

**Tri-State Memorial Hospital
Medical Information Request Form**

Patient Name: _____

Date(s) requesting visit: _____

This patient is requesting a visit of dialysis services at Tri-State Memorial Hospital. I am requesting the following medical information:

- Current History & Physical
- Most recent EKG & Chest x-ray report
- Last three hemodialysis treatment records
- Most recent (current within one month) lab reports, including Hbsag, CBC, Chemistry Panel, Hep C
- Copy of the patient's Chronic Renal Disease Medical Evidence Report (HCFA-2728)
- Copy of current insurance cards
- Current medication list
- Copy of Advance Directive or Living Will
- Copy of Long-Term Care Plan
- Completed visitor hemodialysis form
- Completed pre-admission requisition form

**Tri-State Memorial Hospital
Visiting Patient Dialysis Information**

Dialysis Unit: _____
Unit Address: _____

Unit Phone #: _____ Nephrologist: _____

Requested Dialysis Dates(s): _____

Cause of Renal Failure: _____

Other Medical Problems: _____

1st Dialysis Date: _____

Allergies: _____

Dry Weight: _____ Average Intra-Dialytic Weight Gain: _____

Dialysis Access: _____ Site: _____ Needle Gauge: _____

BFR: _____ DFR: _____

Treatments Per Week: _____ Length of Treatment: _____

Dialyzer: Type and Screen: _____ Membrane: _____

KUF: _____

Dialysate: ACETATE/BICARBONATE (Circle One)

Dextrose: _____ Calcium: _____

Potassium: _____ Sodium: _____

Na Modeling:

Na%: _____ Variation: _____ Length: _____

Heparin Regimen: _____ Bolus Dose: _____ Hourly Dose: _____

Meds Given on Dialysis: Epogen: _____ Other Meds: _____

Lab: Current Report Must Be Attached—Not Hand Carried

Hbsag: _____ Or AntiHbs: _____ HIV: _____

History of Antibiotic Resistant Organisms: Yes No

If yes, What organism(s) and when: _____

HCT (within past month): _____ (If patient is to receive EPO)

Residence while in Lewiston/Clarkston area:

Name: _____

Address: _____ Phone#: _____

City: _____ State: _____ Zip: _____

Tri-State Memorial Hospital Visitor Hemodialysis Guidelines

The dialysis center at Tri-State Memorial Hospital recognizes the uncertainty most patients' feel when they are visiting a dialysis program that presents different staff, routines, etc. Our professional staff of physicians, registered nurses, technicians, social workers, dietitians and others work as team, to provide the highest quality care. The following guidelines will assist you in preparing for your hemodialysis treatments with us.

1. A "light" meal prior to dialysis is generally recommended to avoid stomach upset or low blood pressures during your treatment. Food is not available in the dialysis center. Depending on your scheduled treatment time, you may wish to either bring food with you or visit the cafeteria prior to your treatment. Please do not ask the staff or volunteers to obtain food from the cafeteria
2. Arrive 15 minutes prior to your scheduled time and let the staff know you are here. Please wait in the front lobby until one the nursing staff inform you your chair/station is available.
3. Please wash your hands and access arm prior to the beginning of your treatment.
4. Take your weight and temperature before and after your treatment. An accurate weight is important in determining the amount of fluid to be removed during dialysis (the weight is recorded in kilograms on our scale: 1 kg = 2.2 lbs)
5. Bring the following with you to your chair:
 - Ice (there is an ice machine with cups in the patient kitchen)
 - Blanket (many patients' experience chilling from the overhead cooling vents)
 - Snacks/drink (from home or cafeteria)
6. When your treatment is discontinued, the nursing staff will provide a glove for you or a family member, if clamps are not used, to apply manual pressure at the needle site.
7. When your treatment is completed, discard your own garbage.
8. The dialysis center has two phones for patient use. There is one stationary phone in the front lobby and one portable phone in the center. The phones do not have long distance privileges. Please do not use the phone at the unit secretary or nurse's desk.

If you have any questions regarding these guidelines, please call the Dialysis Center at (509) 758-4656.

Sincerely,

Brenda Grove, RN

Dialysis Supervisor

Dear Visiting Patient and/or Family,

The Renal Dialysis Center at Tri-State Memorial Hospital is pleased to accommodate dialysis patients wishing to travel. We have a state-of-the-art Outpatient Hemodialysis center and staffed with trained Registered Nurses and Patient Care Technicians. We would like to welcome you to our program. This packet has been prepared to facilitate your dialysis needs when you visit us.

Your dialysis time will be arranged on a space available basis. We will make every effort to offer you convenient time that will coordinate with your schedule. Upon your arrival to the area, please contact the Renal Dialysis Center to confirm your treatment day(s) and time(s) as well as provide a local contact number during your stay.

Enclosed is a brochure of the Dialysis Program, *Visitor Financial Responsibilities*, *Visitor Hemodialysis Guidelines*, and a *Visitor Hemodialysis Information* questionnaire. Please pay particular attention to the financial responsibilities that are required prior to your first scheduled treatment with us. Confirmation of your visit will be pending a return of all the requested information and fulfillment of any financial requirements within two weeks of your visit.

All visiting patients are required to see Jose Garcia, M.D., (Medical Director) prior to your first treatment. The visiting patient will be responsible for making his/her appointment with Dr. Garcia. The visiting patient will need to make financial arrangements for this appointment directly with Dr. Garcia's office. His office number is (509) 751-0312.

We look forward to accommodating your travel arrangements. If you have any questions, please contact, Seena Wallace, Health Unit Coordinator/Visitor Coordinator or me at (509) 758-4656.

Sincerely,

Brenda Grove, RN
Dialysis Supervisor