras Road, continue onto Camley Street and turn left on Granary Street. St. Pancras Hospital and the dialysis unit is on the left.

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4I: How to get to: Tottenham Hale Kidney and Diabetes Centre

5-7 Daneland Walk, Hale Village, Ferry Lane, London, N17 9FE
Tel: 020 7830 2747

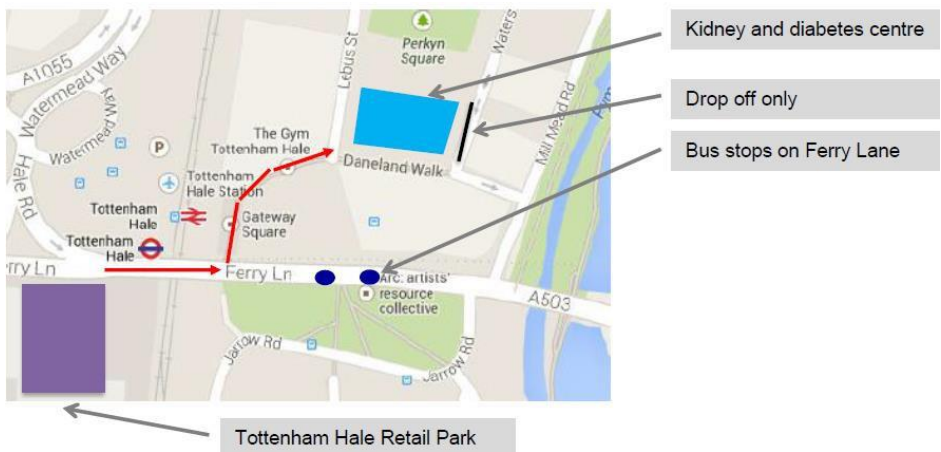
Tube: Tottenham Hale (Victoria Line) is the nearest underground station, a 2 minute walk away.

Train: West Anglian Main Line between Liverpool Street and Stanstead Airport, Cambridge, King's Lynn and Hertford East. All trains run between Liverpool Street and Tottenham Hale.

Bus: 192, 41, 123, 230, W4, N73 and N41. These are all accessible via the new bus terminal at Tottenham Hale.

Parking: Free parking is available for all dialysis patients. Please talk to our unit receptionists about parking permits.

Walking route from Tottenham Hale station/retail park: Turn left onto Ferry Lane and follow the footpath over the railway bridge. Take the first left into Hale Village, walk past Tesco express and the unit is on the left on Daneland walk.



4J – Contact details

Royal Free London switchboard

Tel: **020 7794 0500** followed by extension:

- **Barnet Dialysis Unit: Ext 64955**
- **Edgware Kidney Care Centre: Ext 24160**
- **St. Pancras Kidney and Diabetes Centre: Ext 82030**
- **Tottenham Hale Kidney and Diabetes Centre: Ext 50500**

Planning ahead

Haemodialysis has undoubtedly been a success story and has improved people's quality and length of life. However as some patients become older they become frailer. Frailty is a recognised health state related to the ageing process. Around 10% of people aged 65 or over have frailty, rising to between a quarter to a half of those aged over 85. This means people who are frail find it harder to overcome health challenges and to tolerate dialysis without frequent admissions to hospital.

In the renal unit we routinely assess your frailty by using an internationally recognised method called Rockwood's frailty scale. If you are approaching a frailty score of seven then you will be approached to ensure we have asked 'what matters to you', and to ask if you would like to engage in a conversation about your wishes and preferences for the future. The importance of this is that we know there can be times in your life when you think about the consequences of becoming seriously ill and it is important that we know what you would want for your treatment and who we should involve in your care.

If you would like to discuss your future care and wishes at any point though please do let your named nurse or consultant know. There is a frailty lead nurse who will be available to help you and your named nurse (Monday to Friday 9am-5pm).

Across London there is Co-ordinate My Care (CMC). This is an NHS service that records your wishes shares them electronically with all the multidisciplinary professionals who will be involved, so they can put your wishes at the centre of your care. You can read about it here: www.coordinatemycare.co.uk/for-patients/. If we discuss your future care with you, you can expect to be offered the opportunity to record your wishes and preferences on this service.

More information

For more information about the kidney services we offer at the Royal Free London, please visit our website:

www.royalfree.nhs.uk/services/services-a-z/kidney-services

Your feedback

If you have any feedback on this leaflet or for a list of references for it, please email: rf.communications@nhs.net

This leaflet is also available in large print. If you need this leaflet in another format – for example Braille, a language other than English or audio – please ask a member of staff.

© Royal Free London kidney services

Service: Kidney service

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www.royalfree.nhs.uk