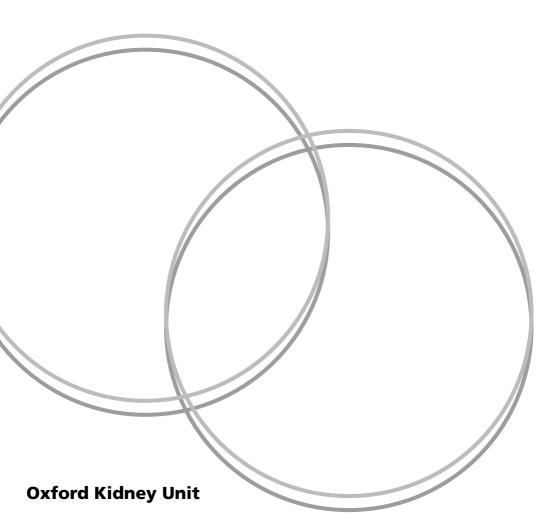


Renal Dietitian Patient Transfer

Information for Staff



Dietary Advice

Renal patients receiving dialysis will have been given dietary advice by the dietitian. This may include limiting potassium and phosphate rich foods.

All renal patients are advised to limit their salt intake. Try to avoid adding salt during cooking and please do not offer salt at the table. Pepper at the table is fine.

Renal patients on dialysis will often be on a fluid restriction. This includes all drinks, milk on cereal and liquid nutritional supplements. The fluid restriction is generally calculated by adding 500ml to the previous days urine output or as advised by their consultant. We will inform you if a patient needs to follow a fluid restriction and how much this is.

Protein intake is important for renal patients who have dialysis and we recommend they aim to have a good protein portion for two of their meals each day. The dietitian can offer further advice about portion sizes if required.

Many renal patients have a poor appetite and may need nutritional support. The dietitian can advise on this.

Please see the tables below for more information regarding the renal diet:

Beverages:

Foods to avoid:	More suitable alternative:
 Coffee, hot chocolate, malted drinks fruit Juice high Juice Squash, Ribena cola and dark fizzy drinks 	 Tea 1 x weak coffee/day squash light coloured fizzy drinks

Fruit:

Foods to avoid:	More suitable alternative:
 Apricot banana coconut mango large oranges cantaloupe and honeydew melon rhubarb all dried fruit 	 Apples berries (handful) cherries (handful) cherries (handful) clementine/ satsumas grapes (handful) tinned fruit with juice drained off

Vegetables:

Foods to a	void:	More suitab	le alternative:
 Asparagus aubergine baked beans beetroot celery mushroom parsnips spinach sprouts 	• sweetcorn Limit to 1 small tomato per day. You may use a small amount of tinned tomatoes to flavour a dish e.g. lasagne or bolognaise	 Broccoli cabbage carrots cauliflower cucumber green beans lettuce peas 	 peppers (capsicum) swede/ turnip Boil vegetables rather than steam or microwave, and then discard the water.

Carbohydrates:

Foods to avoid:	More suitab	le alternative:
 Chips jacket potatoes instant potato products such as croquettes 	 Bread couscous noodles pasta rice 	• Small portion of boiled potatoes, boiled then mashed potatoes or par-boiled roast potatoes

Cereals & grains:

Foods to avoid:	More suitable alternative:
 All bran muesli fruit & fibre, cereals with dried fruit nuts or chocolate 	 Branflakes cornflakes porridge rice krispies shredded wheat shreddies weetabix

Protein foods:

Foods to avoid:	More suitable alternative:
Sausages	 Fresh meat and poultry
• bacon	• fish
 reformed ham 	• eggs
• tinned meat	Quorn and tofu
 chicken nuggets and kievs 	 lentils and pulses

Milk and Dairy:

Foods to avoid:	More suitable alternative:
 Condensed/ evaporated milk milk powder cheese spread such as Dairylea or Primula 	 250ml / ½ pint octtage cheese milk per day Coffee mate/ Compliment plant milk alternatives Yoghurt fromage frais cottage cheese cream cheese mozzarella brie feta hard cheese (2-3 times a week)

Puddings and desserts:

Foods to avoid:	More suitable	e alternative:
 Christmas pudding chocolate sponge bread & butter pudding banoffee pie other desserts with dried fruit, nuts or chocolate 	 Fruit pie/ crumble (see which fruits are suitable above) plain/jam sponge trifle 	 cheesecake jelly meringue milk pudding mousse

Cakes and biscuits:

Foods to avoid:	More suitable alternative:
 Chocolate cake coffee cake fruit cake garibaldis chocolate biscuits fig rolls 	 Sponge cake iced buns cherry cake digestives shortbread hobnobs ginger nuts

Snack foods:

Foods to avoid:	More suitable alternative:
 Potato crisps nuts seeds chocolate toffee fudge fruit gums & pastilles liquorice 	 Corn / wheat / rice snacks e.g. Wotsits Doritos popcorn Sunbites Snack a Jacks Boiled or jelly sweets, mints marshmallows

Foods to avoid:	More suitable alternative:
 Peanut butter chocolate Spread marmite/ Bovril all soups salt (including sea salt and rock salt) salt substitutes e.g. Lo-Salt, Balance, So Lo 	 Jam/ marmalade honey lemon Curd Garlic, herbs mayonnaise pepper spices vinegar

Phosphate binder

If the patient has been prescribed a phosphate binder, this will need to be given with meals i.e. breakfast, lunch, evening meal. Sometimes they are also taken with certain snacks – the dietitian will advise on this. Below are the types of phosphate binders and how they should be taken:

Calcichew (calcium carbonate)	Chew thoroughly 10-15 minutes before or immediately before food
Phosex or Renacet (calcium acetate)	
Osvaren (calcium acetate and magnesium carbonate)	Swallow whole after the first 2-3 mouthfuls of food
Renvela or Renagel (sevelamer carbonate or sevelamer hydrochloride)	
Renvela powder (sevelamer carbonate)	Dissolved in 60ml of cold liquid and take after the first 2-3 mouthfuls of food
Fosrenol tablets (lanthanum carbonate)	Chew thoroughly towards the end/immediately after eat meal
Fosrenol powder (lanthanum carbonate)	Mix with a small amount of food and eat immediately

The renal dietitians will be reviewing the patient when they attend dialysis or in clinic and will contact you if there are any issues. If you would like to speak with them, **please call 01865 225 061**.

Disclaimer

The dietitians can only provide advice or information to patients cared for under the Oxford Kidney or Transplant Unit (Churchill hospital). This includes the network units at Banbury, High Wycombe, Milton Keynes, Stoke Mandeville and Swindon (Great Western Hospital). If you do not attend these sites, then please contact your local care team.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Authors: Renal Dietitian Team December 2021 Review: December 2024 Oxford University Hospitals NHS Foundation Trust www.ouh.nhs.uk/information



Hospita Charity

Making a difference across our hospitals

charity@ouh.nhs.uk | 01865 743 444 | hospitalcharity.co.uk OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)