
















Kidney Transplant Recipient CareMap

Before, during, and after your hospital stay

Before Surgery	Day of Surgery
<ul style="list-style-type: none"> <input type="checkbox"/> Talk with your transplant care team about the surgery. <input type="checkbox"/> You will get surgical consent forms to review, study and understand before signing. <input type="checkbox"/> You will get kidney transplant educational materials. <input type="checkbox"/> Referrals to other consult visits will be made, if needed. <input type="checkbox"/> Aim to walk 2 miles a day until your surgery. <input type="checkbox"/> If you smoke or use other types of nicotine; please stop. <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>Forms</p> </div> <div style="text-align: center;">  <p>Walking</p> </div> </div>	<ul style="list-style-type: none"> <input type="checkbox"/> Receive call to come to the hospital. <input type="checkbox"/> Do not eat or drink anything after you receive the call to come to the hospital. <input type="checkbox"/> Bring your home medicine list and medicines for review. <input type="checkbox"/> Bring your hospital “go bag”. <p>At the hospital</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check in at Admitting (3rd floor). <input type="checkbox"/> You will be admitted to hospital on arrival. <input type="checkbox"/> A nurse will take you to the pre-op area. <input type="checkbox"/> An IV line will be placed in your arm to give you antibiotics, fluids, and pain medicine. <input type="checkbox"/> We will give you a heating blanket to keep you warm. <input type="checkbox"/> The care team will prepare you for surgery. <input type="checkbox"/> Your anesthesiology team will take you to the operating room. <input type="checkbox"/> Your first antirejection medicines will be given in the operating room. <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>Phone Calls</p> </div> <div style="text-align: center;">  <p>IV</p> </div> <div style="text-align: center;">  <p>Surgery</p> </div> </div>
Goals	After Surgery
<p>Confirm that you and your care partners understand:</p> <ul style="list-style-type: none"> – The consent forms – What will happen during your transplant surgery – What will happen during your hospital stay – Your care after discharge from the hospital <div style="text-align: center;">  <p>Planning</p> </div>	<ul style="list-style-type: none"> <input type="checkbox"/> You will wake up in either the recovery area or the intensive care unit (ICU). Then you will be moved to the Transplant Unit, 7SA Montlake Tower. <input type="checkbox"/> You will be allowed to chew gum if you have some. <input type="checkbox"/> You will be given sips of water and ice chips to chew. <input type="checkbox"/> You will have a central line or dialysis catheter in your neck. <input type="checkbox"/> You will have a <i>Foley catheter</i> (tube) in your bladder to drain urine for at least 2 days. <input type="checkbox"/> Do not get out of bed without help from hospital staff. Your nurse or physical therapist will tell you when it is okay for you to move on your own. <input type="checkbox"/> Nurses will take vital signs while you are sitting on the edge of bed before you get up. <input type="checkbox"/> Your surgeon will talk with you and your care partner(s) about the surgery. <input type="checkbox"/> You will begin taking transplant and immunosuppression medicines. <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>Water</p> </div> <div style="text-align: center;">  <p>Ice Chips</p> </div> </div>



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Day 1	Day 2	Days 3-4
Treatment and Medicines		
<ul style="list-style-type: none"> <input type="checkbox"/> Transplant Surgery and Nephrology Teams will provide care to you. <input type="checkbox"/> You will need to keep taking your transplant and immunosuppression medicines. <input type="checkbox"/> You will begin taking pain pills instead of IV medicine. 	<ul style="list-style-type: none"> <input type="checkbox"/> Transplant Surgery and Nephrology Teams will continue to provide care to you. <input type="checkbox"/> You will need to keep taking your transplant and immunosuppression medicines. <input type="checkbox"/> Pain will be managed to allow for breathing exercises and increased activity. 	<ul style="list-style-type: none"> <input type="checkbox"/> Transplant Surgery and Nephrology Teams will continue to provide care to you. <input type="checkbox"/> You will receive your last doses of IV antirejection medicines. <input type="checkbox"/> Your care team will talk with you about plans to remove tubes, lines, and drains. <input type="checkbox"/> You will need to keep taking your transplant and immunosuppression medicines. <input type="checkbox"/> Pain will be managed to allow for breathing exercises and increased activity.
Diet and Nutrition		
<ul style="list-style-type: none"> <input type="checkbox"/> You may start a liquid diet and possibly solid foods, if able. <input type="checkbox"/> No carbonated drinks. <input type="checkbox"/> Your nutrition will be assessed by a Dietician. 	<ul style="list-style-type: none"> <input type="checkbox"/> You will return to eating solid foods, if able. <input type="checkbox"/> No carbonated drinks. 	<ul style="list-style-type: none"> <input type="checkbox"/> You will receive education from a dietitian. <input type="checkbox"/> You will eat solid foods, if able. <input type="checkbox"/> No carbonated drinks. 
Activity		
<ul style="list-style-type: none"> <input type="checkbox"/> You will have Physical Therapy (PT) and Occupational Therapy (OT) evaluations if needed. <input type="checkbox"/> Your nurse or PT will have you sit on the edge of bed and begin exercises, with the goal of sitting in a chair 3 to 4 times a day and walking 3 times a day. <input type="checkbox"/> OT will assist you with activities of daily living (ADLs) at the sink. <input type="checkbox"/> Your nurse will teach you about breathing exercises and activity precautions. 	<ul style="list-style-type: none"> <input type="checkbox"/> You should sit in a chair for all meals. <input type="checkbox"/> ADLs will progress to: start using bedside commode or bathroom, as able. <input type="checkbox"/> Follow movement guidelines from PT and OT, continue with exercises, and follow any activity precautions. 	<ul style="list-style-type: none"> <input type="checkbox"/> You should sit in a chair for all meals. <input type="checkbox"/> ADLs will progress to stand at sink for grooming and put on clothes using equipment, as needed. <input type="checkbox"/> Follow movement guidelines from PT and OT, continue with exercises, and follow any activity precautions. <input type="checkbox"/> PT will work with you on stair climbing. <input type="checkbox"/> Try on the clothes from your "to go" bag to ensure that they are comfortable. 






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Education and Discharge Planning		
	<input type="checkbox"/> Teaching: <ul style="list-style-type: none"> • Transplant Coordinators and bedside nurse(s) will discuss self-care with you. • A pharmacist will teach you about your medicines. • A social worker will work with you regarding your discharge plan. • Your bedside nurse will work with you on blood sugar monitoring and taking insulin, if needed. 	<input type="checkbox"/> Practice self-care. <input type="checkbox"/> Finish any teaching that has not been completed.
Goals		
<input type="checkbox"/> To understand and partner with your care team in your recovery and personal care. <input type="checkbox"/> Aim to spend at least 6 hours out of bed. <div data-bbox="564 784 720 938" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center; font-weight: bold;">Care Partner Training</p>  </div>	<input type="checkbox"/> To understand and partner with your care team in your recovery and personal care. <input type="checkbox"/> Review the next day's care plan with your care partners. <input type="checkbox"/> To be able to sit up, stand up, and march in place. <input type="checkbox"/> Understand and restate: <ul style="list-style-type: none"> • How treatment is going • What medicines you are taking and what they do • Daily care goals, follow-up plan • Goal discharge date <input type="checkbox"/> To track and take part in daily monitoring of weight and blood pressure. <input type="checkbox"/> To track blood sugars, if needed. <input type="checkbox"/> To know how to care for incision and watch for signs of infection. <input type="checkbox"/> To take short walks in the hall 3 times a day.	<input type="checkbox"/> To understand and partner with your care team in your recovery and personal care. <input type="checkbox"/> Review the next day's care plan with your care partners. <input type="checkbox"/> Review self-care handouts. <input type="checkbox"/> Understand medicines routine and take all medicines on time. <input type="checkbox"/> To be able to take short walks in hall with walker. <div data-bbox="1871 956 1997 1081" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center; font-weight: bold;">Walk with Walker</p>  </div> <input type="checkbox"/> To move safely on your own and perform ADLs within the precautions from your care team. <input type="checkbox"/> To have a confirmed discharge plan. <input type="checkbox"/> Home supplies and equipment ordered, if needed.

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Day 5: Discharge From Hospital	Self-care / Follow-up
<ul style="list-style-type: none"> <input type="checkbox"/> You will receive an updated list of home medicines. <input type="checkbox"/> You should have full independence. Follow the activity precautions your care team has shared with you. <input type="checkbox"/> You will have your final PT and OT training. <input type="checkbox"/> You will receive final discharge instructions on: <ul style="list-style-type: none"> - Activity - Diet - Medicines (review with pharmacist) - Scheduled follow-up visits - Who to call in an emergency - Weight monitoring - Blood pressure monitoring - Blood glucose monitoring, if needed <input type="checkbox"/> Your care team will sign off on your readiness for discharge. <input type="checkbox"/> You will be discharged from the hospital with your care partner/s. <div style="text-align: right; margin-top: 20px;">   </div>	<p>Continue:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Taking your transplant and immunosuppression medicines, as prescribed. <input type="checkbox"/> Eating solid foods. <input type="checkbox"/> ADLs and exercises. Follow all activity precautions as instructed by your care team. <input type="checkbox"/> Following movement precautions for 10 weeks (until your doctor clears you) <input type="checkbox"/> Self-care: <ul style="list-style-type: none"> - Incision care, watch for infection - Breathing exercises - Weight (once a day) - Blood pressure check (twice a day) - Blood glucose monitoring as instructed, if needed <input type="checkbox"/> Know when to call the Transplant Coordinator Care Team with questions or concerns, and know who to ask for. <ul style="list-style-type: none"> - During business hours call your Nurse Coordinator - After hours, call paging operator 206-598-6190 and request Transplant Surgery on Call, or go directly to UWMC Emergency Room <input type="checkbox"/> Have a low threshold to seek care. Call us with any concerns. <div style="text-align: right; margin-top: 20px;">    </div>