



IRISH KIDNEY ASSOCIATION
SERVICES
for **RENAL PATIENTS**
and **THEIR FAMILIES**
2014

Services



DIRECTORS AND OTHER INFORMATION



**National Honorary
TREASURER**

Valerie Brady, Louth/Meath



**National Honorary
CHAIRMAN**

Stephen O'Sullivan, Galway



**National Honorary
SECRETARY**

Martin Doody, Laois

Patricia May
Eamonn Malone
Peggy Eustace
Teddy O'Neill
Noel McGeever (retired 6/7/13)
Jennifer McDermott (appointed 6/7/13)
John Whelan
Tony Hughes (retired 6/7/13)
Colin Mackenzie (appointed 6/7/13)
Paul Bryan (retired 6/7/13)
Karen Concannon (appointed 6/7/13)
Ellen Flanagan
Ciaran Casey
Seamus O'Farrell

Carlow
Cavan/Monaghan
Clare
Cork
Donegal
Donegal
Dublin East/Wicklow
Dublin North
Dublin North
Dublin South
Dublin South
Kerry
Kildare
Kilkenny

Cathriona Charles
Patrick O'Brien (resigned 27/8/13)
Susan Cannon (appointed 27/11/13)
Deirdre Heslin
Bernadette Munnely
Jerome Burke
Monica Finn
Michael McHugh
Joan Gavan
Vera Frisby (retired 6/7/13)
Raymond Halligan (appointed 6/7/13)
Edward Flood
Liam Buttle

Leitrim
Limerick
Limerick
Longford
Mayo
Offaly
Roscommon
Sligo
Tipperary
Waterford
Waterford
Westmeath
Wexford

CHIEF EXECUTIVE & COMPANY SECRETARY

Mark Murphy

INDEPENDENT AUDITORS

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Chartered Accountants and Registered Auditors
First Floor, 11-12 Warrington Place,
Dublin 2.

PRINCIPAL BANKERS

Bank of Ireland
Permanent TSB

REGISTERED OFFICE

Donor House,
Block 43A, Park West, Dublin 12.

SOLICITORS

Dillon Eustace Solicitors,
33 Sir John Rogerson's Quay,
Dublin 2.

Registered Number 66109
Registered Charity Number CHY6327



Services

OVERVIEW

The Irish Kidney Association is a charitable voluntary organisation founded in 1978. We are dedicated to meeting the needs of kidney patients and their families and carers, living with and affected by end stage renal disease. To this effect, we identify their needs and initiate action to establish services, to satisfy these needs from our resources, complementing and integrating with the mainstream health and education service available from the public authorities. These needs are spread across all aspects of life – medical, social and psychological. We provide services both directly and act as a conduit for accessing services. The profile of the kidney patient ranges from infancy to the elderly who are undergoing various methods of treatment – haemodialysis, peritoneal dialysis (both CAPD and APD) and kidney transplantation.

The focus of a holistic approach to the treatment of the individual directs us to a service encompassing the first treatment stage of early diagnosis combined with proper advice, education and a developed care plan. This approach will enhance the well-being of the patient, their family and carers. Many kidney patients, under the existing approaches and services, are falling into the dependency area. An emphasis, at this stage, on comprehensive education, training and advice will maintain the individual for longer periods with normal renal function. The resultant financial independence, for longer periods, will lead to providing health and social gain. It is also cost effective to the health and welfare systems. Kidney disease affects all age groups, both men and women. The reality of kidney disease is that it may impinge on many strands of a person's life including: health, employment, education, social life and relationships, physical fitness and general well-being.

The progression of this disease means that the patient requires a lifetime of treatment: regular out-patient monitoring, on-going medication, surgery for dialysis access, dialysis, transplantation, failed transplant, re-dialysis, re-transplantation. It is not uncommon for patients to develop additional health problems such as hypertension, bone disease, restricted mobility, cardiac complications, etc.

The prescribed course of the individual's treatments affects: their working life, their home and family life and frequently results in unemployment and loss of meaningful identity.

The net effect, for a family, may be that they rely on disability benefit and related welfare. The additional costs of ongoing medication and care places considerable strain on the individual and their family's budget. Employment opportunities are restricted. Normal life events such as securing a mortgage and life assurance are generally not available, but, if secured, they will incur considerable financial penalties. A simple event, such as booking a holiday with family and friends, will be restricted by the limited availability of holiday centres with dialysis facilities. Whilst the patient is regularly away from home, receiving medical treatment for extended periods of time, the burden of the function of the sole carer and provider of a most stressed family unit falls on the spouse and carers.

The foregoing is the background which motivates our Association to ease the burden and trauma of the patient and family affected by end stage renal disease. The priority of the Association is to ensure that the unmet needs of the kidney patient and family are addressed by the statutory health and education system, either directly from the mainstream or via an Association like ourselves. Within our resources, derived from voluntary donations and fundraising, we attempt to contribute to fulfil these needs directly to the patient and family. In the initial and interim period we implement the particular service until it is either publicly funded or is integrated into an existing mainstream health, education or training service delivery area.

Services

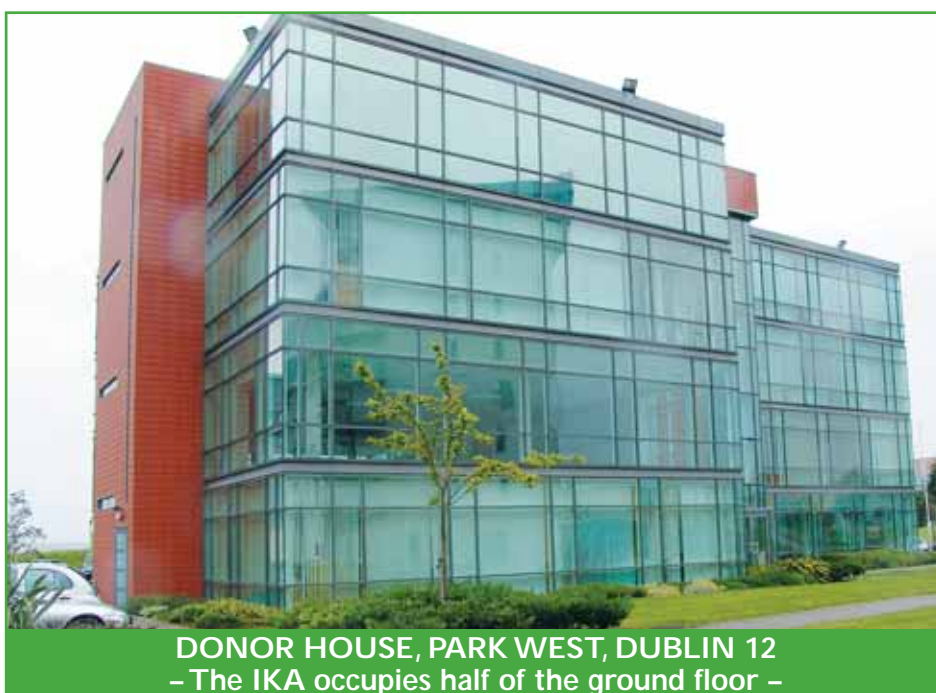


HEAD OFFICE BASED SERVICES

The Irish Kidney Association Head Office is located in the west of Dublin. Named "Donor House" the offices are the main administrative and services centre for the Association.

STAFF POSITIONS:

- Chief Executive
- Accountant
- Patient Support Officer
- Office Manager and Personal Assistant to CE
- Sport & Fitness Manager
- Renal Counsellor
- Dialysis Holiday Co-ordinator
- IT Developer
- Clerical Assistants
- Receptionist
- Support Centre Caretakers
- Patient Trainees



DEVELOPMENT OF RENAL SERVICE POLICY

In co-operation with the Department of Health and Children and the Health Service Executive we voice and advocate the achievement of services to secure positive change in order to enhance the well-being of the kidney patient and their family. This involves continuous communication of regular meetings and discussions with all parties of the health service that has a related interest. The involvement ranges from co-operating in resolving critical immediate issues, to the IKA's input into providing a planned long term improved service. Recognition of the level of commitment, by the IKA in this area, is indicated by the formal appointments of the association:

- Nominees on the Hepatitis C Consultative Council of the Department of Health and Children;
- Executive members of the European Kidney Patients Federation (CEAPIR)
- Members of the International Federation of Kidney Foundations (IFKF)
- Executive members of the European Transplant & Dialysis Sports Federation (ETDSF)
- Executive members of the World Transplant Games Federation (WTGF)

Active members of:

- European Renal Association (ERA),
- European Dialysis & Transplantation Nurses Association (EDTNA/ERCA).



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IKA ORGAN DONOR AWARENESS

The IKA promotes organ donation through constant public donor awareness and education campaigns. This includes printing and distribution of the Organ Donor Card, complete with Fact File.



THE IRISH DONOR NETWORK

In recognition of the advancement in transplantation surgery the IKA joined forces with other interested groups who share a common interest in Organ Donor Awareness.

- The Cystic Fibrosis Association
- The Heart & Lung Transplant Association
- The Liver Transplant Unit, St. Vincents Hospital
- Irish Lung Fibrosis Association
- The Alpha One Foundation
- The Eye Bank

This collaboration has been very successful and the Network is united in its responsibility to improve all organ donations nationally.

The services include intense media awareness campaigns, concentrated into four periods each year – Organ Donor Awareness Week (April), Transplant Sports (Summer), European Day for Organ Donation and Transplantation (October) and Christmas. These campaigns involve the purchase of media space and time. The most critical elements, of the IKA's input into the presentation and content of these campaigns, are the understanding and sensitivity of the fragile request of asking a person to offer the organs of a bereaved loved one for transplantation. This aspect is guaranteed from an association which includes members who have gratefully received transplanted organs. A further reflection of our members' appreciation is the IKA's organisation of the annual Service of Remembrance and Thanksgiving in October.

The IKA employs other methods of public awareness, through the distribution of theme products, that constantly remind the public of the importance of giving the 'Gift of Life' such as the IKA 'Forget-Me-Not' flower and brooch, the donor key ring, car magnet and the IKA Christmas cards. The IKA engages professional, promotional and marketing services to advise on and produce publications, posters etc relating to our donor awareness functions.

The success of our campaigns relies, to a great extent, on the willingness of our members to voluntarily take part in the campaigns by coming forward and sharing, with the public, their story of human interest. A good example of this is a story of a patient who fights his way to fitness to compete for his country in a European or World Transplant Games. Furthermore, it is through the members voluntary efforts that the organ donor card is distributed through the IKA branch network to all corners of the country.



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ORGAN TRANSPLANTS:

	2001	2002	2003	2004	2005	2006	2007	2008
Kidney	124	144	133	147	129	146	146	146
Heart	11	16	15	7	11	14	7	4
Liver	35	38	32	45	57	65	59	58
Lungs	–	–	–	–	3	9	4	4
Total lives saved:-	170	198	180	199	200	234	216	212

PATIENT SUPPORT OFFICER

Based at IKA headquarters, Donor House, the Patient Support Officer focuses on social gain and welfare issues. The diagnosis of kidney failure brings about significant lifestyle changes on the individual, which impacts on employment and re-training needs. Working closely with the Chief Executive and the Counselling service, the Officer oversees the interviewing and assessment of patient needs. In cooperation with statutory agencies, she develops individual and family care plans, and liaises with employers, hospital staff, training authorities and educational institutions, in order to maintain or initiate the process of the patient regaining or maintaining independence.

FINANCIAL PATIENT AID

The IKA subvents additional aid to the standard welfare entitlements. Welfare entitlements do not take account of the life-long aspect of the illness, involving long periods of dependency on welfare, and reduced levels of employment and extra costs directly associated with the patient's particular treatment. These costs can include basic needs of travel to and from dialysis centres, visits to medical practitioners, adhering to a prescribed diet level, drugs, medication costs and education grants. An overall system of developing a standard welfare payment level, in respect of these costs, needs to be put in place. The current system of cost recovery, by medical card and tax credits re medical expenses, barely addresses the level of costs but, at the least, it admits the recognition of the need which exists but remains an unmet need.

COUNSELLING SERVICES

The IKA employs a professionally trained counsellor whose role is to provide a comprehensive and confidential counselling service for those diagnosed with End Stage Kidney Disease, their family members and carers, ensuring that maximum accessibility is achieved for our members. This is the mainstay of the service. Yet, as the service has developed over the years, the role of the counsellor is actually and necessarily much broader than this. This broadening of the role is in response to demands that led to an enhancement of the service provided and permitted its expansion into other related and important areas.

The IKA Counselling Services has three distinct, yet related parts. Firstly, the provision of a confidential counselling service. As the IKA is a national organisation, requests for counselling are received from all over the country. A structure is in place that allows for referral either to the IKA Counsellor, based at Donor House, or if requested and appropriate, a referral to counsellors based in the member's local area. These counsellors are professionally trained and are accredited with their professional body. Secondly, education by means of presentations and inputs to both local IKA branches and Nurse's Study Days and specialist courses. Thirdly, links with the Health Service Executive (HSE) and Department of Health with reference to a specific patient group.

KIDNEY PATIENTS WHO CONTRACTED HEPATITIS C

In conjunction with the Department of Health and Children, the IKA addresses the compensation and health related support issues affecting kidney patients and their families, who contracted Hepatitis C via blood or blood products. The IKA is a nominee member of the Department of Health and Children's Consultative Council on Hepatitis C.

The constant support to this group of patients involves the input from the IKA Counsellor, Patient Support Officer and Chief Executive. These supports incur costs re: legal and professional advice to the IKA; support and information group meetings including patients' travel expenses, room hire and meals; Hepatitis C medical consultant fees and travel; administration and patient support services including counselling; management and control of Hepatitis issues; research, information gathering via journals and internet; consultations with Hepatitis C medical experts; attending nephrology conferences re Hepatitis C issues; secretarial services. These services are reimbursed via a grant from the HSE.

REHABILITATIVE TRAINING AND BACK-TO-WORK SCHEME



The IKA has an rehabilitative training and back-to-work scheme. This programme is utilised by all kidney patients, irrespective of their treatment type. The profile of these participants ranges from individuals whose focus on their illness and low confidence has forced them to have a low level of interest, sufficient to take initiative to improve their position of dependency on welfare; to those who have lost employment, due to sustained periods of illness and require training in a new skill more suitable to the individual's changed circumstances of periods of illness, combined with possibly less physical capabilities.

The introduction and assessment of candidates originates with constant liaison with the IKA Patient Support Officer and the hospitals' renal team members including dialysis nursing staff, patient care co-ordinators, renal nurse counsellors, transplant medical team, social workers, etc. From this a database of potential participants is compiled and individual interview and assessment enables prioritising the most needy candidates for the limited places on the programme. This on-going assessment and training and development is jointly carried out by the IKA Patient Support Officer and the IKA Counsellor. The duration of each course is nine months.



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SUPPORT MAGAZINE



The 'SUPPORT' Magazine is produced 4 times a year and is posted free to members and people who have requested a copy. Each Haemodialysis Unit receives a quantity of copies of each edition. Local branch news is a favourite of many of the patients. Back-dated editions can be read or printed from the website below.



WEBSITE - www.ika.ie

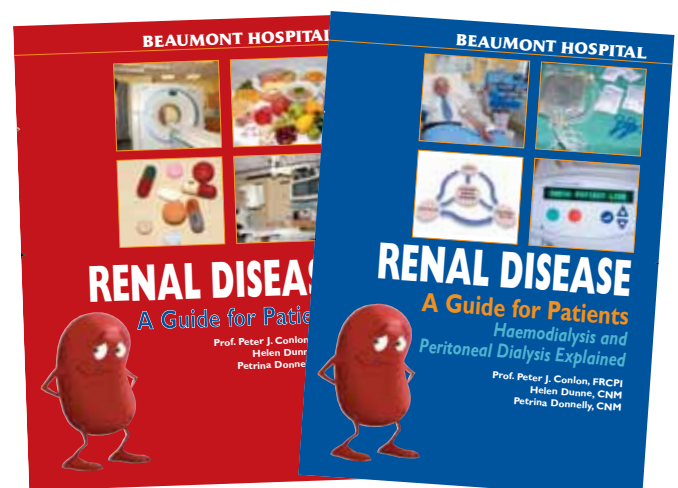
The IKA website is a valuable source of up-to-date information about renal disease and national and international developments. The address www.ika.ie is easy to remember.



INFORMATION AND EDUCATION

The emphasis is that the IKA continues its development as a centre of kidney information and education available to our members, the medical profession and the public. The core of this is the set-up of a dedicated library, located in IKA headquarters, of specialist information books and journals. It includes the sourcing and collection of data on performance and capacity and projected growth levels on the various treatments in Ireland and abroad. It involves active participation, by the directors and staff, with our foreign counterpart agencies in conferences and workshops.

The knowledge gained from these areas is shared out for the benefit of improvement and development of kidney service to the kidney patient directly, hospital/medical personnel, health professionals, the HSE and The Department of Health and Children. It leads into areas such as our input into strategy development of the renal service.



PATIENT SUPPORT MANUALS

The Beaumont Transplant Foundation has produced two manuals for Irish patients. Copies of the manuals are available free from the IKA Head Office or they can be read or printed from the website.

LOCAL BRANCHES

The Association has evolved from the setting up and development of a network of twenty-five IKA branches (three covering the Dublin area and twenty-one covering the rest of the country).

Increasingly, we welcome that more kidney patients are being treated locally. With the increase in dialysis units, outside major cities over the years, and the addition of alternative treatments, peritoneal dialysis at home and transplantation, locally based support systems have become essential. The patients need professional and peer support locally and the existing branch system has the personnel, with first hand experience, to provide these services.

This service is supported by our staff in Head Office, who facilitate and assist our local branch volunteers in dealing with patient requests for practical support. Communicating with local social services, statutory bodies and employers empowers the patient and the family to develop their confidence and independence to deal with the traumatic changes that have occurred in their lives.

This has the effect of our local branches developing a relationship with local social services, local statutory bodies, etc and provides stronger advocacy for the patients which generates greater involvement from the public and our members, leading to a more vibrant Branch support network.



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LOCAL BRANCHES

The progress on branch activities is controlled by regular meetings, supplemented by the quarterly reports from the branches to the Board and Management. The detailed quarterly financial returns, from the Branches are inclusive of analysis of activities and events, outcomes and results, and their related expenditure.

This on-hand local IKA presence, with support from Head Office, leads to an easier adjustment of our patients to their life-changing circumstances. It also assists in their accessing new areas of local support within the community including training programmes and back-to-work schemes previously unknown to them prior to their illness.

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CLARE

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Shannon, Co. Clare.
Ph: 061-472932.

CORK

Michael Costello,
20 Glenwood Court,
Carrigaline, Co. Cork.
Ph: 087-4189817.

DONEGAL

Louise Wylie,
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Muff, Co. Donegal.
Ph: 086-3161341.

DUBLIN EAST + WICKLOW

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Dundrum, Dublin 14.
Ph: 01-2985998.

DUBLIN NORTH

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LEITRIM

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Kenagh, Co. Longford.
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ROSCOMMON

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Co. Roscommon.
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SLIGO

Padraig Gilligan,
Cloonlurg,
Riverstown,
Co. Sligo.
Ph: 087-9416198.

TIPPERARY

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Tramore,
Co. Waterford.
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087-6241114.

WESTMEATH

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Ardcadia,
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Co. Westmeath.
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WEXFORD

Dora Kent,
Newtown, Ramsgrange,
Co. Wexford.
Ph: 086-3745788.

SUPPORT FOR LOCAL INITIATIVES

The recent examples of projects, which were results of local initiatives, are:

- the IKA Respite Centre and Holiday Dialysis Centre in Tramore
- the IKA Renal Support Centre, Beaumont Hospital
- the Kerry Holiday Home

Each year local areas of the IKA are approached to be involved in contributing their support to establishing or upgrading facilities essential to the renal service. Its value and impact is that this contribution overcomes a shortfall in service and acts as an impetus to an optimum service. The provision of Tullamore interim renal dialysis unit in 2003 is a such an example.

General requests, by hospital renal units, for basic needs from local branches of the IKA, are fulfilled in the immediate, whilst, in the meantime, the IKA addresses a more coherent method of ensuring that the service is supplied by the HSE. The basic needs include once-off provision of services to local dialysis units, such as supply of furnishing, installation and supply of TVs and cable TV, chilled water and supply of daily newspapers. Requests by the hospitals, from local IKA branches, are often extended to include a continuous partnership between the hospital and the IKA branch to achieve an improvement in the facilities of the local dialysis unit. This can comprise of the local IKA's personal input into the consultation process, including planning and identifying needs, together with the local IKA's financial contribution to the related project or upgrade. The recent establishment of the National Renal Office by the HSE has greatly enhanced the co-operation between the Association and the HSE in general, as well as establishing the opportunity to develop renal services nationally in a planned, structured way.

RENAL SUPPORT CENTRE

The Irish Kidney Association Renal Support Centre is in operation since 2000. The Centre, located in the grounds of Beaumont Hospital, just 100 metres walk from the main hospital entrance, is open all year round. and provides free accommodation for all its residents which include:

- Families of renal patients from outside Dublin. It is available to all families no matter what Dublin hospital their family member is attending.
- Renal patients who have to travel long distance to see their consultant as an outpatient may stay overnight.
- The Centre arranges a counselling service as required by outpatients and their families.
- Preference for accommodation is given to families of patients receiving transplants from deceased and living donors and families of the seriously ill.



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FACILITIES

- Ten en-suite bedrooms which can sleep up to four persons. All rooms are on ground floor level.
- All rooms have TV.
- All rooms can be in direct contact to and from the hospital ward by telephone.
- Comfortable sittingroom/day room with satellite TV and video.
- Small library.
- Fully fitted kitchen where meals can be prepared by residents. Tea and coffee is provided for residents and guests.
- Laundry room with washing powder supplied. Ironing facilities are also available.
- Parking for overnight residents only.



The Renal Support Centre is owned and funded by the Irish Kidney Association. Donations from residents and fundraising initiatives are most welcome.

- The Centre is open to residents all year round.
- Day facilities are available Monday to Friday from 9.30am to 5.30pm, Saturday and Sunday 12pm-4pm.

For further information contact:
**IKA RENAL SUPPORT CENTRE,
BEAUMONT HOSPITAL, DUBLIN 9.**

Tel: 353-1-837 3952.

Fax: 353-1-837 3974

Email: renalcentre@ika.ie

RESPITE SERVICE, WATERFORD

The IKA have four holiday apartments in Tramore, Co. Waterford. The recently refurbished holiday centre operates for six months of the year.

We purchased the property next door which we have renovated and transformed it into a dialysis centre. We wish to provide haemodialysis on site so that we can provide 200, 'one-week' holidays throughout the whole year for our 1,700 dialysis patient base. We are still only envisaging 12% of our patients, on dialysis, receiving respite care in this manner. Indeed dialysis has to be provided in order that they can avail of such respite care. This respite would be even more beneficial to the patients as they would enjoy a one-week holiday whilst receiving their dialysis in a situation more homely than a 'hospital' setting.

The complete facility, old and new, is all on ground floor level and suitable for the elderly. Our patients have an older age profile, over 60 is now the average age when someone commences dialysis. The haemodialysis patient is, by far, the neediest type of renal patient and their quality of life is greatly reduced by the treatment that is essential to keep them alive. We, in general, endeavour to prioritise our more needy patients, who cannot afford to accommodate themselves or dialyse themselves anywhere in the country. Our emphasis is also on patients who have not managed to receive a holiday in the last 2-3 years.



KERRY HOLIDAY HOME

The PuncHESTOWN Kidney Research Fund (PKRF), in partnership with the IKA, are both delighted with the success of the holiday home in Tralee, Co. Kerry, for kidney patients' holidays.

The holiday home is located close to the centre of Tralee town and is a spacious four bedroom detached dormer style bungalow, set in its own grounds, in a small housing development, close to all local amenities. The kidney patients have access to dialysis treatment in Tralee General Hospital and thus they can go avail of a holiday in the knowledge and comfort that they have their lifesaving dialysis close at hand.

DIALYSIS HOLIDAYS ABROAD

Patients on dialysis must have their dialysis treatment whilst they are on holidays. There is no holiday escape from the treatment. This makes travel complicated for the haemodialysis patients. Haemodialysis treatment times must be secured well in advance of travel. Current virology tests must be completed and sent to the holiday dialysis centre in the country you are travelling to. The protocols, for treatment in the foreign dialysis centre, must suit your own dialysis centres requirements. You should never book a flight or accommodation abroad until your foreign treatments are secured. The CAPD holiday patients must order their necessary supplies in advance. The supplies must be delivered to their destination, before they embark on their journey. Baxter Healthcare provide this excellent worldwide service to the CAPD patients.

The IKA has a dedicated dialysis holiday co-ordinator who not only manages the bookings to the Tramore and Tralee holiday facilities, but also helps patients to source foreign haemodialysis treatment. Many countries require payments for haemodialysis treatments but many also accept the European Health Insurance Card (known previously as the E111) for payment.

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HEALTH PROMOTION THROUGH SPORT

The IKA's sports programme is rehabilitative in its focus. The programme caters for all ages and abilities of people who have experienced organ failure (transplant recipient or people on dialysis). A wide range of sports are offered ranging from athletics and badminton to golf and ten-pin bowling with the emphasis on participation and enjoyment.

The programme encourages people to be actively involved in enhancing their own health. To give people a focus, goals are offered throughout the year. These include the National Transplant & Dialysis Games, the European Transplant & Dialysis Games and the World Transplant Games which are offered in alternate years. Strong



links also exist with Transplant Sport UK which has led to our participation in events such as the 5-Nations Golf tournament and the annual UK Transplant Badminton tournament.

One of the strengths of the programme is its emphasis on developing social opportunities for people. The peer support that is generated is the cornerstone of its success. The support of family during times of ill-health is crucial and the IKA recognises this. Consequently, every effort is made to include family in all our sports activities.

The IKA employs a designated person to drive forward the sports programme and promote healthy living through exercise and diet amongst its members. It also funds regular sports sessions, sources coaching expertise, when needed, and hosts the annual National Transplant & Dialysis Games.



The IKA is hosting the 6th European Transplant and Dialysis Games in Dublin from the 8th-15th August, 2010.

○ Haemodialysis Patients
○ Peritoneal Dialysis Patients





IRISH KIDNEY ASSOCIATION MEMBERSHIP APPLICATION FORM



BLOCK CAPITAL LETTERS PLEASE:

Mr. ☐ Mrs. ☐ Ms. ☐ FIRST NAME: _____ INITIAL: _____

SURNAME: _____

ADDRESS: _____

PHONE: _____ MOBILE NO: _____ EMAIL: _____

ARE YOU A RENAL PATIENT: YES ☐ NO ☐

IF YES, PLEASE INDICATE YOUR
CURRENT PATIENT STATUS

Please update our records when / if
Status changes.

PRE DIALYSIS ☐
HAEMODIALYSIS ☐
APD ☐
CAPD ☐
TRANSPLANT ☐

HOSPITAL YOU ARE ATTENDING: _____

IF YOU ARE NOT A PATIENT, PLEASE INDICATE INTEREST IN MEMBERSHIP

RELATIVE OF PATIENT: ☐ FRIEND OF PATIENT: ☐ GENERAL INTEREST: ☐

I AM OVER 16 YEARS OF AGE: YES ☐ NO ☐

I AM UNDER 35 YEARS OF AGE: YES ☐ NO ☐

AS A MEMBER YOU WILL AUTOMATICALLY RECEIVE OUR "SUPPORT MAGAZINE". ARE
THERE ANY OTHER ASSOCIATION MEMBERS AT YOUR ADDRESS?

YES ☐ NO ☐

WOULD YOU LIKE CORRESPONDENCE FROM THE BRANCH WITHIN YOUR LOCAL AREA?

YES ☐ NO ☐

WOULD YOU LIKE CORRESPONDENCE FROM THE YOUTH SECTION OF THE IKA

YES ☐ NO ☐

TO BECOME A VOTING MEMBER OF THE ASSOCIATION YOU MUST SUBSCRIBE TO THE
MEMORANDUM & ARTICLES (Rules & Regulations) OF THE ASSOCIATION (COPY AVAILABLE
ON REQUEST).

I SUBSCRIBE TO (SIGNED UP TO AND ACCEPT) THE MEMORANDUM & ARTICLES OF THE IRISH
KIDNEY ASSOCIATION LIMITED.

SIGNATURE: _____ DATE: _____

Please return the completed, signed form to the
Irish Kidney Association, Donor House, Block 43A, Park West, Dublin 12.
There is no subscription charge.

MEMBERSHIP FORM

GLOSSARY... SOME MEDICAL SHORTHAND

AAA abdominal aneurysm
AC before food
AD Alzheimer's disease
AE air entry
AIDS acquired immunodeficiency syndrome
APD automatic peritoneal dialysis
ARF acute renal failure
AS aortic stenosis
AXR abdominal X-ray
BBV blood borne virus
BD twice daily
B(N)O bowels (not) open
BP blood pressure
BS breath sounds
CAPD continuous ambulatory peritoneal dialysis
CKD chronic kidney disease
CRF chronic renal failure
CN I-XI cranial nerves 1-12
CP chest pain
CSU catheter specimen urine
CT computed tomography
CVA cerebrovascular accident
CXR chest X-ray
D&V diarrhoea and vomiting
DTP diphtheria, tetanus, pertussis
DVT deep vein thrombosis
EDD estimated date of delivery
EMU early morning urine
ERSD end stage renal disease
FBC full blood count
FHx family history
GFR glomerular filtration rate
Hb haemoglobin
HEP B Hepatitis B
HEP C Hepatitis C
Hib Haemophilus influenzae (b)
HIV human immunodeficiency virus
HPc history of Pc
HS heart sounds
Ht haematocrit
IVP intra venous pyelogram
Ix investigations
JPS joint position sense
JVP jugular venous pressure
KUB kidneys, ureters, & bladder
LFTs liver function tests

LMP last menstrual period
LOC loss of consciousness
LRD living related donor
LT light touch
Mane in the morning
MCS microscopy, culture & sensitivity
MCV mean corpuscular volume
MI myocardial infarction
MMR measles, mumps, rubella
MRI magnetic resonance imaging
MRSA methicillin resistant staphylococcus aureus
MS multiple sclerosis
MSU mid-stream urine
N&V nausea and vomiting

Nocte at night
NPL no perception of light
OCp oral contraceptive pill
OD once daily
ODQ on direct questioning
O/e on examination
OTC over the counter
Pc presenting complaint
PD peritoneal dialysis
PMHx past medical history
PN percussion note
PND paroxysmal nocturnal dyspnoea (waking SOB)
POM prescription only medicine
PP peripheral pulses
PR per rectum
Prn when required
PSM pan-systolic murmur
PTA pancreas transplant alone
PU passing urine
Qds four times a day
RBC red blood count
RRT renal replacement therapy
RTA road traffic accident
Rx treatment, prescription
S/c sub-cutaneous
SHx social history
SI sexual intercourse
SL sub-lingual
SOA swelling of ankles
SOB shortness of breath
SOBAR SOB at rest
SOBOE SOB on exertion
SPK simultaneous pancreas & kidney transplant
STD sexually transmitted disease
TB tuberculosis
Tds three times a day
Tx Transplant
TIA transient ischaemic attack
U&E urea and electrolytes
USA unstable angina
USS ultrasound scan
VRE vancomycin resistant enterococci
WR Wassermann reaction
X/7 number of days
X/12 number of months
X/52 number of weeks

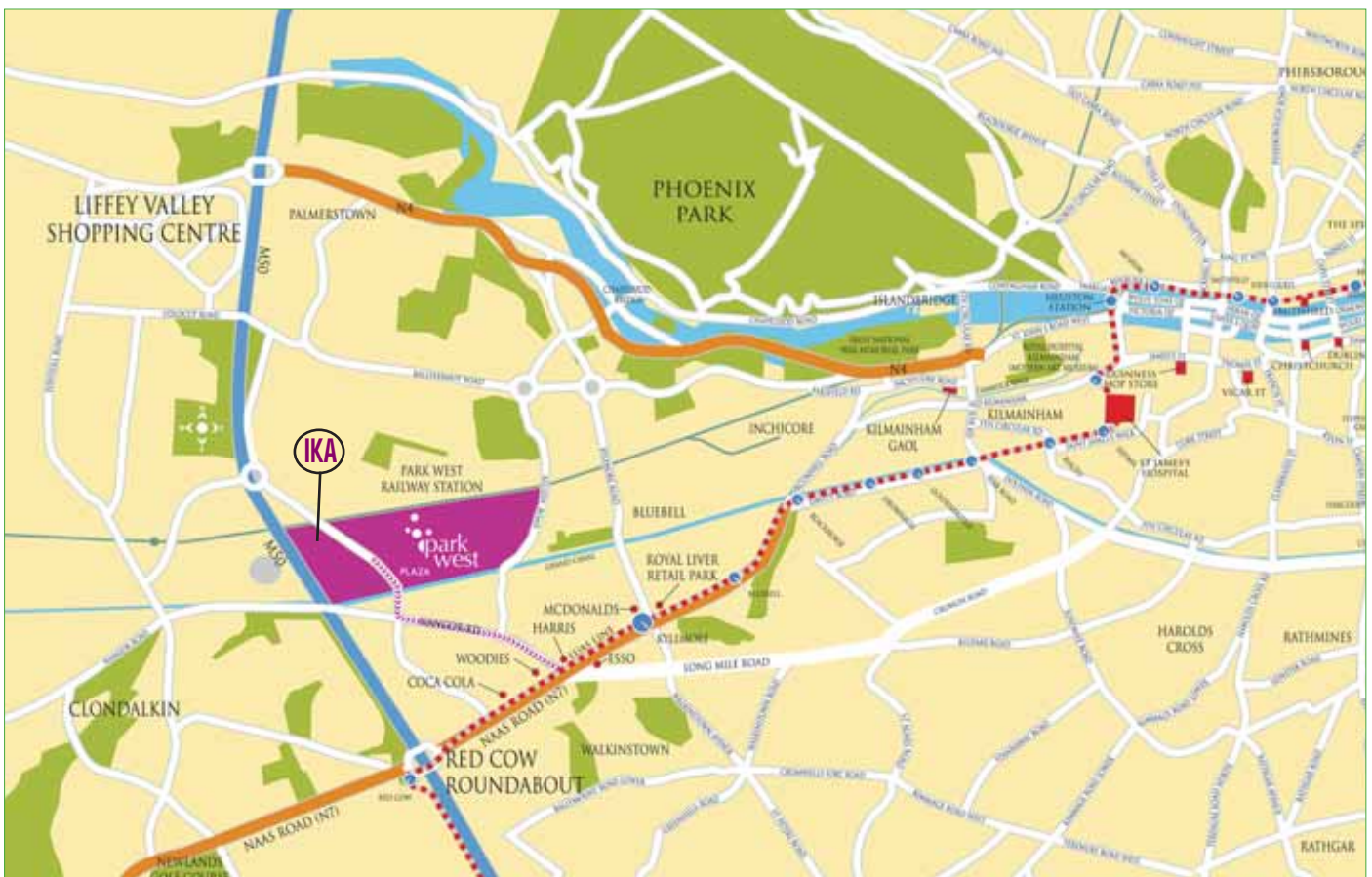
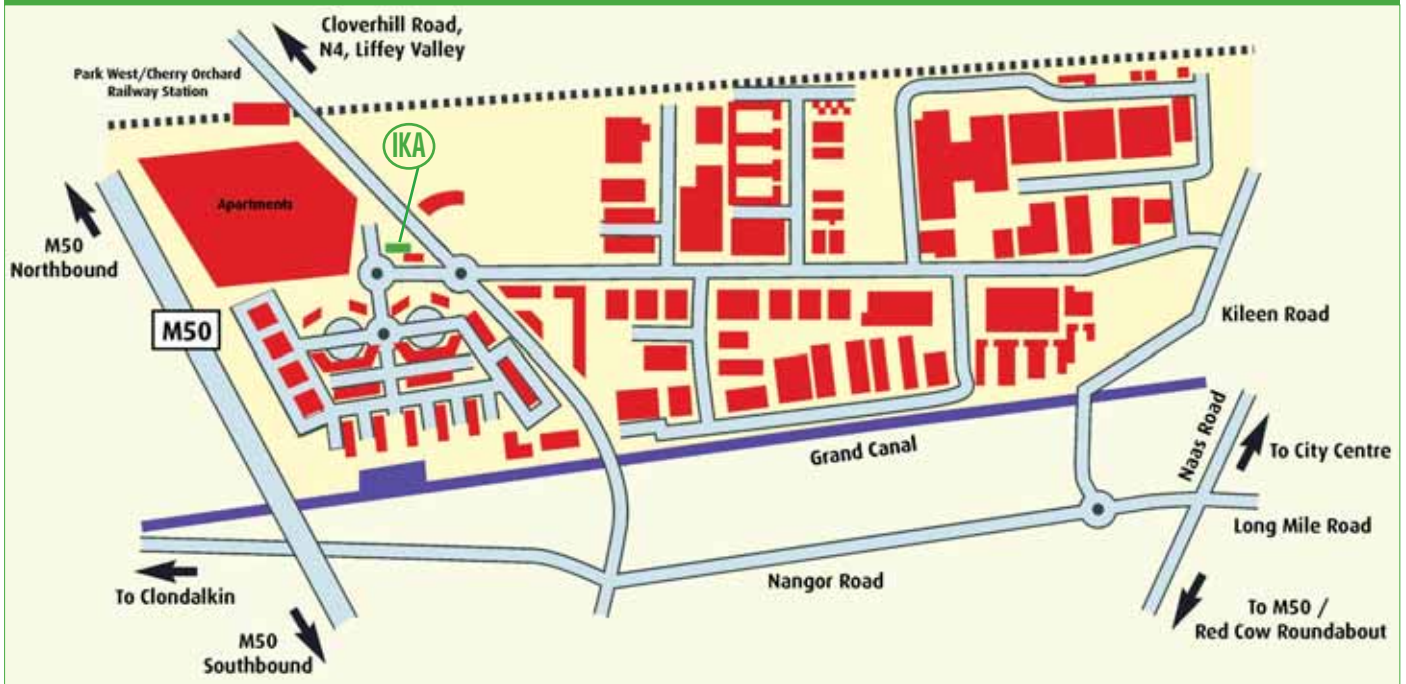
KNOW YOUR HOSPITAL...

Since the Health Services Executive has come into being the following codes are now being used widely by health service professionals:

AMNCH St. James, Tallaght
(Adelaide and Meath Hospital incorporating the National Children's Hospital)
BH Beaumont Hospital
CGH Cavan General Hospital
CUH Cork University Hospital
KGH Kerry General Hospital
LGH Letterkenny General Hospital
MGH Mayo General Hospital
MMH Mater Misericordiae Hospital
MPRH Merlin Park Regional Hospital
MRHT Midland Regional Hospital Tullamore
MWRHD Mid-Western Regional Hospital Dooradoyle
SGH Sligo General Hospital
SVUH St. Vincent's University Hospital
WRH Waterford Regional Hospital

Services

HEAD OFFICE - 'DONOR HOUSE' LOCATION MAPS





*The 'Forget-Me-Not' flower is the IKA's symbol for transplantation.
The old wood of the emblem represents the failed organ
and the bandaged graft, with the new flower,
symbolises the transplanted life-giving donor organ.*

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