CLINIC VISITS FOR THE POST KIDNEY TRANSPLANT PATIENT
CLINIC DAYS-MONDAYS & THURSDAYS
07:00 TO 12:00 NOON

No clinics on a statutory holiday

Your follow-up visits will be at the Transplant Clinic on 6A. Your first clinic visit will be next Monday or Thursday after you have been discharged from hospital. Your nurse will schedule it before you go home. Further appointments will be made by the clinic. You should plan on spending 3 to 4 hours at the SPH hospital for your clinic visits.

What to bring to clinic visits
- Bring all of your medicines to the first clinic visit
- Your medicines (to take after your blood is drawn)
- A list of your current medicines
- Records of your blood sugar readings if you have diabetes
- A snack or breakfast, especially if you have diabetes

Lab work:
- Please come to the transplant clinic between 0700 and 0830 a.m. to sign in on the yellow sheet and have your blood drawn.
- Do not eat anything, except water for 8-12 hours before these blood draws. Make sure you drink a lot of water prior to your blood tests.
- For patients on Cyclosporin: Your blood must be drawn 2 hours after your morning dose. Sign your name and mark the exact time you took your Cyclosporin that morning.
- For patients on Tacrolimus (Prograf or Advagraf) or Sirolimus-bring your Tacrolimus (Prograf or Advagraf) or Sirolimus with you to the clinic. After your blood work is drawn, you can take all of your morning dose of medications.

Transplant Clinic Schedule:
- Print your name on the yellow sign in sheet so that we know you have arrived.
- Please weigh yourself in kilograms on the scale in the clinic
- Have your Lab work drawn
- Take all of your morning medications after your labs have been drawn
- Meet with the transplant clinic nurse who will record your blood pressure, review all of your medications and discuss how you are doing at home. Please advise the clinic nurse if you require any prescription refills.
• Meet with the transplant doctor any time after 09:30 am. The doctor will review the results of your morning lab work with you.
• If you are diabetic, you may have an appointment with the endocrinologist (Monday clinics only)
• You may also be scheduled to meet with the dietician and social worker
• The transplant clinic nurse will assess your wound, change your dressing and perform any other treatment or care

Before leaving the transplant clinic:
• Ensure that you have all prescriptions that you need. **Please be sure that you have sufficient medications to last you more than two weeks beyond your next clinic visit.**
• Ensure that you have scheduled your next clinic appointment with the Unit Coordinator
• If you are going on vacation, advise your nurse and ensure that you have a travel letter and list of your current medications

Clinic visit schedule after your kidney transplant:

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Clinic Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 weeks after transplant</td>
<td>Clinic Twice a week: Monday and Thursday morning</td>
</tr>
<tr>
<td>6 weeks to 12 weeks</td>
<td>Clinic Every Week</td>
</tr>
<tr>
<td>12 weeks to 24 weeks</td>
<td>Clinic visit every 2 weeks</td>
</tr>
<tr>
<td>24 weeks to 1 year</td>
<td>Clinic once a month</td>
</tr>
<tr>
<td>Over 1 year</td>
<td>Clinic visit every 2-4 months and monthly blood work</td>
</tr>
</tbody>
</table>

If you live near one of the regional transplant clinics, you will be transferred to your referring physician’s care once your kidney transplant is stable. You should expect to stay in Vancouver for up to three months after your transplant.
Home care and Monitoring

Symptoms that you should report to your transplant team

- Signs of infection, including fever and chills
- Inability to take prescribed medication
- Dry cough that lasts more than 1 week
- Sudden weight gain of 2 lbs in two days (This means fluid retention) and swelling of the ankles, hands and abdomen
- Pain, burning, urgency, frequency of urination or persistent blood in the urine or significant decrease in urine output
- Pain, redness, swelling excessive bleeding or discharge from around the transplanted kidney area site
- Cough, shortness of breath or chest pain
- Loss of appetite, nausea or vomiting
- Bruising
- Black stools
- A rash or other skin changes
- Exposure to mumps, measles, chicken pox or shingles
- Unusual weakness or light-headedness
- Illness that requires emergency-room treatment or hospitalization

Your family doctor and dentist are an important part of your post transplant recovery. Medication that has not been prescribed by your transplant team need to be communicated with the transplant nurse since other medication could interfere with your current anti-rejection medications. Please discuss with your transplant team before taking any alternate therapies such as herbal therapies or preparations.
Resuming normal activities:

Most patients are able to return to normal or near-normal activities six to 12 months after their kidney transplant. General guidelines include:

- Avoid overexposure to the sun
- Don’t smoke
- Begin a daily exercise routine to build strength and avoid muscle weakness
- Avoid pregnancy for at least one year following transplant surgery and discuss any plans to become pregnant with the transplant team

Nutritional Management:

The recovery process can be enhanced by a proper diet. For transplant patients, a diet low in fat, sugar and salt will help control weight and blood sugar; limit fluid retention and control blood pressure. Our nutritional transplant dietician can help in developing a healthy food plan to meet your needs.

Clinic contacts:

- St. Paul’s Hospital switchboard: 604-682-2344

**If any of the nurses are unavailable, please leave a detailed message with your first and last name and a return phone number where you can be reached.**

- Transplant Clinic Nurses:
  - If your last name starts with A-G 604-806-9020 Nancy/Jane
  - If your last name starts with H-N 604-806-9811 Sally
  - If your last name starts with O-Z 604-806-9019 Darleen/Linnea

November 2011