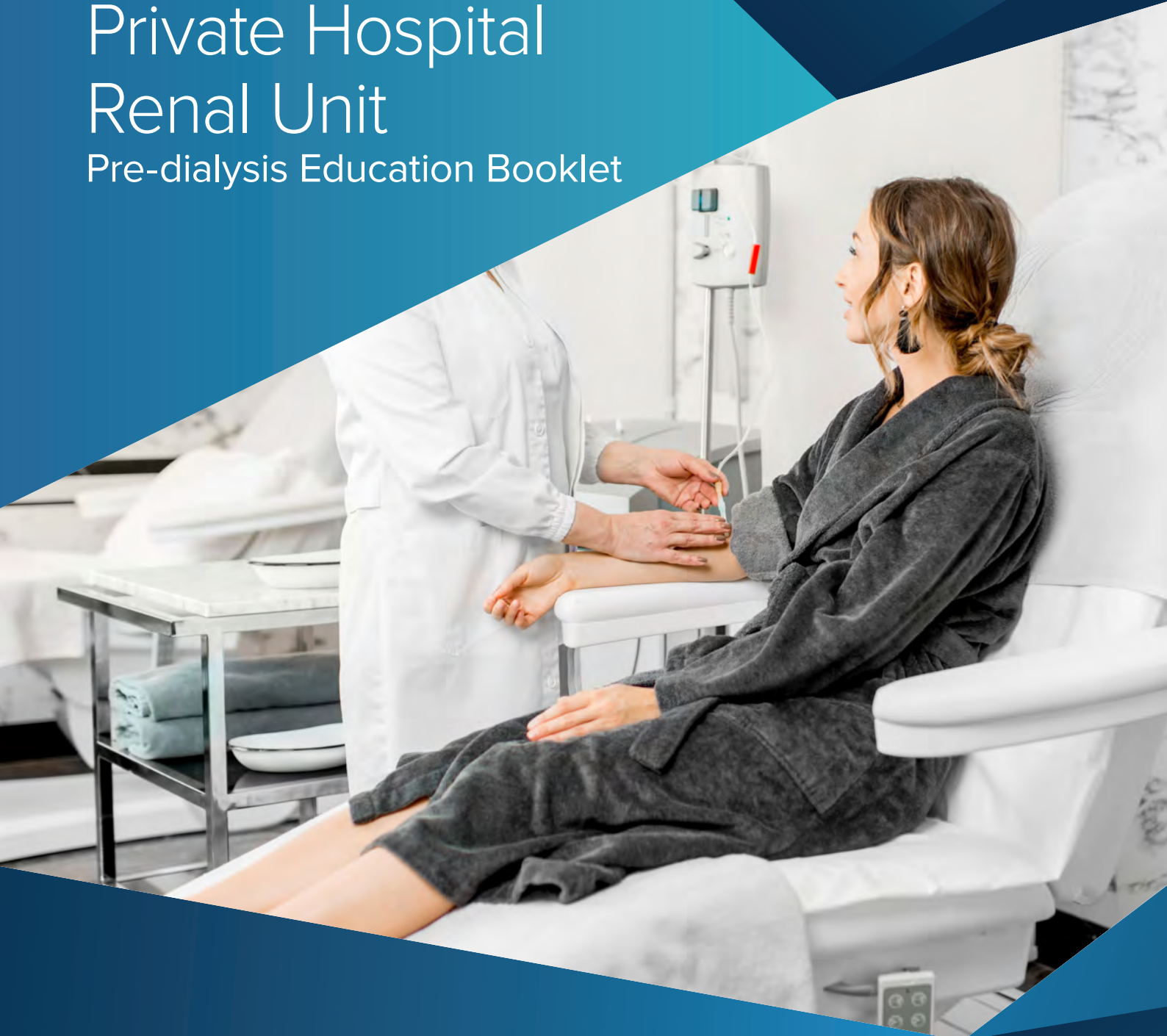


# Welcome to the Greenslopes Private Hospital Renal Unit

Pre-dialysis Education Booklet



# My healthcare rights

This is the second edition of the **Australian Charter of Healthcare Rights**.

These rights apply to all people in all places where health care is provided in Australia.

The Charter describes what you, or someone you care for, can expect when receiving health care.



## I have a right to:

### Access

- Healthcare services and treatment that meets my needs

### Safety

- Receive safe and high quality health care that meets national standards
- Be cared for in an environment that is safe and makes me feel safe

### Respect

- Be treated as an individual, and with dignity and respect
- Have my culture, identity, beliefs and choices recognised and respected

### Partnership

- Ask questions and be involved in open and honest communication
- Make decisions with my healthcare provider, to the extent that I choose and am able to
- Include the people that I want in planning and decision-making

### Information

- Clear information about my condition, the possible benefits and risks of different tests and treatments, so I can give my informed consent
- Receive information about services, waiting times and costs
- Be given assistance, when I need it, to help me to understand and use health information
- Access my health information
- Be told if something has gone wrong during my health care, how it happened, how it may affect me and what is being done to make care safe

### Privacy

- Have my personal privacy respected
- Have information about me and my health kept secure and confidential

### Give feedback

- Provide feedback or make a complaint without it affecting the way that I am treated
- Have my concerns addressed in a transparent and timely way
- Share my experience and participate to improve the quality of care and health services

# The Ramsay Rule for Patient Safety

The Ramsay Rule is about keeping our patients safe by partnering with you and your family in Care. Our commitment is to provide excellent care to our patients by focusing on your safety. The Ramsay Rule helps us to do this.

## When to Activate the Ramsay Rule

**Patients:** When you are concerned about a change in your condition, feel that you may be getting worse or feel that your concerns have not been followed up.

**Families & Carers:** You are concerned that your loved one is looking unwell, getting worse or their behavior is unusual for them.

You know yourself or your loved one best. So if you are worried, follow these three simple steps to alert us of your concerns.

## How to Activate the Ramsay Rule

Follow these steps to raise your concerns:

1. Talk to the Nurse, Doctor or Midwife regarding your concerns; and if you are not satisfied that your concerns have been addressed,
2. Ask to talk to the Nurse in Charge of the shift; and if you are still concerned then you or a family member or carer can,
3. Activate the "Ramsay Rule" by ringing this phone number 3394 7111. A Ramsay Rule nurse or doctor will talk to you and arrange a review of the patient.

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# World-class treatment is closer than you think.

Caring for the community since 1942.

[greenslopesprivate.com.au](https://greenslopesprivate.com.au)

## About Greenslopes Private Hospital

Greenslopes Private Hospital is proud to be Australia's leading private teaching hospital, owned and operated by Ramsay Health Care. Located on Brisbane's south side just 5km from the CBD, we are dedicated to growing and investing in new facilities and attracting the best clinical teams to provide high quality treatment.

We offer around-the-clock care across all 32 specialty areas, from our 24/7 Emergency Centre and leading cardiac care centre, to our modern maternity ward and expanded robotic surgical unit. Many of the experienced specialists working on site are leaders in their field and work across both the public and private sectors.

Our commitment to quality and safety for our patients, staff and visitors is our highest priority. As part of Ramsay Health Care we implement a number of programs and initiatives that support national accreditation and safety standards.

## About Ramsay Health Care

Ramsay Health Care is a global health care company with a reputation for operating high- quality services and delivering excellent patient care.

Established in Sydney, Australia, in 1964, by Paul Ramsay AO, Ramsay Health Care has more than 50 years of experience in providing acute health care services. Today, the Company delivers a range of acute and primary healthcare services from 480 facilities across 11 countries, making it one of the largest and most diverse private healthcare companies in the world.

Ramsay facilities cater for a broad range of health care needs from primary care to highly complex surgery, as well mental health care and rehabilitation. The company employs more than 77,000 staff and treats 8.5 million patients in its hospitals and primary care clinics located in Australia, France, the United Kingdom, Sweden, Norway, Denmark, Germany, Italy, Malaysia, Indonesia and Hong Kong.

Ramsay is well-respected throughout the global health care industry for its quality health care operations and excellent record in hospital management and patient care. Focusing on relationships with staff and doctors - and delivering high quality outcomes for patients - has been at the forefront of its success.

Ramsay focuses on maintaining the highest standards of quality and safety, being an employer of choice, and operating its business according to The Ramsay Way philosophy: "People Caring for People".



## Foreword

Greenslopes Private Hospital is owned and operated by Ramsay Health Care and is renowned as a world-class tertiary medical facility offering the latest treatments and first-class service to our patients.

Hospital fast facts:

- Australia's largest private teaching hospital
- 32 specialty units on offer
- 2500 staff employed
- Operating theatres
- Brisbane's first 24 hour pharmacy
- 24/7 Emergency Centre, ICU, CCU, Oncology, Cardiology and Maternity.

## Kidneys are Important

### Functions of the kidneys

- Remove excess waste products from the body
- Remove excess fluid from the body
- Regulate fluid and electrolytes needed by the body
- Regulate blood pressure
- Stimulate the production of red blood cells
- Calcium and phosphate balance which affects bone structure

## What happens when the kidneys don't do their job?

You may start to feel any one or more of the following:

- Swelling of the face or feet
- Fatigue
- Nausea
- Vomiting
- Headache
- Blurred vision
- Itchiness
- Shortness of breath
- Loss of appetite
- Urine output may decrease or stop altogether
- Blood test results will show abnormalities:
  - eg. urea/creatinine/eGFR

## Behaviour changes

Can be related to your uraemia

These symptoms can include:

- Irritability
- Depression
- Anger
- Poor Memory
- Lack of motivation

After you commence treatment you may find that these symptoms disappear and **life is worth living** again.

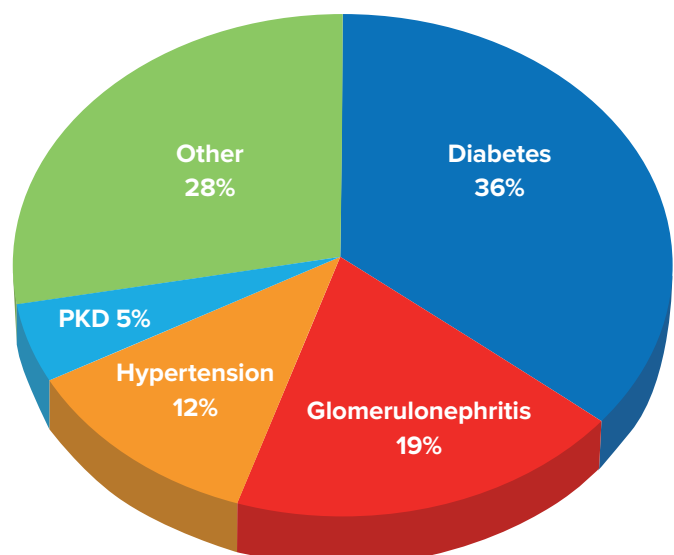
## Who is at risk?

1 in 3 Australians is at an increased risk of developing CKD

- are 60 years or older
- have diabetes
- have a family history of kidney disease
- have established heart problems (heart failure or heart attack) and/or have had a stroke
- have high blood pressure
- are obese (Body mass index > 30)
- are a smoker
- are of Aboriginal or Torres Strait Islander origin

### Causes of renal failure

- Diabetes
- Glomerulonephritis
- High blood pressure
- Polycystic kidney disease
- Other Causes:
  - Reflux nephropathy
  - Analgesic nephropathy
  - Auto immune diseases
  - Trauma
  - Infection
  - Kidney stones
  - Congenital abnormalities
  - Obstructions of the urinary system



## When do I need to start treatment?

- Symptoms/feeling unwell
- Abnormal blood test results
- Your nephrologist will be closely monitoring your kidney function and will be the person who determines when dialysis is needed.
- Commence treatment when your nephrologist advises you to. A delay can significantly impact the success of dialysis.

## What are the options?

- Renal replacement therapy
  - Dialysis
    - ▶ Haemodialysis
      - ❖ In-center
      - ❖ At home
    - ▶ Peritoneal dialysis
  - Transplantation
  - Conservative care

## Informed decision making ...

The best choice of treatment for ANY condition is one you have made with a GOOD UNDERSTANDING of the treatment itself, consideration of how it will affect you and your lifestyle, and one your doctors and nurses believe is suitable for you.

## Dialysis

Dialysis is a treatment that does some of the things normally done by healthy kidneys. Dialysis is needed when your kidneys don't work well enough to keep you healthy.

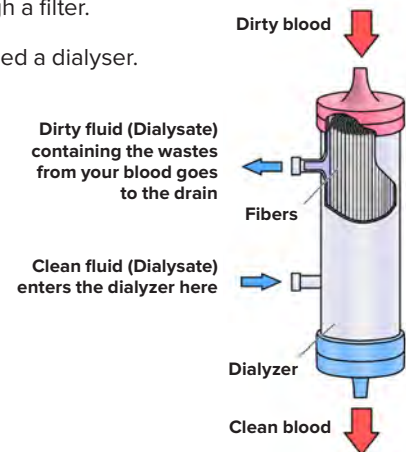
Dialysis:

- removes waste products, salt and extra water to prevent them from building up in the body
- helps keep a safe level of certain chemicals in your blood, such as potassium, sodium, bicarbonate, calcium and phosphorus
- helps to control blood pressure.

## Haemodialysis

Haemodialysis is a process of removing toxins and excess fluid from the blood and tissues by continually circulating your blood through a filter.

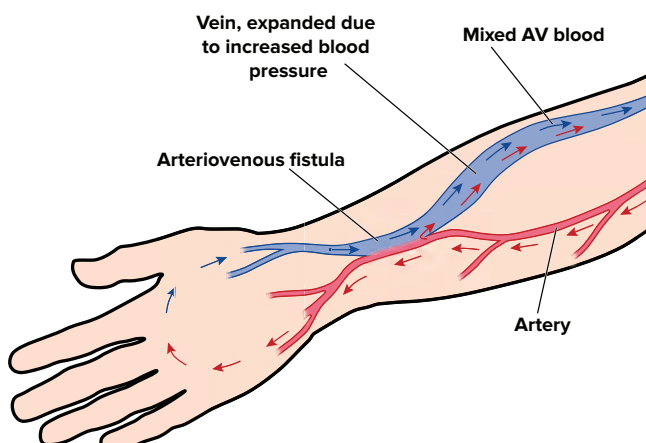
- The filter is called a dialyser.



## Fistula

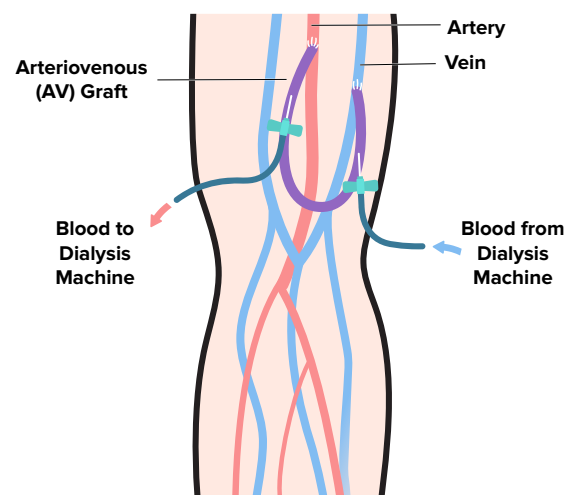
To rapidly remove the blood from your body a vascular surgeon needs to make an access into your blood vessels. This involves surgery. Ideally, an access is made by joining an artery to a vein under the skin to make a bigger blood vessel. This type of access is called a fistula.

A fistula is considered the first and best choice for haemodialysis access, because it has the lowest chance of infection.



## Graft

However, if your blood vessels are not adequate for a fistula, the doctor may use a soft plastic tube to join an artery and a vein under your skin. This is called a graft.





## With needles in place

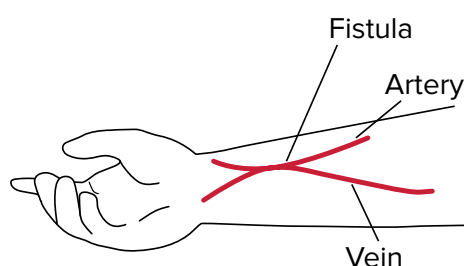


## Just the Facts: Vascular Access

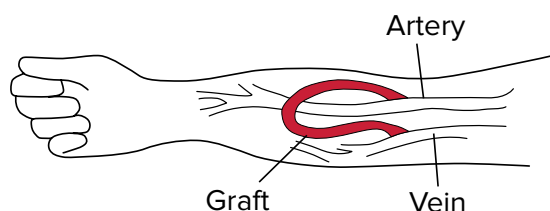
### What is a vascular access?

A vascular access is a way to reach the blood vessels for haemodialysis. There are 3 types:

1. A **fistula** is your artery and vein sewed together. Blood from the artery makes the vein thicker so it can be used for dialysis. A fistula is often the longest-lasting access.



2. A **graft** is a piece of man-made blood vessel. It is used to connect an artery and vein together.



3. A **catheter** is a plastic tube placed into a vein in the neck, chest or groin. Catheters may be used for a short time while a fistula or graft is healing. In some patients with very poor veins and arteries, a permanent catheter may be placed in the chest.

### Why is a vascular access important to me?

Your access is your dialysis lifeline. You have only a few sites for vascular access. It is important to care for your access so it will last as long as possible.

### What happens in access surgery?

A fistula or graft is most often placed in an arm, but sometimes in a leg. Your doctor will decide which type of access will work best for you. Ask your doctor if a fistula will work for you.

Surgery for a fistula or graft is done with local or general anaesthesia on an outpatient basis. Medication may be needed for mild to moderate pain. Sometimes swelling of the arm may occur for a few days or weeks.

### When can my access be used?

It is best to create an access before it is needed for dialysis. If a new access is used too soon after surgery, it can be damaged. A new fistula should ideally not be used for 3 to 4 months after surgery. A new graft should not be used for 3 to 6 weeks.

### What should I do after surgery?

Exercise that brings more blood flow to the arm can help a fistula to work better. Squeezing a rubber ball many times a day can help the fistula mature, or become ready to use.



## How can I keep my access working?

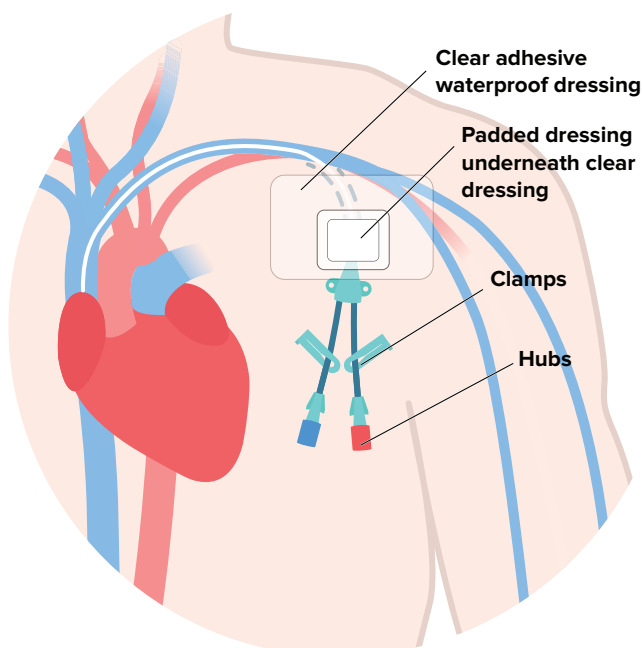
Problem	How can I prevent it?	What should I ask?
I want to avoid infection	<ul style="list-style-type: none"> <li>Keep your access clean.</li> <li>Be sure your access is washed with antibacterial soap and iodine or alcohol before it is used for dialysis.</li> <li>Tell the nurse if your access is warm, red, has pus, or you have a fever.</li> </ul>	<ul style="list-style-type: none"> <li>How should I clean my access?</li> <li>Do I need to cover my access in the bath or shower?</li> <li>Can I swim in a pool or lake?</li> <li>Who should I call if I have an access problem?</li> </ul>
I want to avoid blockage	<ul style="list-style-type: none"> <li>Learn how to feel the thrill (vibration) and listen for the bruit (buzzing) in your access. Tell the nurse if the thrill or bruit changes.</li> <li>Tell the nurse if your hand is cold, blue, numb, painful, or hard to move.</li> </ul>	<ul style="list-style-type: none"> <li>Can my doctor or nurse tell that my access is not working well? How do they know?</li> <li>If my access is blocked, can it be fixed? How?</li> </ul>
I don't want to injure my access	<ul style="list-style-type: none"> <li>Learn how needle sites are rotated on your access. Be sure the right site is used at each treatment.</li> <li>Do not carry heavy weight across the access.</li> <li>Avoid pressure on the access during sleep.</li> <li>Avoid tight clothing.</li> <li>No blood pressure/blood drawing from the fistula arm.</li> <li>Do not wear a wrist watch on fistula arm.</li> </ul>	<ul style="list-style-type: none"> <li>What is the needle rotation pattern for my access?</li> <li>How much weight can I carry safely after surgery? When can I carry more?</li> <li>Can I wear a watch or hang a purse over my access arm?</li> <li>How can I avoid sleeping on my access arm?</li> </ul>

## Where can I get more information about vascular access?

- Visit Kidney School™ Module 8: Vascular Access: A Lifeline for Dialysis at: [www.kidneyschool.org](http://www.kidneyschool.org)
- Focus on Fistulas/Your Access: A Choice for a Better Life, In Control. Vol 1 #1, March 2004. For a free copy go to: [www.lifeoptions.org](http://www.lifeoptions.org)

## Permacath

Sometimes an access is made with a thin plastic tube called a catheter, which is inserted into a large vein in the neck. This type of access is usually temporary, but may be used for long-term treatment only if a fistula or graft cannot be made.



## Haemodialysis treatment schedule

- Most people dialyse three times a week.
- Each treatment is usually 4 to 5 hours.
- Your nephrologists and dialysis team will take monthly blood tests to determine the best treatment schedule for you.

### In centre haemodialysis:

Attend on: Monday/Wednesday/Friday  
OR  
Tuesday/Thursday/Saturday

- Given an appointment time.

### Home haemodialysis:

- You can choose when to do dialysis
- You may choose to do dialysis 'overnight'
- Usually a family member and the patient are trained to do dialysis treatment.
- Training takes 1-2 months and can be done at home dialysis training centres. RBH, PAH.
- You do not need to pay for the machine!
- Water and electricity subsidies are available. (Contact your home dialysis training centre for further information).
- Support and technical assistance is always available over the phone.

## Pros and cons of In Centre Haemodialysis

### Advantages

- Regular contact with other haemodialysis patients and staff.
- 3 treatments/week (4 days off).
- No need to keep equipment/supplies at home.
- Immediate access to medical help during therapy.
- Regular medical review and efficacy of treatment (by nephrologist and nursing staff).
- Emergency medical care (if needed).

### Disadvantages

- Travel to centre/unit 3 times a week, on a fixed schedule.
- Need for a permanent access, usually in your arm.
- Insertion of 2 needles for each treatment.
- Restricted diet/limited fluid intake.
- Possible discomfort such as headache, nausea, leg cramps or tiredness.

### Passing the time during dialysis sessions ...

- People on haemodialysis spend many hours each week attached to a dialysis machine. It is important that you figure out ways to pass the time, so you do not become bored!
- Some people like to watch TV,
- Some read,
- Some chat,
- Some listen to music,
- Some sleep
- Some work
- Still others like to use their laptop computer.
- You can do anything that can be done one handed!
- During your haemodialysis session you will be offered a snack meal. This includes cake, biscuits, a sandwich, tea/coffee. If you have special dietary requirements these can be arranged.

## Transport to treatment

Doing haemodialysis in-centre means that you need to have some means of transportation ... Travel options start with driving yourself to dialysis or asking friends or family to drive you. Other options are using taxis, community transport, public transport, or ambulance transport.

### Driving to Dialysis

In the early stages of treatment it is recommended that you do not drive yourself to and from dialysis. As you get used to dialysis you may begin to drive yourself to and from treatment.

Parking at Greenslopes Private Hospital is free for dialysis patients.

### Taxi

Taxi transport can be costly. However you may be eligible for a subsidy. Your GP will determine if you are eligible and will do the necessary paperwork. The taxi subsidy scheme subsidizes taxi travel — half of the total fare, up to a maximum of \$25 per trip — for people with severe disabilities.

To be eligible you must be a permanent resident of Queensland and fully meet at least 1 of the 6 eligibility criteria listed below:

1. Physical disability requiring dependence on a wheelchair for all mobility outside the home.
2. Severe ambulatory problem that cannot functionally be improved and restricts walking to an extremely limited distance.
3. Total loss of vision or severe visual impairment (both eyes).
4. Severe and uncontrollable epilepsy with seizures involving loss of consciousness.
5. Intellectual impairment or dementia resulting in the need to be accompanied by another person at all times for travel on public transport.
6. Severe emotional and/or behaviour disorders with a level of disorganisation resulting in the need to be accompanied by another person at all times for travel on public transport.

### DVA transport

The Department of Veterans Affairs (DVA) provides benefits and services to veterans and their dependents for requirements related to injury or illness. Eligibility for benefits is dependent on the location and time of service. Gold card holders are eligible for free transport to and from dialysis treatments.

### Ambulance (non-urgent)

Ambulances are usually restricted to those who are severely restricted with mobility or reside in nursing homes. This service is free. We are fortunate to have this service available. The downside of this service is that there can

be long wait periods for pick up post treatment and it is possible that you will need to do the 'tour of Brisbane' on your way to and from treatment as other patients are dropped off at their destinations along the route. Your nephrologist can authorise this service if needed.

### Community organisations

STAR Community Services has a personalised transport service for those who are not able to access public transport and/or do not have access to a private vehicle. It is a door-to-door transport service. STAR transport does not cover all areas of Brisbane. There are other community organisations that offer transport assistance. A search of the Internet will identify if there is one that services your area.

## Peritoneal dialysis

Peritoneal dialysis (PD) uses your peritoneal membrane (the lining of your abdomen) as the filter.

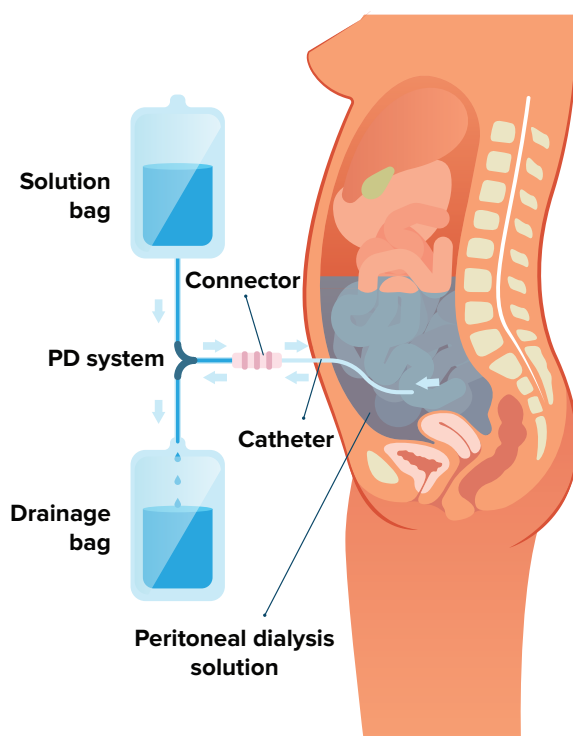
A soft tube called a catheter is surgically placed through the wall of your abdomen into the peritoneal cavity.



In peritoneal dialysis, the blood is cleaned inside the body. Special fluid called dialysate flows through the access catheter into the abdomen (called the peritoneal cavity).

The fluid stays in the peritoneal cavity and removes extra fluid and waste products from the blood. After a while, the dialysate containing the extra fluid and wastes is drained out through the catheter in the abdomen. This helps remove extra fluid and waste products from the blood. Then, new dialysate is placed back into the abdomen to continue the removal process. Each time fluid is removed and replaced, it is called an exchange.

### Principle of Peritoneal Dialysis



There are two main types of peritoneal dialysis:

### Continuous Ambulatory Peritoneal Dialysis

Continuous Ambulatory Peritoneal Dialysis (CAPD) is the only type of peritoneal dialysis done without machines. You do this yourself, usually four to five times a day at home and/or at work. You put a bag of dialysate (about 2L) into the peritoneal cavity through the catheter. The dialysate stays there four to five hours before it is drained back into the bag and thrown away. This is called an exchange. A new bag of dialysate is used each time you do an exchange. While the dialysate is in your peritoneal cavity, you can go about your usual activities at work, school or home.

- Usually 4 exchanges per day.
- Each exchange takes approximately 30 minutes.
- No machines required.

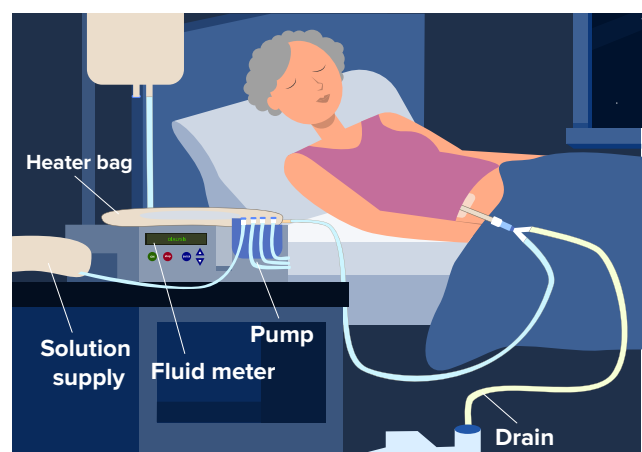


### Automated Peritoneal Dialysis (APD)

- Usually done overnight while you are sleeping.
- Usually no exchanges are needed through the day

APD is done at home, using a special machine called a cyclor.

This is similar to CAPD except that a number of cycles (exchanges) occur. Each cycle usually lasts 1-1/2 hours and exchanges are done throughout the night while you are asleep. In the morning you disconnect from the machine and generally do not have to perform any exchanges through the day.



## Pros and cons

### Advantages

- Fix your treatment around your lifestyle
- Independence
- Less restricted diet
- Less visits to unit
- No needles
- Continuous therapy is 'gentler' and more like your natural kidney function
- Portable and flexible

### Disadvantages

- Exchanges need to be made daily
- Permanent catheter
- Some risk of infection
- Slightly enlarged abdomen (due to carrying fluid)
- Storage space required in your home

## Transplantation

- A healthy kidney from another person is placed into your body.
- The new kidney performs the functions of your own non-working kidneys.
- Dialysis will be required while awaiting your transplant.
- Hospital stay 3 to 10 days. Like any major operation may be some pain afterwards.
- Your body will consider your new kidney as 'foreign'. To avoid it being 'rejected' you will need to take medications (steroids and immunosuppressive drugs).

You **MUST** take these medications as prescribed.

10 to 15% of all organ transplants are lost to rejection, often due to 'poor compliance' with medications.

## Am I eligible for transplantation?

- Relatively good health.  
If you have other major medical problems such as severe heart and vascular disease, or cancer, transplantation may not be recommended as the likelihood of complications and poor success rate is high.
- Willing to undergo procedures involved:
  - pre transplantation work up
  - surgery
  - compliance with medications post transplant
- Talk to your nephrologist about your suitability for transplantation. If they believe you are suitable the sooner you get your name on the waiting list the sooner you might get 'the call'.

## Pros and cons

### Advantages

- Closest alternative to having your own kidneys
- No dialysis treatment
- Fewer fluid and diet restrictions
- Maintain normal schedule –fewer visits to clinic
- Feel healthier and have more energy
- Ability to work full time - no schedules to interrupt

### Disadvantages

- Stress of waiting for a match
- Risks associated with major surgery
- Rejection
- Daily medication which can cause side effects
- Greater susceptibility to illness
- Possible changes in appearance

### Kidneys for transplant come from two types of donors

- **Deceased donors** – Some kidneys come from people whose families donate their organs after brain death.
- **Living donors** – A healthy living person can donate a kidney. Most living donors are relatives. But, neighbours, friends, and even strangers can donate. If someone is willing to donate, but is not a blood or tissue match for you, you may be able to trade donors. In a paired donation, your donor gives a kidney to someone else who needs one. Then his or her donor gives a kidney to you. All of the transplants are done on the same day so no one backs out. Some "chains" of paired kidney donation have helped dozens of people. Living donor kidneys tend to last longer than deceased donor kidneys.

## Conservative management

- Some patients may choose not to commence any treatment for their deteriorating kidney function. This will be in discussion with your family and nephrologist to ensure that you make an informed decision.
- Other terms for conservative management are palliative or supportive care.

**AIM:** to manage the symptoms of kidney failure with medications and fluid and dietary modifications only. Kidney function will continue to decline and there is a high chance that this will lead to your death. How long you will live is a question that your nephrologist might be able to answer.

A natural death from kidney failure does not hurt. As toxins build up in your blood, you will start to feel sleepy. Water building up in your blood can make it hard to breathe. You may want to have treatments that remove water but not toxins, to make you comfortable. An Advanced Directive is a way to say what you do and do not want for your healthcare in case you are not able to speak for yourself. We recommend to all patients that they complete an advance health care directive.



## Vaccines for People with Chronic Kidney Disease

People with chronic kidney disease have weakened immune systems. This means that they are more likely to get an infection. It is strongly recommended that you stay up to date with vaccinations.

## Prevention better than cure

### Influenza – the ‘Flu’

The flu is a virus that spreads when people cough or sneeze. It can cause:

- High fever and headache
- Muscle aches
- Cough, sore throat, stuffy nose
- Fatigue
- Ear or sinus infection
- Pneumonia (lung infection)

Each year the flu virus changes. *So, you need a new flu shot every year* – even if you had the flu last year.

### Hepatitis B Vaccination

- Hepatitis B infection can result in chronic liver disease, cirrhosis, liver cancer and ultimately death ...
- Hepatitis B vaccination highly effective in healthy individuals (95% protective antibody level)
- Vaccination less effective in patients already on dialysis and a protective anti-HB level develops in only 50% of cases
- Vaccination PRE dialysis is recommended. PLEASE discuss this with your nephrologist.

### COVID vaccination

\* To receive the best protection against serious illness or death from COVID-19 it is recommended to receive all prescribed doses for your age or individual health needs. Boosters are important to maintain protection.

## Food and fluid...

### Everyone is Unique



→ Diet and fluid intake **MAY** need to be modified ←

## To restrict or not restrict fluid ...

This question should be directed to your nephrologist.

The rule of thumb is that your fluid intake per day can equal the volume of urine you pass in 24 hours plus 500ml (fluid loss through sweat and the digestive system).

## How often should I see a dietitian?

- Pre dialysis
- After commencing dialysis
- Every 6 to 12 months if no changes or problems
- More regularly if:
  - Poor intake
  - Weight loss
  - Blood results not improving

## Nutrients to know

- Sodium
- Potassium
- Protein
- Calcium and phosphate

### Sodium

Sources of sodium, include processed foods, pre-prepared meals, tinned/packet soups, takeaway foods, hard cheeses, sauces...

Too much sodium will lead to fluid retention and increased blood pressure.

If you find food tastes bland without salt consider trying these alternatives: pepper, lemon, herbs, spices, garlic or onion ... DO NOT USE SALT SUBSTITUTES.

## Potassium

Found in almost all foods in varying amounts. Foods that are high in potassium include:

- Fruits: bananas, melons, oranges, apricots, mangoes
- Vegetables: tomatoes, broccoli, peas, beans, spinach
- Chocolates
- Nuts
- Meats and milk products
- Salt substitute products

High and low levels can be dangerous for your heart.  
MOST kidney patients need to restrict high potassium foods  
BUT not all...

## Protein

You need protein to stay healthy and fight off infections. It is important to include high quality protein in your diet. Sources of protein include meat, fish, eggs, dairy foods, nuts, legumes.



## Phosphate

Dairy foods, protein, nuts, chocolate, cola drinks contain high levels of phosphate.

High blood levels can weaken your bones, damage blood vessels and cause skin itchiness and headaches

SOME patients MAY need to take phosphate binders to keep their phosphate levels down.

## Blood test results explained

### Haemoglobin – aim for 100-130 g/L

Haemoglobin transports oxygen around the body. If your haemoglobin is low you may be breathless, light-headed, pale and have less energy than usual. If it is too high, you may experience headaches and a greater tendency to form blood clots during dialysis.

### Urea – aim for 22-30 mmol/L

Urea is a waste product created from the breakdown of protein. When the kidneys are not working properly the urea accumulates in the blood.

### Creatinine – < 700 m/mol/L

Creatinine is a waste product produced from muscle breakdown. Creatinine is higher in bigger people as they have more muscle mass.

### Phosphate – aim for < 1.6 mmol/L

A mineral which together with calcium keeps your bones strong and healthy. Too much phosphate causes itching and pain in the joints, such as the knees, elbows and ankles.

Calcium and phosphate bind together. If your phosphate is high your calcium will be low.

### Calcium – aim for 2.15-2.55 m/mol/L

Needed for healthy bones and teeth. Most of the cells in the body need calcium to work properly. Raised calcium levels may cause headaches, nausea, sore eyes, aching teeth, itchy skin, mood changes and confusion.

### Parathyroid hormone (PTH)

Helps control calcium, phosphorus, and vitamin D levels within the blood and bone. Kidney failure can cause the parathyroid glands to produce too much PTH.

### Potassium (K) – aim for 3.5 – 5.5 mmol/L

A mineral found in many foods. If your kidneys are healthy, they remove extra potassium from the blood. If your kidneys are damaged, the potassium level can rise and affect your heart. A low or high potassium level can cause an irregular heartbeat.

### Estimated Glomerular Filtration Rate (eGFR)

The best measure of your kidney function prior to commencing dialysis. It shows how well your kidneys are cleaning your blood.

eGFR is a formula that uses your creatinine, age, race, and sex. eGFR is used to divide chronic kidney disease into five stages. The result is about the same as your percent kidney function. So, an eGFR of 60 means you may have function that is 60% of normal.

Once your eGFR drops below 15 you are likely to need dialysis.

When you commence dialysis the eGFR is no longer a useful measure.

## Patient & visitor services

### ATM facility

An Automated Teller Machine (ATM) is located on the Lobby Level near the coffee shop.

### Chaplaincy and pastoral support services

Chaplaincy and Pastoral Support Services offer patients, staff, family and friends support and comfort in times of special need. This may be when a person feels lonely, distressed, anxious or simply needs someone to listen for a while. Chaplains also provide a ministry of prayer and sacraments to those who request it.

As a component of the holistic care at GPH this service is delivered through Chaplaincy Services and is managed by the Coordinating Chaplain. Chaplains are available to patients, staff and hospital volunteers as well as family members and friends. Chaplains can assist persons coping with loss and grief, and assist with changing circumstances.

The chaplaincy team represent most of the larger denominations of the Christian faith. Visits by religious leaders from other faith traditions can be arranged for you via the Coordinating Chaplain when requested by a patient or family member. Chaplains will treat information shared as confidential and will respect the views of all persons.

### Contact a Chaplain

Requests for a chaplain to visit a patient should be directed to the Coordinating Chaplain on phone extension 7733 or through the hospital switchboard. Bibles are also available on request.

### The Greenslopes Private Hospital Chapel

Open each day from dawn to dusk, the chapel is situated on Newdegate Street at the entrance road to the Emergency Centre where it provides a place of peace and quietness to anyone for private prayer and reflection.

Prayers are led by chaplaincy team members Monday to Friday at 9:00am. Prayers are open to the hospital community including staff, patients, their families and friends. Ecumenical services are offered to commemorate special occasions or anniversaries throughout the year and are publicised in hospital communications.

### Coffee shop

Hudsons Coffee is located on the Lobby Level of the hospital and is open 7 days a week, between 6.30am and 7.00pm Monday to Friday, and between 7.30am and 6.00pm Saturday and Sunday.

Hudsons Coffee also has an outlet on the Ground Floor of the Administration Building in the Greenslopes Specialty Clinics (previously the Outpatients Department) which is open between 8.00am and 3.00pm Monday to Friday. Hours may vary on public holidays.

### Interpreters and cultural needs

If an interpreter is required during your stay this can be arranged on admission by our staff. Greenslopes Private Hospital has patient information available in other languages, please discuss your needs with our staff.


Greenslopes Private staff recognise people from culturally and linguistically diverse backgrounds may have specific needs that require services to be delivered in a manner that is responsive and sensitive. If you have any specific religious or cultural needs you would like us to respect, please let us know.

## Internet access

### How to connect

1. Ensure your wireless enabled laptop or mobile device is turned on and has its wireless signal/switch activated.
2. Go to the available Wireless Network Connection List as displayed on your laptop or mobile device.
3. Click on WiFi@Ramsay and then click on the Connect button. Your Internet Browser will automatically open and you will be prompted with the 'Welcome to Ramsay WiFi' page as per the window below.
4. Select the appropriate option: Patient or Guest. The option that you select will display a second page where you can register for WiFi as shown in the windows below.
5. Enter your details as required. NB. Your MRN is created on admission and is usually on your wristband. Please enter all 10 characters of the MRN.
6. Review the Usage Policy and Terms and Conditions and tick the box to accept the terms of use. Accepting the terms and conditions is necessary if you want to use the WiFi facility.
7. Click on the LOGIN button to proceed to the internet.

Patient login page (Max. 3 devices)

  
**Ramsay**  
Health Care

Welcome to Ramsay WiFi


☐ I have read and understood the [Terms and Conditions](#) of using Ramsay WiFi.

☐ I would like to subscribe to HealthUp – Ramsay's one stop shop for all your health related information.

\* Required field

If you are having issues connecting, please contact ward reception

Guest login page (Max. 1 device)

  
**Ramsay**  
Health Care

Welcome to Ramsay WiFi

☐ I have read and understood the [Terms and Conditions](#) of using Ramsay WiFi.

☐ I would like to subscribe to HealthUp – Ramsay's one stop shop for all your health related information.

\* Required field

If you are having issues connecting, please contact ward reception




## Need more help?


### iPhone or iPad

1. On the Settings icon, select the Wi-Fi option and ensure that Wi-Fi is turned on.
2. Tap on **WiFi@Ramsay**.
3. Your internet browser will automatically appear to the 'Welcome to Ramsay WiFi page'.


### Android

1. Open your device's Settings app Settings. 
2. Tap on WiFi.
3. Turn WiFi on.
4. On the list of available WiFi networks, tap on **WiFi@Ramsay**
5. Once you're connected, your internet browser will automatically appear to the 'Welcome to Ramsay WiFi page'.

### Windows

1. Ensure WiFi is turned on. To do this, click on the Windows button . This may vary on different versions of Windows, but usually look like this: 
2. Select 'Settings'.
3. Select 'Network & Internet'.
4. Ensure WiFi has been set to On.
5. Your internet browser will automatically default to the 'Welcome to Ramsay WiFi page'.

### MacBook

1. Click on the WiFi icon: 
2. Ensure WiFi is turned On.
3. Click on **WiFi@Ramsay** from the WiFi listing.
4. Your internet browser will automatically default to the 'Welcome to Ramsay WiFi page'.

## Frequently Asked Questions

### What is wireless internet?

A way to connect to the internet within the hospital without consuming your mobile data.

### Who can connect to the Ramsay wireless network?

Ramsay Health Care patients with a patient identification number and visitors to our hospitals have access to the Ramsay WiFi network.

### WiFi security?

Ramsay Health Care takes all possible precautions to provide a secure WiFi connection. We also recommend that, where appropriate, you have robust and current Anti-Virus products installed on your devices.

### What are the terms & conditions?

The terms and conditions for use of the WiFi@Ramsay internet access can be found via the hyperlink on the landing page when entering your details.

## Assistance & Support

If you are having issues connecting, please contact ward staff or the Ward Reception Desk. Should you still have issues connecting to WiFi after following the instructions in this brochure and speaking with ward staff, our ward staff will reach out to Ramsay IT who will assist where possible.

## Devices Supported

Please note not all types of devices are supported. Devices that have had manufacturer security settings bypassed will not be permitted to access WiFi.

Ramsay allows a limited number of devices to be connected. Patients are currently permitted three, visitors one. These limits are fixed and cannot be increased on a per person basis.

## Zero Tolerance – Aggression & Violence

Staff, patients & visitors need to work & be cared for in a safe environment. Every person working in or utilising a Ramsay Health Care facility – staff, patients and visitors – has a right to personal safety.

Threatening, abusive or physically violent behaviour will not be accepted from anyone under any circumstances.

Any such acts will result in action being taken. Such action may include a:

- Prompt medical response where appropriate,
- A formal warning,
- Being asked to leave the premises or discharge from the facility,
- Utilisation of security services, &/or
- Police being notified & legal action implemented.

**It is never acceptable to abuse others.**

## Useful contact numbers

### GPH Renal Unit

07 3394 7512

### GPH Hospital

07 3394 7111

### QLD X-Ray

07 3421 0444

### GPH Emergency

07 3394 7654

### Precision Vascular Imaging

07 3847 9144

### Nephrologists:

Dr Andrew Bofinger	07 3324 0777
Dr Ann-Maree Craven	07 3414 3977
Dr Karen Herzig	07 3847 7331
Dr Dev Jegatheesan	07 3176 3258
Dr Omar Kaiser	07 3193 8999
Dr Gavin Lee	07 3193 0878
Dr Rhianna Miles	07 3397 0003

### Kidney Transplant Information

Contact Princess Alexandra Hospital on 07 3176 6963

Pre dialysis nurse educator GPH Renal Unit 07 3394 7512

## Useful website

### Kidney Health Australia

[www.kidney.org.au](http://www.kidney.org.au)

## Any questions?!

You may not be able to think of any now but we are ALWAYS happy to answer questions as they arise

- phone the dialysis unit and talk to a dialysis nurse
- phone your Nephrologist
- seek support from organizations such as
- Kidney Health Australia



For support services for families, please contact your GP.

**GREENSLOPES PRIVATE HOSPITAL**  
**EMERGENCY CENTRE**

***Expert Care 24/7***

 **3394 7654 24 hrs a day | 7 days a week**  
**Access via Newdegate Street**  
**[greenslopesprivate.com.au](http://greenslopesprivate.com.au)**

  
**Greenslopes Private Hospital**  
Part of Ramsay Health Care

### Emergency Centre fees

The Emergency Centre fee is not covered by your private health insurance so there will be a minimum out-of-pocket expense. If you have Medicare, everything above the out-of-pocket fee, can be rebated. All blood tests and xrays are separate. Private health does not cover any of the Emergency Centre costs. Our clerical staff will discuss these fees with you. If you require admission to hospital following your stay in the Emergency Centre, our clerical staff will confirm your private health insurance with your health fund to ensure your admission will be covered.

**Please note:** If you require admission into hospital but do not have private health insurance, options for your care will be discussed with you at the time.





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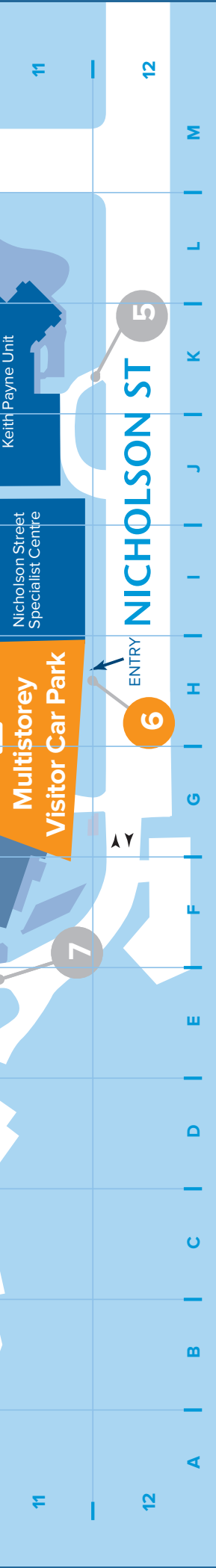
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- Motorcycle parking
- Temporary road closure
- Bicycle racks
- Disabled parking
- Automatic ticket machines
- Elevators
- Entrances to Hospital
- Gate Number

Destination	Map Ref	Location
Bunker Museum	F6	Lower Lobby Level
Clinical and Medical Services (ADOCS and ADMS)	G6	Lower Lobby Level
Collaborative Learning Centre & Library	G7	Lobby Level
Conference Centre	F7	Lobby Level
Coronary Care Unit	H9	Level 1 – John French Wing
Cyril Gilbert Cancer Centre	G8	Lobby Level
Day of Surgery Lounge	H9	Level 1 – John French Wing
Day Surgery Collection	H6/7	Lower Lobby Level, Administration Building
Discharge Lounge	F7	Lobby Level
Emergency Centre	J6	Ground Level
Executive Suites	H9	Lobby Level
Francis Baron Burnett Centre	B6	
G10 Medical Consulting Suites	E3	
Gallipoli Medical Research Centre	J6	Lower Lobby Level, Administration Building
Gastroenterology & Minor Procedure Unit	I7	Lower Lobby Level, Administration Building
Greenslopes Specialist Centre	J8	Lobby Level
Greenslopes Specialty Clinics	F4	Ground Level, Administration Building
Hearts 1st	H7	Lobby Level
Hudsons Coffee	G7 & G5	Lobby Level & Ground Level
Intensive Care Unit	I7	Lobby Level
Jean Pockett Wing	E8	
Keith Payne Unit	J11	
Main Reception & Main Entrance	I8	Lobby Level
Maternity	G8	Level 2 – John French Wing

Destination	Ref	Location
Nicholson Street Specialist Centre	I11	
Parents' Room	I8	Lobby Level
Pharmacy	I9	Lobby Level
Queensland X-Ray	H5	Lower Lobby Level, Administration Building
Radiation Oncology Centre	I6	Lower Ground Level, Administration Building
The Ramsay Health Plus Clinic	D9	Located in the Wellness Centre
Ramsay Specialist Centre	J9	
Rehabilitation Unit	D7	
Renal	H5	Lobby Level, Administration Building
Security	G7	Lobby Level
Sleep Study Unit	I7	Ground Level, Administration Building
Sullivan Nicolaides Pathology	H6	Lobby Level
University of Queensland Offices	I6	Lower Lobby Level
Wards 11 & 13	F7	Level 1 – Jessie Vasey Wing
Ward 12 & 22		Level 1 & Level 2 - Jean Pockett Wing
Wards 21 & 23	F7	Level 2 – Jessie Vasey Wing
Ward 25	H9	Level 2 – John French Wing
Wards 31 & 33	F7	Level 3 – Jessie Vasey Wing
Wards 35 & 37	H9	Level 3 – John French Wing
Wards 41 & 43	F7	Level 4 – Jessie Vasey Wing
Wards 45 & 47	G9	Level 4 – John French Wing
Wellness Centre	D9	

Ramsay Pharmacy  
Part of Ramsay Health Care

**Open 24 Hours. 7 Days.**

**Brisbane's First 24hr Pharmacy**

Now open in the main foyer (I9) at Greenslopes Private Hospital

Sullivan Nicolaides  
PATHOLOGY

Quality is in our DNA

**Located on the map at H6**

**QueenslandXRay**

Providing comprehensive medical imaging across two onsite practices.

Main X-Ray Department located at H5

Obstetric and Paediatric Imaging Services located at G9

hudsons coffee

**FREE COFFEE**

**UPSIZED**

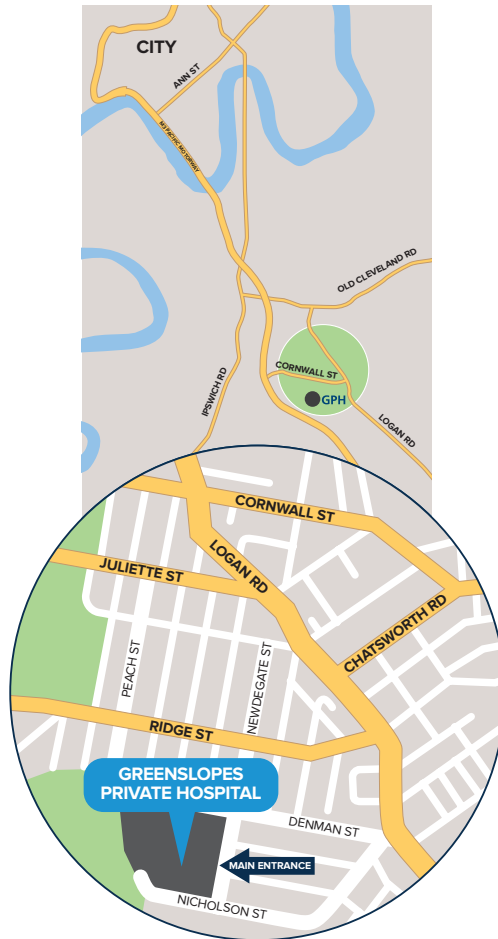
FIND US ON THE MAP

G5 & G7

## Notes and Questions

[illegible]

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## Greenslopes Private Hospital

Part of Ramsay Health Care

Newdegate Street  
Greenslopes QLD 4120

P: 07 3394 7111

[greenslopesprivate.com.au](http://greenslopesprivate.com.au)