

Name:	
Telephone:	
Dialysis Unit:	Phone:
Allergies:	
Blood type:	
Emergency Contact:	Phone:
<p>To file a grievance please contact Network 14 at 1-877-886-4435*info@nw14.esrd.net*4040 McEwen Rd Suite 350, Dallas, TX 75209*www.esrdnetwork.org</p>	

Keep Your
Health Information
Together!



End Stage Renal Disease Network of Texas, Inc. (#14) under contract # HHSM - 500 - 2013 - NW014C with the Centers of Medicare & Medicaid Services Baltimore, MD.

Questions patients should ask after hospital discharge.

1. Have my current medications changed?
2. Can you go over my lab work?
3. Has my dialysis prescription or schedule changed?
4. Can you go over my hospital discharge orders?
5. Are there any changes in my condition or diet since I left the hospital?

Be sure to tell your doctor if you received a blood transfusion while in the hospital!

	DATE GIVEN	NAME OF PRODUCT	NEXT APPT
Influenza			
Zoster (shingles)	1		N/A
Pneumococcal polysaccharide			
HPV (human papillomavirus)	1		
	2		
	3		
Td, Tdap (tetanus, diphtheria, Pertussis)			
Varicella	1		
	2		
Measles, mumps rubella (MMR)	1		
	2		
Hep A	1		
	2		
If Combo*			
Hep B	1		
	2		
	3		
Meningococcal			N/A

*Combination products should be documented under each component.

Questions patients should ask before going to the hospital.

1. Will my dialysis prescription change while in the hospital?
2. Will I still get my dialysis?
3. Will I receive a copy of my lab work?
4. Is my condition related to my dialysis?
5. Will I take the same medications?