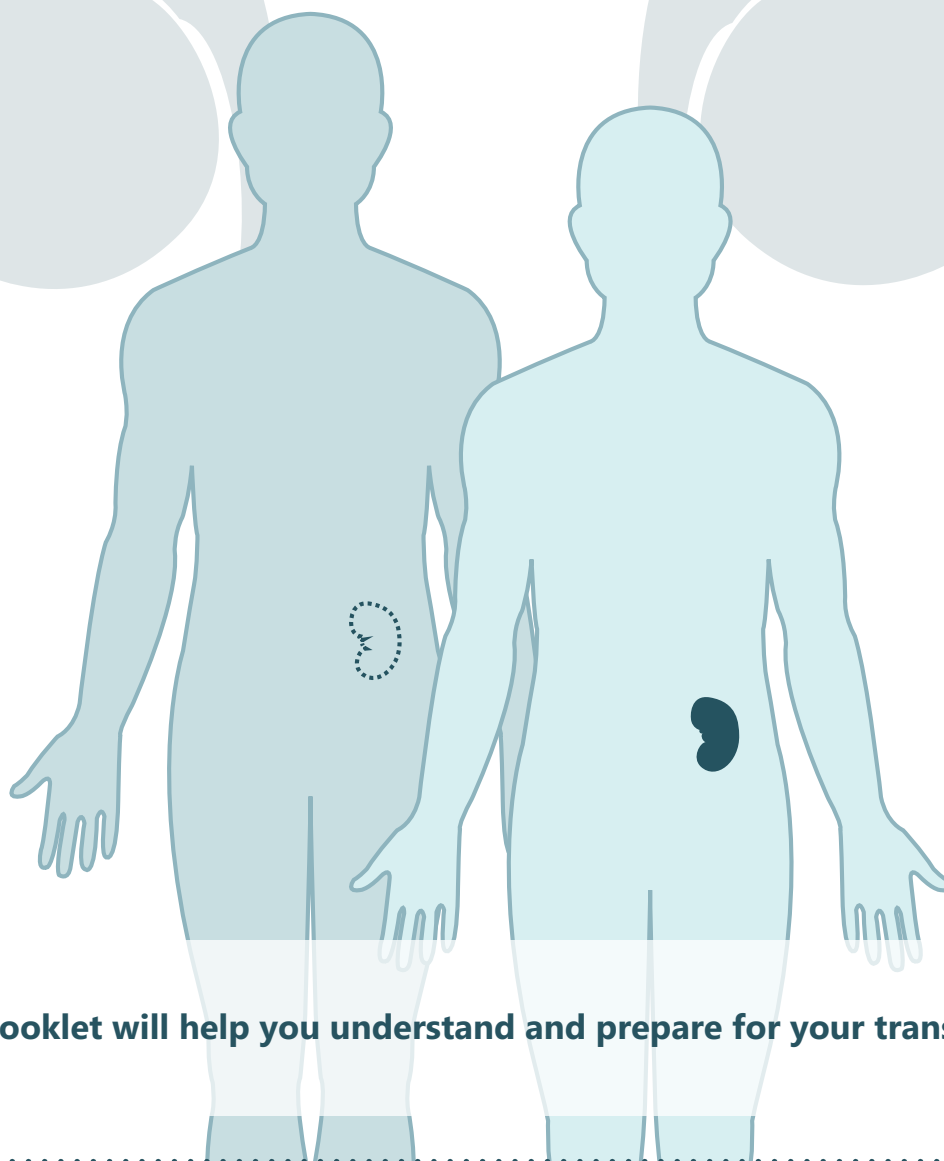


A GUIDE TO **KIDNEY TRANSPLANT**



This booklet will help you understand and prepare for your transplant.

Centre universitaire
de santé McGill



McGill University
Health Centre

**Office d'éducation des patients
Patient Education Office**



This handbook was developed by the MUHC Surgical Recovery (SURE) working group and the Kidney Transplant Team.

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IMPORTANT

Information provided in this handbook is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute for medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.

Centre universitaire
de santé McGill



McGill University
Health Centre

Office d'éducation des patients
Patient Education Office

PRET SURE
Parcours de rétablissement chirurgical du CUSM
MUHC Surgery Recovery Program



This material is also available through the
MUHC Patient Education Office website
www.muhcpatienteducation.ca

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Part 1:

How you can prepare

About this handbook

Having a kidney transplant can be stressful for patients and their families. The good news is that you are not alone. We will support you each step of the way.

This handbook will:

- Help you understand and prepare for your kidney transplant
- Explain how you can play an active part in your preparation and recovery
- Give you daily goals to achieve while you are in the hospital

Please bring this handbook with you when you come for your kidney transplant and keep it with you throughout your hospital stay until you go home. Your health care team will refer to it as you recover, and review it with you and your family before you go home.

Ask us if you have questions about your care.

Your MUHC kidney transplant team



If you are not comfortable communicating in French or English, please bring someone to translate for you.

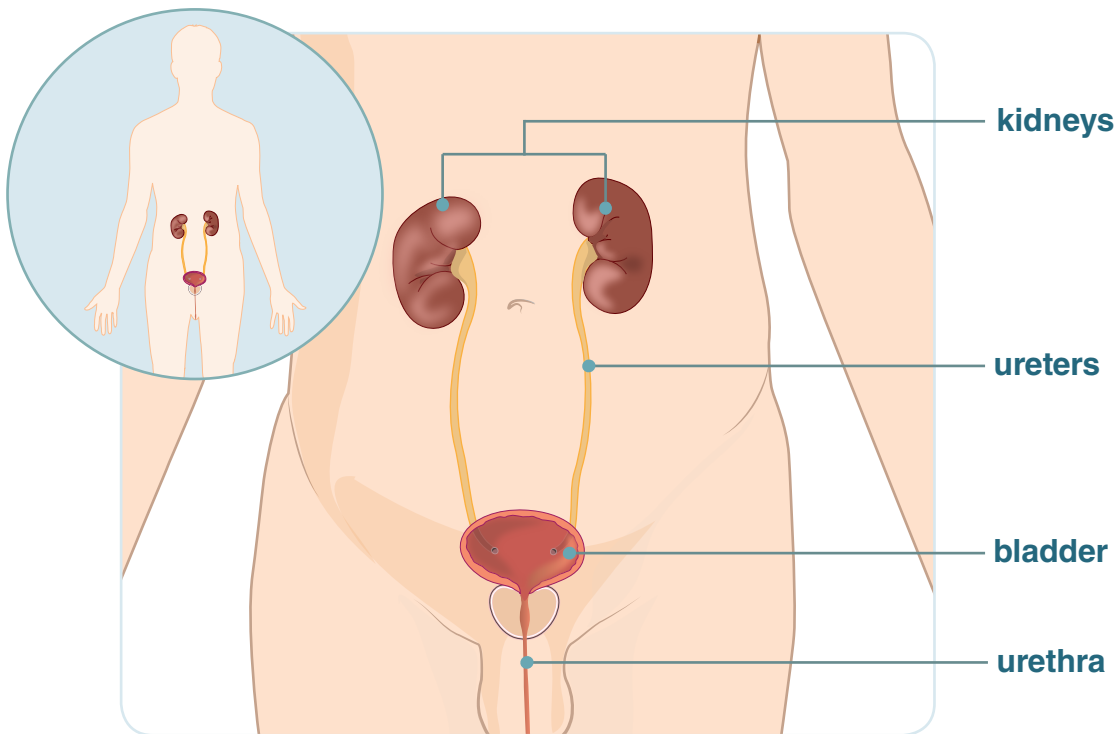
About your kidneys

You have 2 kidneys, one on each side of your spine. A kidney is about the size of your fist which is close to 10-13 cm long (4-5 inches).

When in good health, your kidneys:

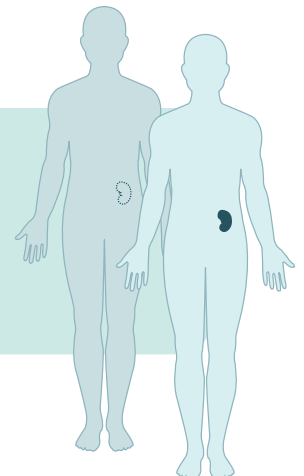
- remove extra fluid and waste from your blood
- help make red blood cells
- control your blood pressure
- make urine (this is their most important job)

When urine (pee) is made, it leaves the **kidneys** through narrow tubes called **ureters** and travels to your **bladder**. This is where your urine is stored. When you urinate, urine leaves your body through your **urethra**.



Did you know?

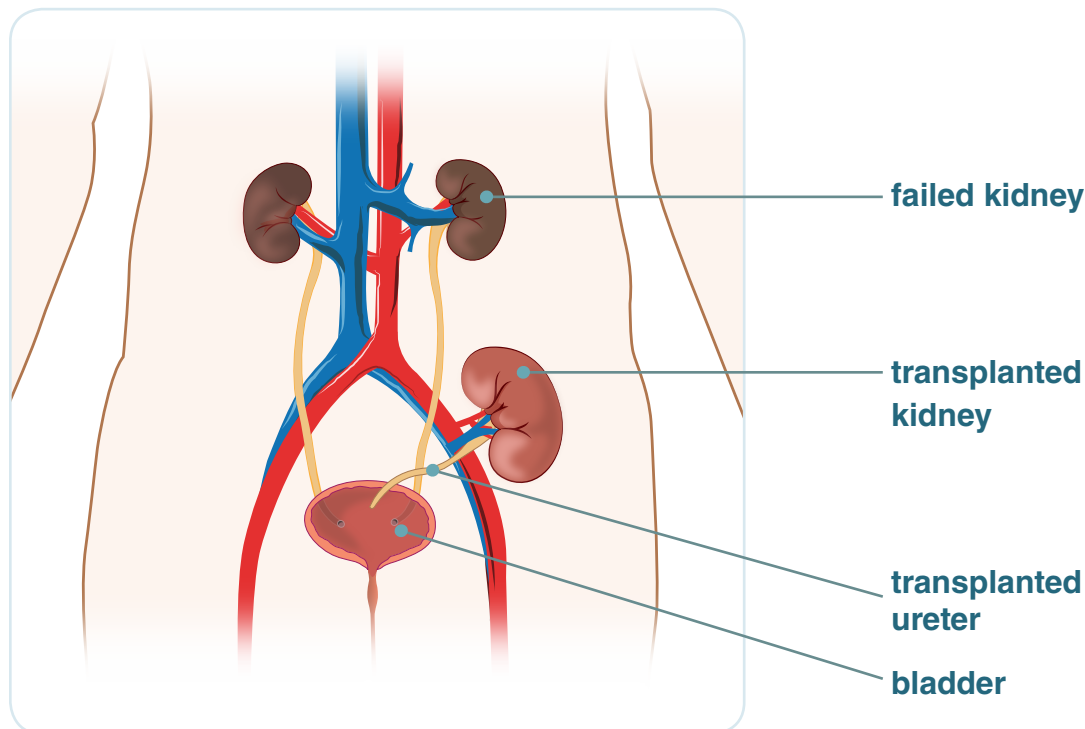
You can live a healthy life with only one kidney.



What is a kidney transplant?

When both your kidneys have not been working well for a long time, we say you have “chronic kidney failure.” You will need to be followed closely by your doctor and/or a nephrologist (doctor specialized in kidneys).

When only a very small part of your kidneys are working properly (10 out of 100 percent), you will need treatments to remove extra fluids and waste from your body. These are called dialysis treatments.



A **kidney transplant** is a type of surgery that places a healthy kidney from another person into your body. **This is the best option** for most people with chronic kidney failure because it offers you the best chances for a longer and more healthy life without dialysis.

In nearly all cases, your **failed kidneys** will not be removed. Your new **transplanted kidney** will be placed in your lower abdomen, near your hip. The new kidney will then be connected to the blood vessels in your leg. Your new **transplanted kidney** will do the work of your two **failed kidneys**.

After your surgery, your transplanted kidney may not start to work right away. For this reason, you might need to continue dialysis for a while.

What is the difference between living and deceased kidney donors?

The person who gives a kidney is called a **donor**. The person who receives this kidney is called a **recipient**.

There are 2 types of kidney transplant donors: living donor and deceased donor.

Living donor

Anyone can donate a kidney to you as long as they are over age 18 and in good health. Living kidney donors are most often family members and friends. Living donation leads to the best long term transplant results.

Call the Transplant Clinic (514-934-1934 ext: 36003) if:

- You know someone who would like to donate to you. This person will need to contact the Transplant Clinic directly to discuss this option with our team.
- You are unsure how to ask friends and family to consider kidney donation.

Remember: Your transplant team is here to help. We can suggest ways to help you discuss this issue with friends and family.

Deceased donor

If you do not have a living donor, your name will be placed on a waiting list to receive a kidney from a donor who has died. The wait may vary, but it is usually from a few months to several years.

A deceased donor is a person who has suffered severe permanent damage to their brain. Organ donation is only discussed after all life-saving treatments have been tried to save this person's life and this person or their family have given consent for organ donation.

What is the difference between living and deceased kidney donors?

There are 2 types of deceased donors:

- **Donors with brain death**

Most deceased donors are brain dead. This means the brain's activities have stopped completely. This diagnosis is done using neurological tests.

- **DCD donors: Donation after Cardio-Circulatory Death**

This type of deceased donor is a patient with severe and irreversible brain injuries and near death. When the decision to stop all life-support treatments are made, the heart stops beating and the patient dies.

There are other terms you might hear:

- **Expanded criteria donor (ECD)**

This is a deceased donor who is an older person and may have some medical conditions.

The benefits to receiving an expanded criteria donor kidney are:

- you will get a kidney more quickly as there are more older donors
- having an ECD kidney is better than staying on dialysis

Your transplant doctor will discuss this with you in more detail when you come to the pre-kidney transplant clinic.

- **Exceptional Distribution (ED)**

Health Canada has standards for organ donation. Donors are labeled as exceptional distribution when someone wants to donate their organs and they are considered “high risk” by Health Canada standards. Your transplant doctors will discuss with you the benefits and potential risks of this type of transplantation. This will help you to make an informed decision about accepting the kidney.

Who are the members of your transplant team?

You will have regular contact with each of the following members of your kidney transplant team:

YOU are the most important member of the kidney transplant team. You can play an active role in your health by:

- Having a good understanding of your medical condition
- Following the medical and health advice given to you by the kidney transplant team
- Learning about your medications
- Actively taking part in your care

Kidney transplant nurse coordinator:

- Has expertise in the care and management of transplant patients
- Will be involved in your care in the transplant clinic

Kidney transplant nephrologist is a:

- Doctor specialized in the care of kidney transplant patients and will be involved in your care after the transplant

Kidney transplant surgeon is a:

- Doctor who will perform your kidney transplant surgery and will be involved in your care after the transplant

Other medical doctors:

- Will work closely together with your kidney transplant nephrologist and surgeon. These include: fellows, residents and medical students supervised by your doctors
- Your team may also work with other specialty doctors if their expertise is required



Who are the members of your transplant team?

Advance practice nurse in transplant:

- Has advanced nursing expertise
- Will be involved in your care and plans for your discharge home
- Will work with you and your family to help you manage your care and any concerns you may have

Nurse manager is:

- In charge of the staff and the management of the transplant unit and transplant clinic
- Available to meet with you if you have any questions or concerns



Nurses working on the hospital units will:

- Provide care while you are in the hospital
- Be involved in teaching you and your family about your medications and care
- Make sure that you and your family have all the information you need to return home safely

Assistant nurse managers are:

- Responsible for the daily coordination and care on the transplant unit
- Involved in your care and plans for your discharge home

Nurse liaison will:

- Be involved in coordinating your health care needs at home with your local CLSC (e.g. the removal of your clips) or a referral to other community resources if needed (e.g. referral to a rehabilitation or convalescence center)



Orderlies/PABs will:

- Assist the nursing team with your daily activities such as helping you with your hygiene care and walking
- Help you to take your weight every morning



Unit coordinators will:

- Assist the nursing team to coordinate the booking of tests, appointments, patient admissions and discharges on the unit
- Answer patient and family enquiries

Who are the members of your transplant team?

Nutritionist will:

- Help you keep a healthy diet so that your body has what you need to manage surgery and recovery
- Give you diet advice before going home



Transplant pharmacist will:

- Review the medications you were taking before the surgery
- Carefully track what medications we give you in the hospital
- Contact your community pharmacy to make sure your medications are ready before going home



Physiotherapist (if needed) will:

- Help you do exercises to regain and maintain your physical strength
- Make sure you have the ability to return home safely



Social worker (if needed) will:

- Help you and your family cope with any emotional, social and financial difficulties
- Obtain services and resources in the community

Occupational therapist (if needed) will:

- Check to see how you are managing daily routines at home
- Suggest how to carry out activities at homes such as bathing, feeding, and dressing after your surgery

Research coordinator may:

- Ask you to participate in a research study before or after your surgery

Visit the Pre-kidney Transplant Clinic

Your appointment at the Pre-kidney Transplant Clinic will take **half a day**. For this reason, make sure **you bring your medication and some food with you**. This clinic is located near the cafeteria in the Surgical South Clinic room DS1. 2833 (Block D, level S1).

During your visit, you will:

- Have some blood tests
- Attend a group information session about having a kidney transplant
- Meet with the transplant team (pre-transplant nurse coordinator, a transplant nephrologist, a transplant surgeon)

The transplant team will:

- Review your medical condition and the results of all your tests
- Ask you questions about your family and social support
- Discuss any concerns you might have



Did you know?

If you have any questions or concerns before or after this appointment, you can call your pre-kidney transplant nurse coordinator:
514-934-1934, ext. 35222



Visit the Pre-operative Clinic

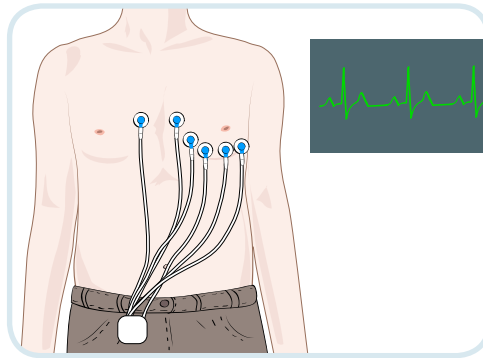
You will have an appointment at the Pre-operative Clinic. This clinic is located near the cafeteria at **DS1. 2428 (Block D, level S1)**.

During your preoperative visit, you will:

- Meet with a nurse who will help you prepare for surgery and tell you what to expect on the day of your surgery.
- Meet with a doctor who will ask you questions about your health. If you have medical problems, we will refer you to another doctor (a specialist) before your surgery.

You might also:

- Have more blood tests
- Have an electrocardiogram (ECG) to check how your heart works
- Need to stop taking some medications and herbal products before your surgery. During this appointment, your doctor will tell you which medications you should stop and which ones you should keep taking.



Did you know?

If you have any questions or concerns before or after this appointment, you can call the **Pre-operative Clinic nurses at 514-934-1934, ext. 34916, Monday to Friday, 7 a.m. to 3 p.m.**



Planning ahead

Be active

Exercise helps you be as fit as possible and keeps your weight under control. If you are already exercising, keep up the good work. If you are not, start slowly by adding a little exercise into your day.

A 30 minute walk every day is far better than not exercising at all.

Before starting any exercise program, always speak with your primary care doctor first.

If you are overweight, you may be asked by your kidney transplant team to lose weight before your surgery.



Stop smoking

If you smoke, quitting for good is a step that will have the greatest impact on improving your health. Quitting is possible even if you are a long time heavy smoker and have tried many times in the past.

It is never too late to quit!

Your doctor can help you stop smoking and talk with you about options. See page 42 to learn more.



Restrict alcohol

Let us know if you need help cutting down how much alcohol you drink before your surgery. You can discuss this with your doctor.



Plan ahead

You may need help with meals, bathing, laundry, housework and transportation after your surgery. Make plans with your family and friends so you will have the help you need.

If you feel that you will not be able to manage at home after your surgery, let the pre-kidney transplant nurse coordinator know.

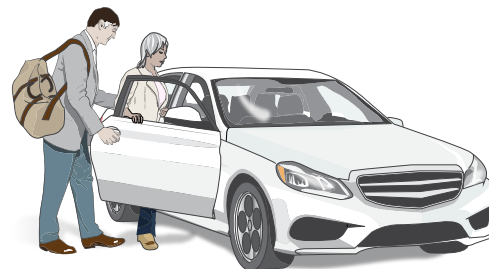


Planning ahead

Arrange transportation

Remember to arrange a ride to go home after your surgery. You will also need a ride to come back for your appointments at the Transplant Clinic. If you cannot find someone to drive you, ask your local CLSC. They may be able to offer you volunteer transport services.

See page 44 to learn more about the MUHC parking rates.



After your surgery, you will have appointments at least **once a week and maybe 2 times a week** at the Transplant Clinic. This will be the case until your kidney transplant nephrologist sees that your kidney is working well and is stable. After this, the number of your appointments will change. How often and how regularly you come will depend on how well your kidney is working and your general health.

Did you know?

The day of your surgery is called Day 0. You should be able to go home from the hospital on Day 5 after your surgery. For example: If your surgery is on Monday, plan to go home on Saturday.

Speak to your pre-kidney transplant nurse coordinator if you have concerns about going home.



When to contact your pre-kidney transplant nurse coordinator

While you are on the waiting list for a kidney transplant, you need to let your pre-kidney transplant nurse coordinator know if there is any change in your health or in your life.

You need to let them know if you:

- Have had surgery or any new medical condition
- Have received blood products
- Are leaving the province of Quebec for vacation, or any other reason

Please call the pre-kidney transplant nurse coordinator at 514-934-1934, ext. 35222.



Your checklist: what to bring to the hospital

- ❑ This Kidney Transplant Handbook
- ❑ Medicare card and hospital card
- ❑ List of medications that you take at home (ask your pharmacist to give you one)
- ❑ 2 packages of gum
- ❑ Non-slip slippers or shoes, loose comfortable clothing (for when leaving the hospital)
- ❑ Toothbrush, toothpaste, mouthwash, comb, deodorant, soap, and tissues

If needed:

- ❑ Bring your glasses, contact lenses, hearing aids, dentures, and their storage containers labeled with your name
- ❑ Bring your cane, crutches, walker, labeled with your name
- ❑ Bring enough supplies for 2 exchanges, if you are on peritoneal dialysis
- ❑ Bring your CPAP machine, if you have sleep apnea



Important

Please bring these items in a small luggage labeled with your name. The storage space is limited.

Please do not bring anything of value, including credit cards and jewelry.

The hospital is not responsible for lost or stolen items.



If you are having a **living** donor transplant

Planning to have a deceased donor kidney transplant?

Your pre-surgery instructions are a little different.

Skip to page 18 to learn more.

Expect a call from Admitting

The day before your surgery, the Admitting Department will phone you to tell you to come to the hospital for 6:30 a.m. on the day of your surgery. (If your surgery is scheduled on a Monday, the hospital will phone you the Friday before your surgery).

Write down what they tell you here:

Date of your surgery: _____

Time of arrival at the hospital: _____

If you do not receive a call by 2:00 p.m. the day before your surgery, contact the Admitting Department directly at 514- 934-1934 ext. 31557.

The Admitting Department will ask you to go to either:

C10 (surgical unit), Block C, level 10. Enter the building through the Royal Victoria Hospital main entrance. Take the set of South elevators in Block C. These elevators are towards the back of the hospital.

or

Surgery Registration, Block C, level 3 (C03.7055). Enter the building through the Royal Victoria Hospital main entrance. Take the C or D North set of elevators and go to the 3rd floor. These are the first set of elevators you will see.


This is where our team will prepare you for your surgery.

If you are having a **living** donor transplant

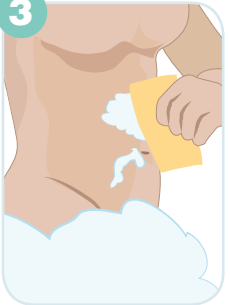
Follow these washing instructions

A transplant nurse coordinator will explain what to do before you come to the hospital for your surgery.

The night before your surgery:

- 

Use regular soap and shampoo for your face and hair
- 

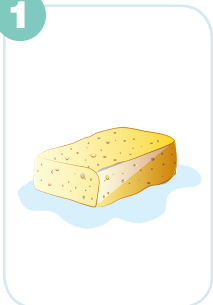
Take a shower with 1 of the 2 sponges you were given
- 


Wash your body from the neck down, including your belly button and your genital area
- 


Do not shave the area where the surgery will be done
- 

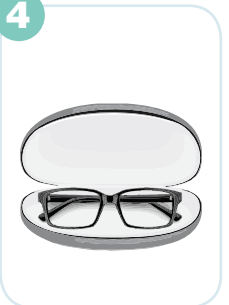
Wear clean clothes (nightgown, pyjamas) to bed


The morning of your surgery:

- 

Take a shower by using the 2nd sponge you were given
- 

Do not apply lotion, perfume, makeup, nail polish and do not wear jewelry or piercings
- 

Do not shave the area where the operation will be done
- 

If you wear contact lenses, wear your glasses instead
- 

Put on clean, loose, and comfortable clothes

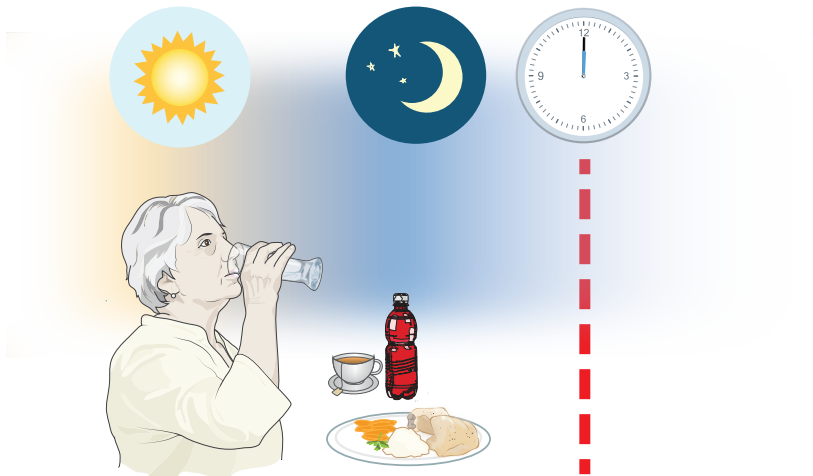
If you are having a **living** donor transplant

Follow these diet instructions

Your Pre-operative Clinic nurse will explain what to eat and drink before your surgery.

The day before your surgery:

- Eat and drink normally until midnight. Please follow your usual liquid restrictions. Speak to your nurse or nutritionist about this if you have questions.
- After midnight, stop eating and drinking.



The morning of your surgery:

- Do not eat any food or drink any liquids.



If you are having a **deceased** donor transplant

Planning to have a living donor kidney transplant?

Your pre-surgery instructions are a little different.

Skip to page 15 to learn more.

Expect a call from your transplant nurse coordinator

A transplant nurse coordinator will call you when we have found your donor match. The nurse will ask you questions about your current health. For example: Do you have a fever? Have you had a recent illness? Did you have a recent blood transfusion? The transplant nurse coordinator will also give you instructions to follow before coming to the hospital.



Take note:

There is always a chance that your surgery will be cancelled at the last minute if you are not well or the kidney is not good for you.

If you are having a **deceased** donor transplant

Follow these instructions

A transplant nurse coordinator will explain what to do before you come to the hospital for your surgery.

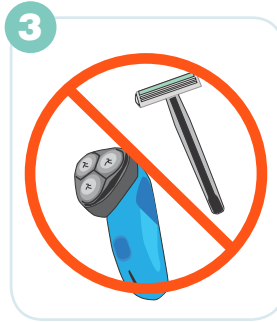
Take a shower



Shampoo your hair and take a regular shower with soap, wash everywhere including your belly button



Do not apply lotion, perfume, makeup, nail polish, and **do not wear** jewelry or piercings



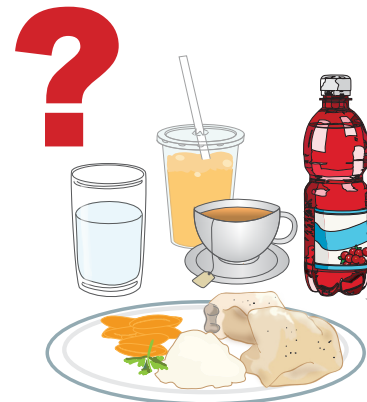
Do not shave the area where the operation will be done



Wear clean clothes to come to the hospital

Follow eating and drinking instructions

When you receive the call to come to the hospital for your surgery, the transplant nurse coordinator will tell you if you can eat and drink before coming.



Stop smoking

If you are a smoker, we recommend that you **stop smoking** before coming to the hospital.

See page 42 to learn more.



If you are having a **deceased** donor transplant

Go to the Admitting Department

The transplant coordinator will tell you to **go to the Admitting-Adult Department** when you arrive at the hospital.

The Admitting Department will then tell you to go to either:

C10 (surgical unit), Block C, level 10. Enter the building through the Royal Victoria Hospital main entrance. Take the set of South elevators in Block C. These elevators are towards the back of the hospital.

or

Recovery Room, Block C, level 3. Enter the building through the Royal Victoria Hospital main entrance. Take the C or D North set of elevators and go to the 3rd floor. These are the first set of elevators you will see.

This is where our team will prepare you for your surgery. A hospital employee will take you from the admitting department to either C10 or the Recovery Room



Notes

[illegible]

Part 2:

Your surgery

At the hospital

In the Preoperative admitting area or on the C10 surgical unit, your nurse will:

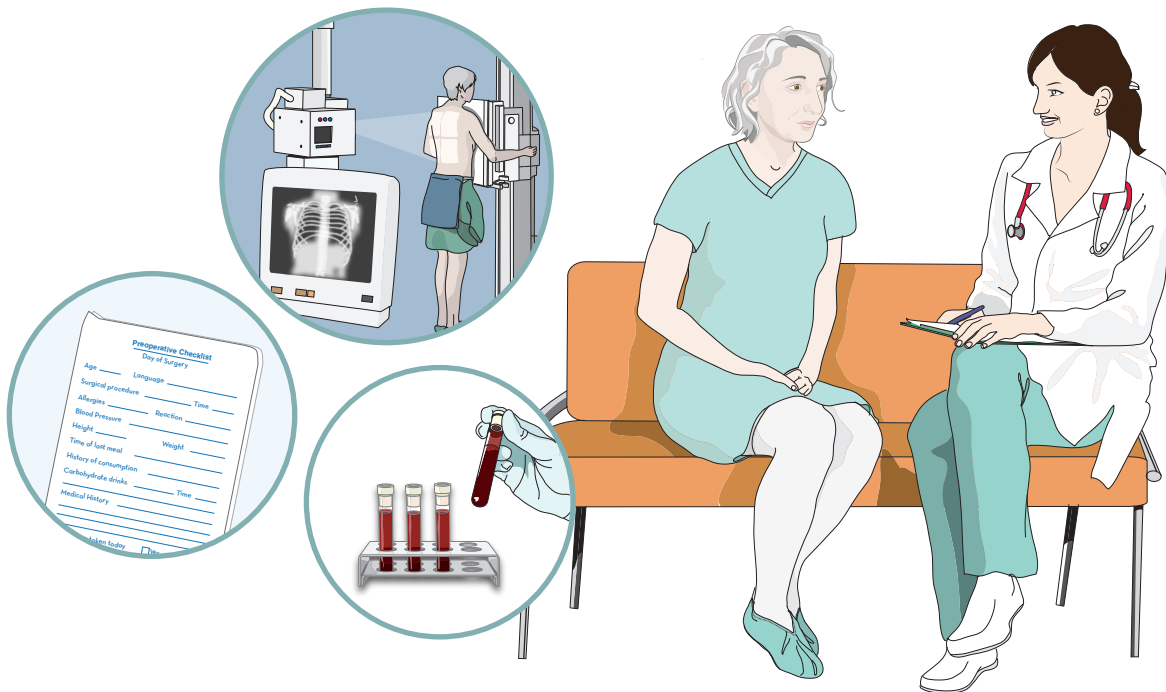
- Ask you to change into a hospital gown
- Prepare you for your surgery
- Complete a checklist with you

You will have these tests done:

- A chest x-ray
- An electrocardiogram (ECG)
- A blood test
- A urine test (if you are still urinating)

If you are on peritoneal dialysis, a sample of your peritoneal fluid will be taken. You might also be given some medications.

Our doctors will look at these test results and ask you questions to make sure that you are fit for surgery.



Operating room

When the operating room is ready, a patient attendant will take you there. You will meet your **anesthesiologist** (the doctor who will give you medication to sleep during the surgery) and the other members of the surgical team.

You will be asleep and pain-free during your surgery. The surgery can take up to 3 to 4 hours.

Information for your family and friends

Waiting room

Family and friends can wait for you in the waiting rooms located:

C03.7158
(Block C, level 3, room 7158)

or

Family room on C10 surgical unit
(Block C, level 10)

As these rooms are small, we ask that you limit the number of people you bring with you.

At the end of your surgery, the Recovery Room nurse will call the family member or friend you have chosen to tell them how you are doing.

There are no visitors allowed in the Recovery Room.

Internet access

There is a free Wi-Fi available at the hospital. Connect to:

Network: CUSM-MUHC-PUBLIC

Username: public

Password: wifi



Other resources

- Cafeteria: Located in the Adult Atrium on the S1 level
- Vending machines: Block C, S1 level
- Stores / Restaurants / Coffee shops: Galleria, RC (Ground floor level) & S1 level Adult Atrium
- Bank machines: Blocks C & D, RC (Ground floor level)
- McConnell Centre (patient library): Block B, RC (Ground floor level), room BRC.0078
- Prayer and meditation room: Block C, level 2, room C02.0310.4

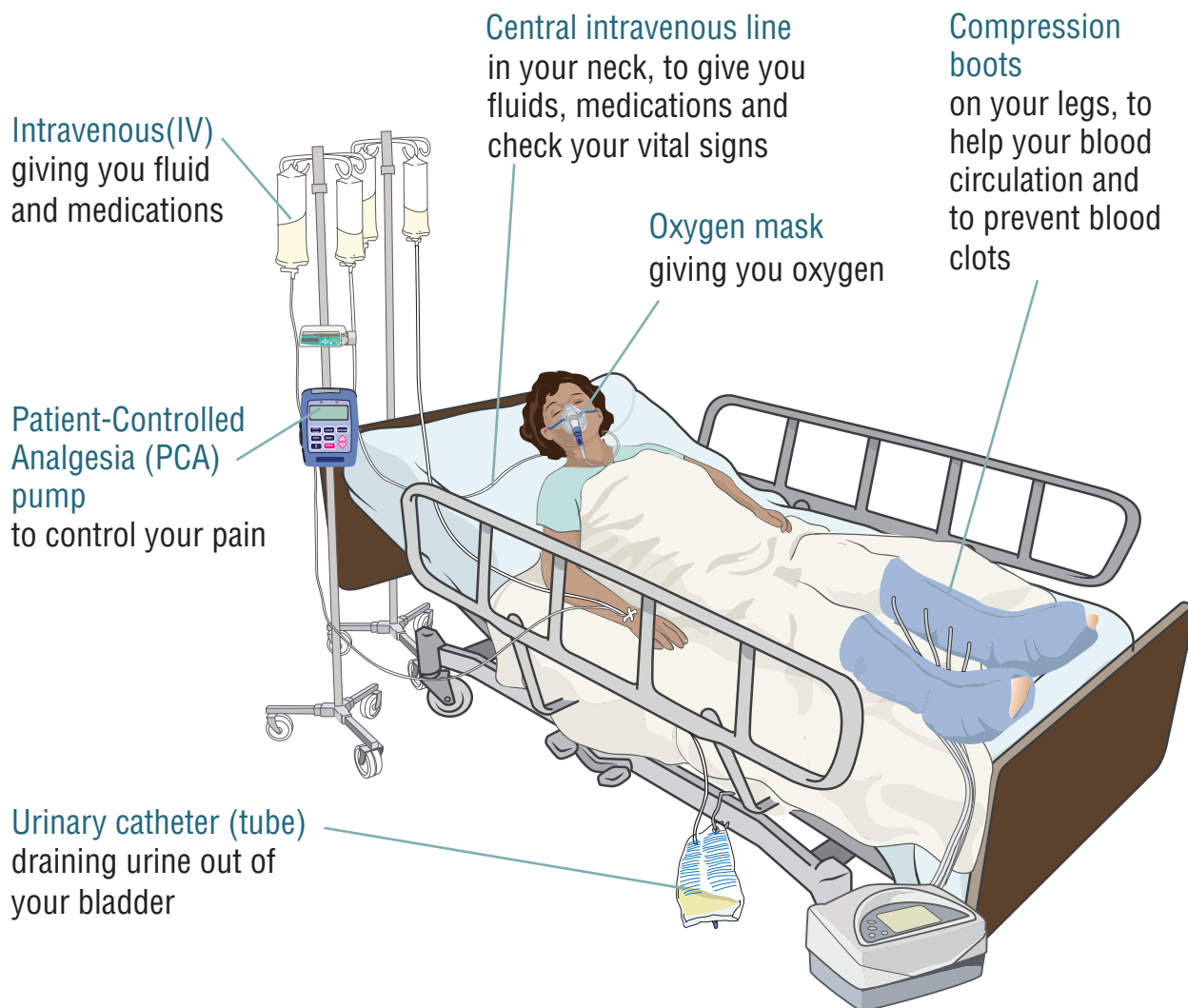
Recovery Room

After your surgery, you will wake up in the **Recovery Room**, also called the **Post-Anesthesia Care Unit (PACU)**. You will be there for several hours until the surgical and anesthesia teams decide that you are ready to be transferred to another unit.

While you are in the Recovery Room, your nurse will:

- Check your vital signs and urine output often
- Check your bandage(s)
- Check if your pain is under control
- Make sure you are comfortable

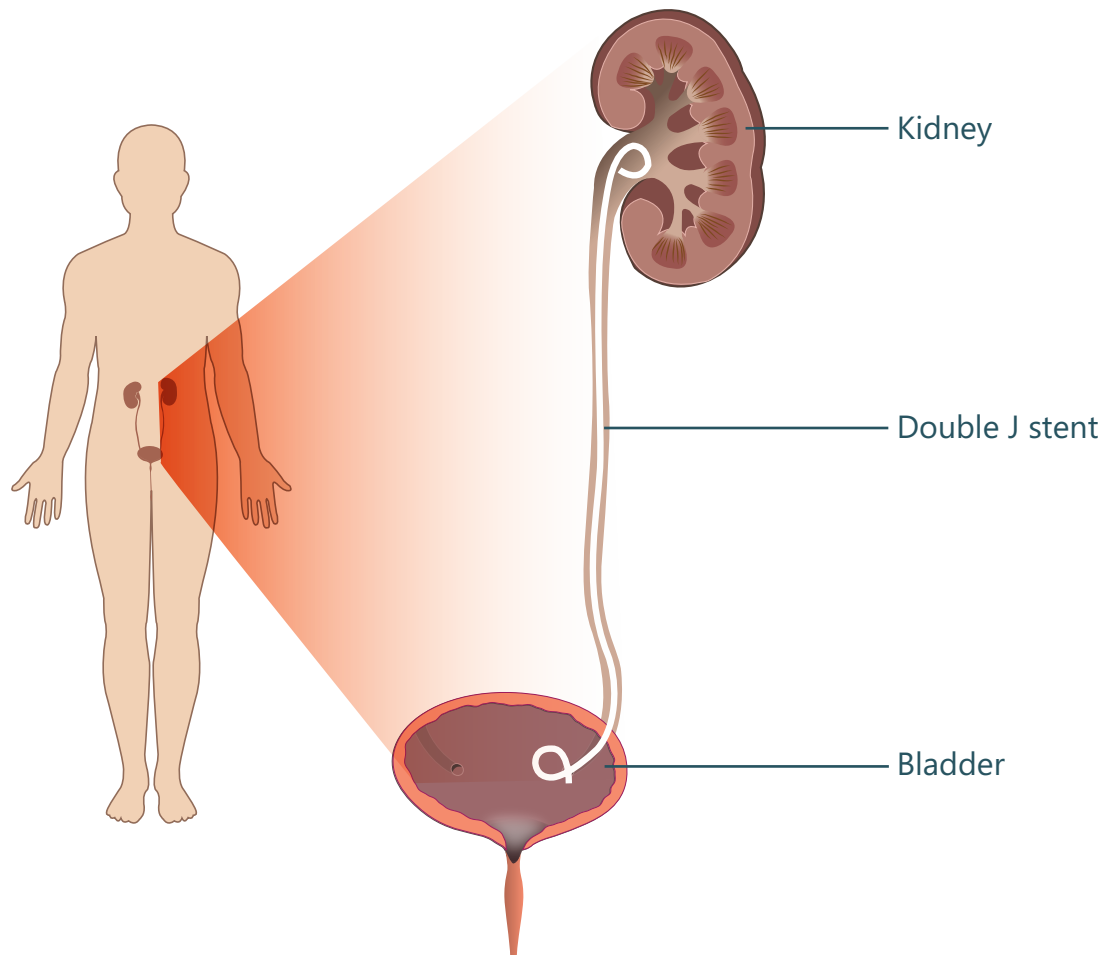
You will have:



Recovery Room

Double J stent

During the surgery, your surgeon will place a temporary plastic tube called a “**Double J stent**.” This is placed in your ureter which connects your kidney to your bladder. This tube helps the ureter stay wide enough for the urine to flow well and protects the ureter while it heals.



Please note that visitors are not allowed in the Recovery Room .
When you are ready, you will go to your room on the C10 surgical unit,
(Block C, level 10). Your family may visit you once you are in your room.
There is always a possibility that you will go to the intensive care unit
(ICU) for closer monitoring or stay in the Recovery Room overnight.

Control your pain

Pain relief is important because it helps you:

- Breathe better
- Move better
- Sleep better
- Eat better
- Recover faster

Your nurse will ask you to rate your pain on a scale from 0 to 10. Your nurse will give you medication if you have pain or will encourage you to use your patient-controlled analgesia (PCA) pump. Our goal is to keep your pain score below 4/10.

Pain Intensity Scale

0 means no pain and 10 is the worst pain you can imagine.

This will help your nurse decide how to best manage your pain.



Patient-Controlled Analgesia (PCA)

You will control your pain medication yourself via a special pump. This pump will give you a safe dose of pain medication.



Did you know?

Your pain will be better controlled if you start using your PCA pump when you start feeling uncomfortable because of your pain.

Do not wait until the pain gets too bad before using your PCA pump.



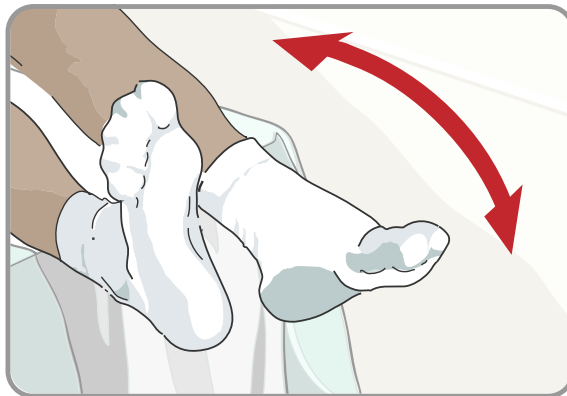
Do your exercises

It is important to move around in the bed to prevent lung problems, blood clots, and muscle weakness. Start these exercises when you wake up in the PACU and continue them while you are in the hospital.

Leg exercises

These exercises help your blood to circulate in your legs.

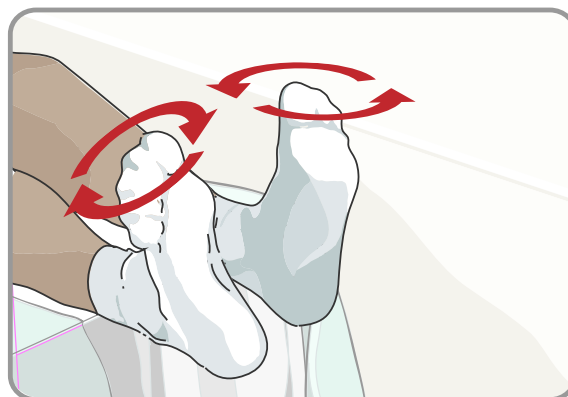
Repeat each exercise 4 to 5 times every half hour while you are awake.



Wiggle your toes and bend your feet up and down.



Stretch your legs out straight.



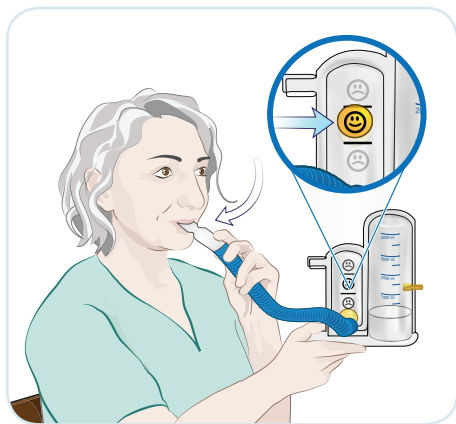
Rotate your feet to the right and left.

Do your exercises

Deep breathing and coughing exercises

An inspiriometer is a device that helps you breathe deeply to prevent lung problems.

To use your inspiriometer:



Put your lips around the mouthpiece, breathe in deeply, and try to hold the yellow ball where the happy face is located for 2 to 4 seconds



Remove the mouthpiece, breathe out, and rest for a few seconds



Repeat this exercise 10 times every hour while you are awake



Take a deep breath and cough. If you have some secretions, cough them up.

Protect yourself from infection

Hand hygiene

Washing your hands is one of the best protections against infections.

Always wash your hands:

- Before leaving and entering your hospital room
- Before eating
- Before preparing your medication
- After using the bathroom
- After sneezing or coughing
- Before and after touching any equipment (i.e. the ice machine)
- See page 41 to learn more



Important information for your visitors

Your family and friends should **not visit** you if they are feeling sick or if they have:

- Fever
- Diarrhea
- Cough
- Vomiting

Ask all your visitors to wash their hands every time they enter and leave your room.

If you are under **isolation** (special rules to prevent the spread of an infection), your visitors must do the following:

- Read closely and follow the rules on the isolation sign outside your room
- Wash their hands, before entering your room
- Put on gloves, a gown and, if needed a mask before entering your room
- Take off the gloves and gown, before leaving your room
- Wash their hands, right away after leaving the room



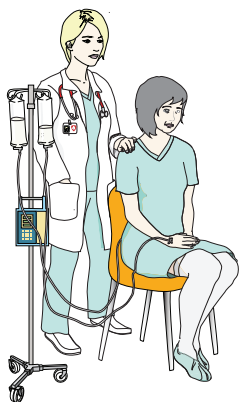
Important information for children who visit

If you have children under the age of 12, they may visit you in the hospital but must be accompanied and supervised by an adult at all times. Children must stay in your room and the door to the room should be closed.

Children cannot come to visit if they are sick.



Goals for Day 0: Day of your surgery day



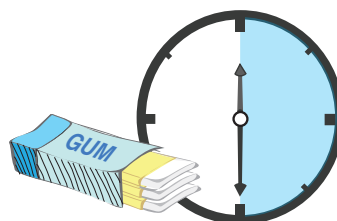
Get up and sit in a chair with your nurse's help.



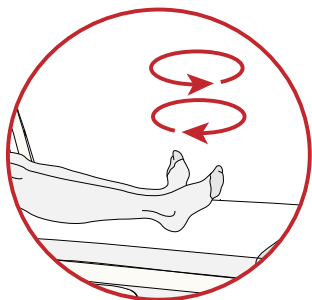
Drink clear liquids, including a protein drink like Ensure or Boost.



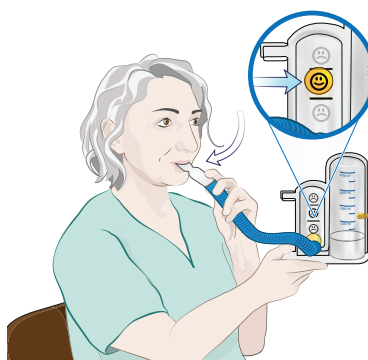
If you are able to drink liquids without vomiting or feeling nauseated, you may begin to eat regular food.



Chew gum for 30 minutes 3 times per day to help your bowels start to work.



Do your leg exercises (see page 28).



Do your breathing exercises (see page 29).

Learn about your care

Your weight will be measured every day until you are going home.

You will have several blood tests a day from the time of your surgery until Day 2. After that, you will have blood tests once a day until you are ready to go home.

Goals for Day 1

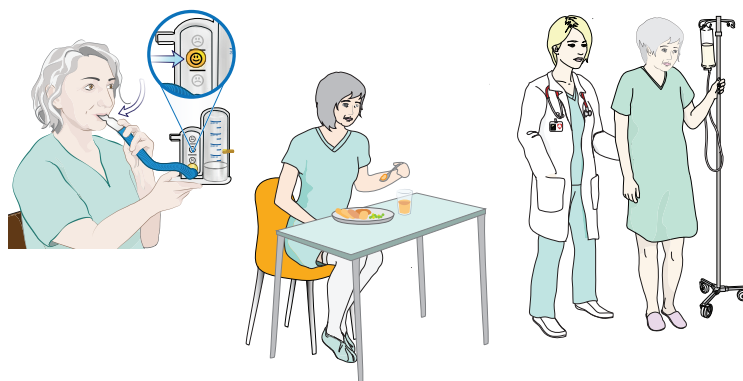
Breathing

Do your breathing exercises.

Activities

Sit in a chair for meals.

Walk in the hallway with help.

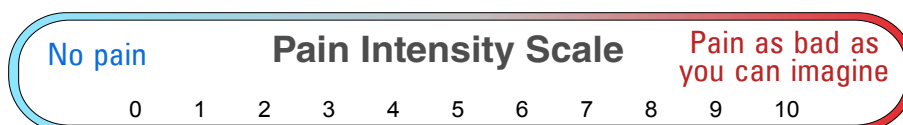


Pain control

If your pain reaches 4/10, press the hand-held button on your PCA.

The pump will give you a safe dose of pain medication.

Tell your nurse if your pain reaches 4/10 on the pain scale.



Diet

Drink liquids, including protein drinks like Ensure or Boost.

You may begin to eat regular food if you do not have nausea or vomiting.

Chew gum for 30 minutes 3 times/day.



Tubes and lines

Your IV line will be kept in place.

Your urinary catheter will be kept in place.

Learn about your care

Your nurse will start teaching you about your medications.

To do this, he or she will give you a sheet with the names of your medications, your dosages, and the times you should take the medications. These are called

self-medication sheets.



It is very important that you understand your medications. These will help you stay healthy and give you the best chances for a kidney transplant success. Take the time you need to review your self-medication sheets carefully. If you are unsure about your medications or have any questions, please let us know.

You should continue to review the information in this kidney transplant handbook. You will also be given more written information on your care after a kidney transplant.

Goals for Day 2

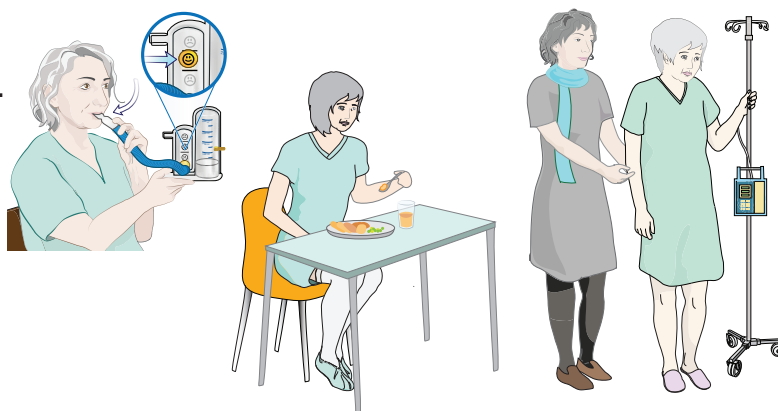
Breathing

Do your breathing exercises.

Activities

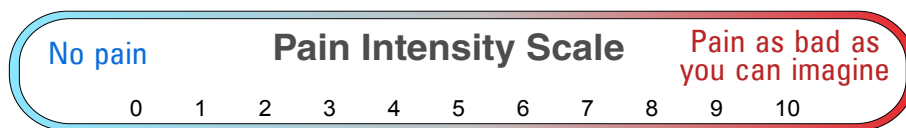
Sit in a chair for meals.

Walk in the hallway 3 times,
with help if needed.



Pain control

The PCA pump will be removed today and you will take pills to control your pain.
Tell your nurse if your pain reaches 4/10 on the pain scale.



Diet

Drink liquids, including protein drinks like Ensure or Boost.

Eat regular food (as long as you do not have nausea or vomiting).

Chew gum for 30 minutes 3 times/day.



Tubes and lines

Your IV fluid will be removed when you are drinking well.

Your urinary catheter might be removed today or on Day 4.

Learn about your care

Start preparing your medications with your nurse.

Learn how to prevent infection and signs and symptoms of possible infection. Discuss transplant rejection (what this is, what are the signs).

Take the time you need to review your self-medication sheets carefully and your kidney transplant handbook.
If you are unsure about anything or have any questions, please let us know.



Goals for Day 3

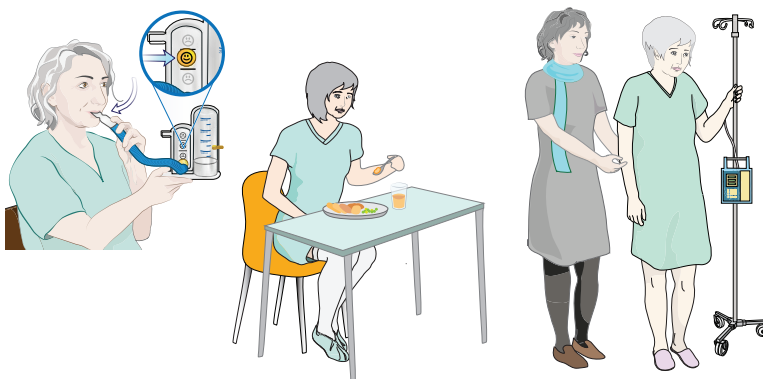
Breathing

Do your breathing exercises.

Activities

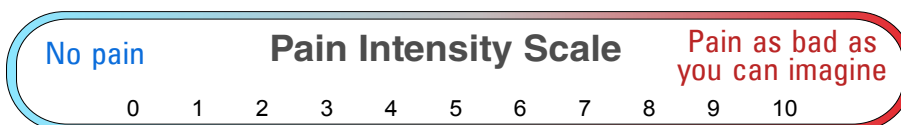
Sit in a chair for meals.

Walk in the hallway 3 times, with help if needed.



Pain control

Tell your nurse if your pain reaches 4/10 on the pain scale.



Diet

Drink liquids, including protein drinks like Ensure or Boost.

Drink 2-3 liters of liquids per day (if the medical team has told you to).

Eat regular food (as long as you do not have nausea or vomiting).

Chew gum for 30 minutes 3 times/day.



Tubes and lines

Your IV fluid will be removed when you are drinking well.

Learn about your care

Continue to practice preparing your medications with your nurse.

Continue to review your self-medication sheets carefully and your kidney transplant handbook. If you are unsure about anything or have any questions, please let us know.

Review with your nurse:

- How to take your temperature twice a day
- How to take your weight once a day
- Double J stent, how and when it will be removed
- Follow-up care in the Transplant Clinic
- Driving restrictions during the recovery time at home
- Sun protection after the transplant



Goals for Day 4

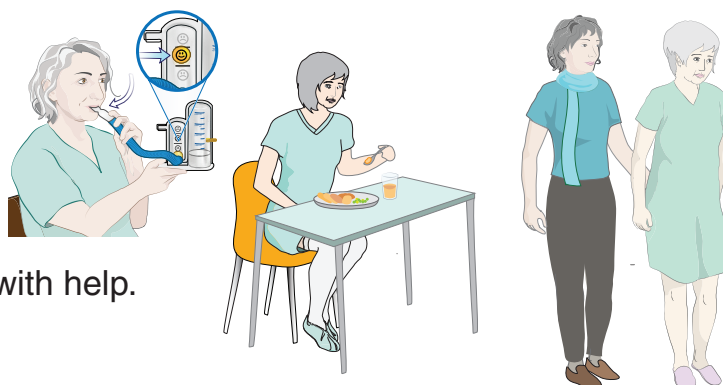
Breathing

Do your breathing exercises.

Activities

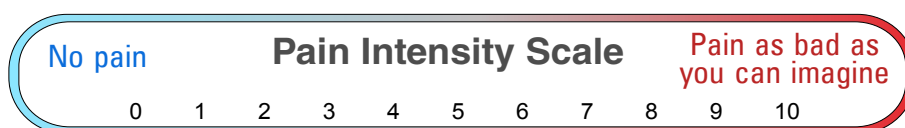
Sit in a chair for meals.

Walk in the hallway 3 times, with help.



Pain control

Tell your nurse if your pain reaches 4/10 on the pain scale.



Diet

Drink liquids, including protein drinks like Ensure or Boost.

Drink 2-3 liters of liquids per day (if the medical team has told you to).

Eat regular food (as long as you do not have nausea or vomiting).

Chew gum for 30 minutes 3 times/day.



Tubes and lines

Your IV fluid will be removed when you are drinking well.

If you still have your urinary catheter it will be removed today.

Learn about your care

Continue to practice preparing your medications with your nurse.

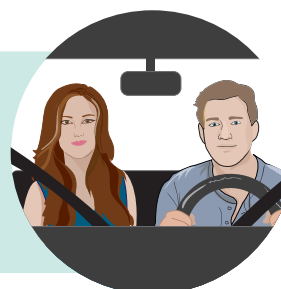
Continue to review your self-medications sheets carefully and your kidney transplant handbook. If you are unsure about anything or have any questions, please let us know.

Review with your nurse:

- Double J stent, how and when it will be removed
- Follow-up care in Transplant Clinic
- Driving restrictions during the recovery time at home
- Sun protection after transplant

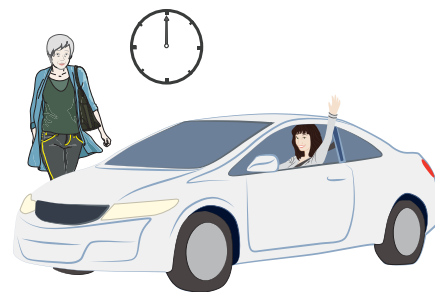
Important

You may go home from the hospital on Day 5 after your surgery. **Remember to arrange your ride.** Please tell your nurse if you have any concerns about going home.



Goals for Day 5: Going home

Plan to go home today by 12:00 p.m. (noon).



Before you go home, your nurse will:

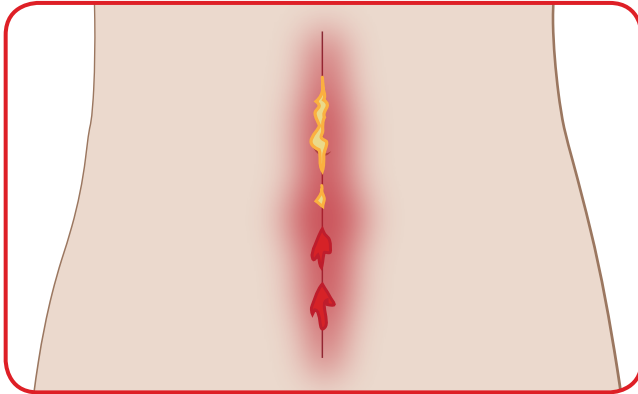
- ☐ Review your discharge prescription.
- ☐ Update your self-medication sheet.
- ☐ Review how to take your temperature, weight and blood pressure every day (see page 47).
- ☐ Give you a Kidney Transplant Clinic appointment: _____

This appointment will be within 1 week of your surgery.

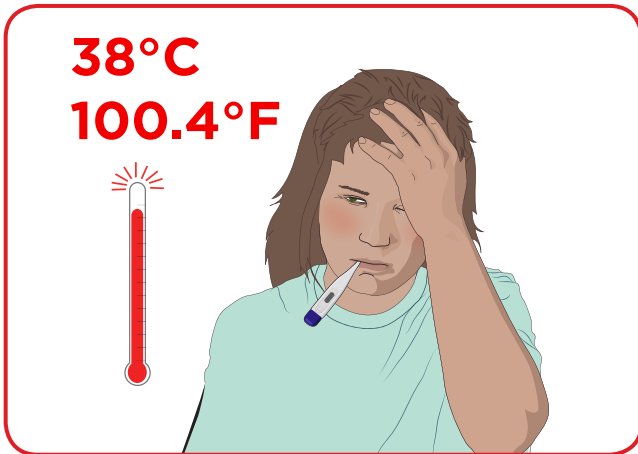
At the appointment, the team will review:

- How your kidney is working
 - How your wound is healing
 - Your general health
 - Your blood test results (including how much anti-rejection medication is in your blood)
- ☐ Remind you about your Advagraf or Prograf level to be done with your blood tests at the Kidney Transplant Clinic.
- ☐ Remind you how and when to contact the transplant coordinator.
- ☐ Arrange an appointment with an endocrinologist, if you are a new diabetic patient.
- ☐ Remind you to arrange an appointment with your own endocrinologist, if you were already diabetic. This appointment should be within a few weeks after your transplant.
- ☐ Review the information about your double J stent and what to watch for at home. The appointment to remove the double J stent will be in the Urology Cystoscopy Clinic in 5 to 6 weeks after your surgery. The urology cystoscopy clinic will contact you with the date of the appointment.
- ☐ A CLSC nurse will remove your wound clips 3 weeks after your surgery. If you are leaving with dressings, they will also be changed by the CLSC nurses.

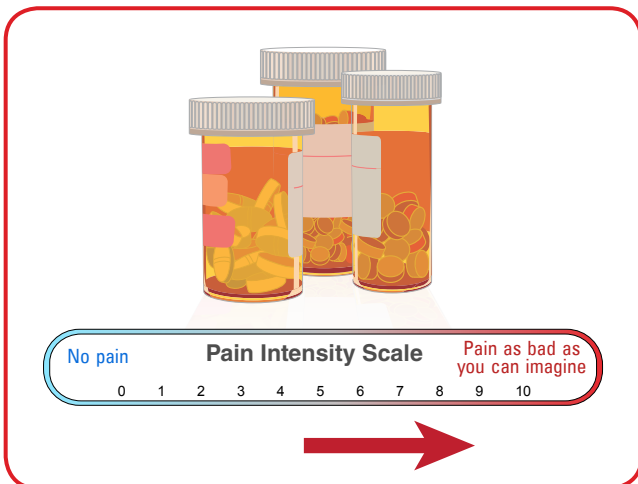
When to call your Transplant team



Your incision is warm, red or you see pus coming from it.



You have a temperature higher than 38°C/100.4°F.



You have more pain and your pain medication does not help.



If you cannot reach your transplant coordinator or nephrologist, go to the nearest Emergency Department.

When to call your Transplant team



You have frequent liquid stool (diarrhea).



You cannot drink or keep liquids down (nausea or vomiting).



You have less urine and you are drinking as much as usual.

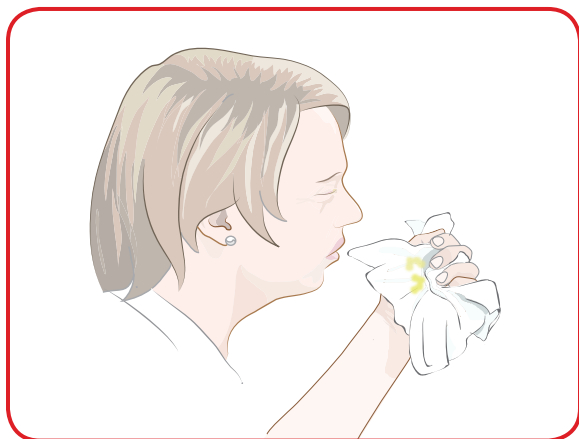
or

You are urinating (peeing) more than usual, you have a burning sensation, or pain when you urinate (pee).

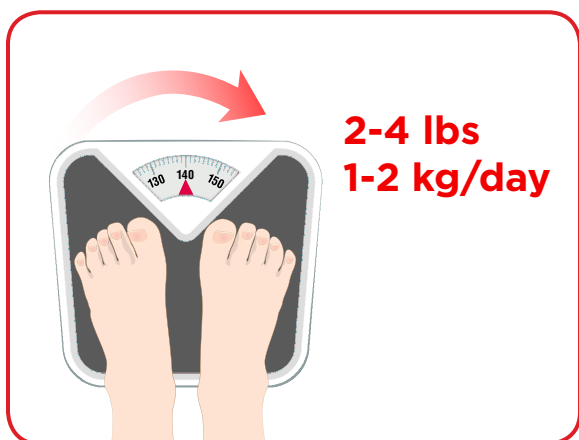


If you cannot reach your transplant coordinator or nephrologist, go to the nearest Emergency Department.

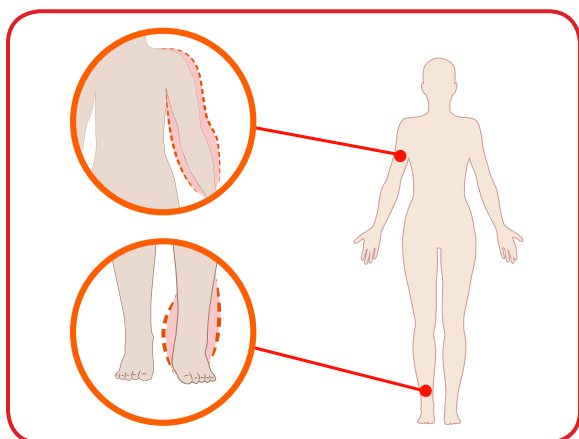
When to call your Transplant team



You have shortness of breath, a dry cough or yellow or, green mucus when you cough.



You have an increase in your weight more than 2 to 4 pounds in a day (1-2 kg/day).



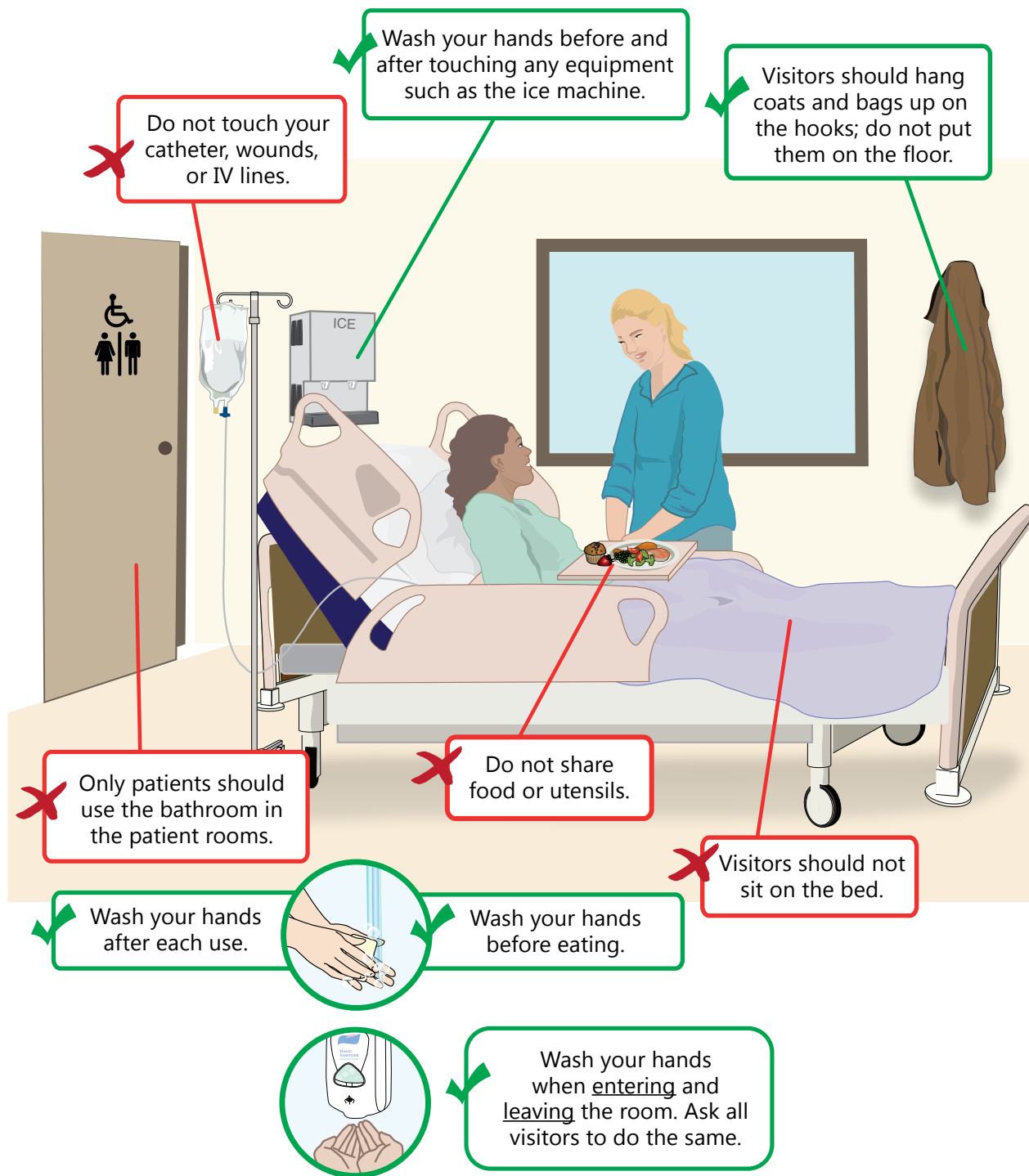
You have swelling in your hands or feet. You have pain or swelling on the arm of your dialysis fistula.



If you cannot reach your transplant coordinator or nephrologist, go to the nearest Emergency Department.

Part 3: Resources

Tips for preventing infection in the hospital room



Websites of interest

Thank the donor family

After your transplant, you can thank the family of your deceased donor if you would like to.

Write anything you wish in an anonymous letter/card and bring it back to your transplant coordinator. They will forward it to Transplant Quebec who can contact the donor's family for you.

For more information, please refer to the Transplant Quebec website:

www.transplantquebec.ca/en/after-transplantation

Resources to help you stop smoking

- Quit line : 1-866-527-7383 (free) or : www.iqitnow.qc.ca
- Quit Smoking Centers, ask your CLSC for information
- The Quebec Lung Association: 1-888-768-6669 (free) or : www.pq.lung.ca
- Smoking cessation clinic at the MUHC: send the consultation by fax: 514-934-8488 (requires referral from your doctor)

For more information on kidney transplant, visit the MUHC libraries

www.muhclibraries.ca/patients/health-topics/kidney-pancreas-transplant/

Transplant Québec

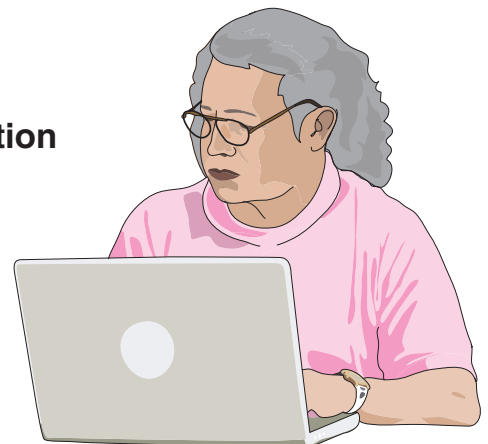
www.transplantquebec.ca/en

For more about anesthesia:

www.cas.ca/english/patient-information

This booklet and many other patient education materials can be downloaded at the MUHC Patient Education Office website:

www.muhcpatienteducation.ca



MUHC contact information

Pre-operative Clinic

Located **near** the cafeteria on **DS1. 2428 (Block D, level S1)**

Tel: 514-934-1934, ext. 34916, Monday to Friday, 7:30 a.m. to 3:00 p.m.

Urology Cystoscopy Clinic

Tel: 514-843-2865

Room: **C03.7158 (Block C, level 3)**

For your double J stent removal

Hospital cards - Admitting-Adult Office

If your address or telephone number has changed, you must go to the **Admitting-Adult Office** for a new hospital card on **CRC.0046 (Block C, level RC, room 0046)**. This is where you will register when you come to the hospital for your transplant surgery.

MUHC Appointment and Referral Centre

If you need to make an appointment at a MUHC clinic (other than the Transplant Clinic), please contact:

Tel: 514-934-8488 Monday to Friday 8 a.m. to 5 p.m.



MUHC parking information






MINIMUM AND MAXIMUM 24H RATES

0-30 minutes	FREE	
4-24 hours	FLAT RATE	\$24
EXPRESS PARKING 4-24 hours	FLAT RATE	\$30



REDUCED PARKING RATE PASSES

WEEKLY PASS	7 DAYS 14 DAYS	\$60 \$85	Unlimited entry and exit at the hospital where the pass was purchased	Available at payment machines
LONG-TERM PASS	30 DAYS	\$70	Certain conditions apply	Available at the Customer Service Parking Office
FLEXI-PASS	7 VISITS	\$100	1 entry 1 exit per visit No expiry date	Available at the Customer Service Parking Office

WHERE TO PAY

	Cash or by credit card Visa or MasterCard	Automated payment machines on each P level
	By debit card or credit card	Customer Service Parking Office on RC level
	By credit card Visa or MasterCard	Barrier gate at exit (hourly parking only)

CONTACT US

	Monday to Friday 8 a.m. to 12 p.m. 1 p.m. to 4 p.m.	Customer Service Parking Office Royal Victoria Hospital Main Entrance D RC.1000 514 934-1934, 32330 Montreal Children's Hospital Main Entrance A RC.1000 514 412-4400, 23427
	If you encounter a problem or have a payment question, please use the intercom located on the automated payment machines. Assistance is available 24 hours a day, 7 days a week.	

Note:

These rates were in effect in May 2018 and could have changed since the printing of this booklet. Please visit this link for the updated information:
<https://muhc.ca/glen/handbook/parking-hospital>

Transplant Clinic information

Address

McGill University Health Centre (MUHC)

Glen Site- Royal Victoria Hospital

1001 blvd Decarie

Montréal, QC, H4A-3J1

Room : Surgical South Clinic - DS1.2833 (Block D, level S1)

Clinic hours

Monday to Friday from 7 a.m. to 3:30 p.m.

Transplant clinic reception

514-934-1934 ext. 34653

Nurse coordinator pre-transplant

514-934-1934 ext. 35222

Nurse coordinator post-transplant

Christa Jeudy 514-934-1934 ext. 36123

Cheryl Desmond 514-934-1934 ext. 36843

Clelie Kelheller 514-934-1934 ext. 34623

When not urgent, please call in the afternoon to avoid interrupting the clinic in the morning.

After clinic hours

**If you have a temperature of 38°C or greater,
or have other major concerns**

Kidney transplant coordinator-on-call through locating at:

514-934-1934 ext. 53333

Advance practice nurse in transplant

514-934-1934 ext. 43651

Transplant Clinic appointment instructions

Place:

McGill University Health Centre - Glen Site Royal Victoria Hospital
1001 Decarie Blvd
Montréal, QC, H4A 3J1

Room: Surgical South Clinic, Block D, level S1 (DS1.2833)

Date: _____

Blood tests at:

Time: _____

Please go to the clinic reception desk for your blood test requisition

Appointment with the doctor and the nurse at:

Time: _____

We will have your blood test results by the time you see the doctor and the nurse

Transplant Coordinator: _____

Telephone Number: 514-934-1934 ext: _____

On the day of your clinic visit:

Before coming to clinic eat your breakfast (unless you have been told not to eat), and take all your medications **except for the Advagraf or Prograf**. **Bring your dose of Advagraf or Prograf with you to the clinic to take after your blood tests.**

Please bring to clinic:

- Your medication sheets
- Your medications and a copy of your pharmacy medication list
- The sheet with the record of your temperature, weight and blood pressure readings
- A list of questions for your doctor and nurse

Temperature, weight and blood pressure record sheet

Record daily temperature, weight and observation.
Bring this information with you at each visit.

DAILY RECORD

DATE	WEIGHT Before Breakfast	TEMPERATURE Before Breakfast	TEMPERATURE Before Supper	BLOOD PRESSURE

[illegible]

