

Joint statement from professional and patient societies on dialysis away from base (DAFB) in the UK

COVID-19 infection is decreasing across the UK and the government has published its proposed [roadmap out of lockdown restrictions](#). As infections are reducing, patients are keen to make plans for holidays. This advice applies irrespective of the DAFB type (Haemodialysis or Peritoneal Dialysis). **This guidance only applies if shielding or local lockdown is not in place in base or destination units.**

Opening up DAFB is a local decision based on resources and the COVID-19 situation in each unit. We recommend that all units actively consider this question at the earliest opportunity, keep any decisions under review, and ensure that DAFB status is communicated so that patients are aware.

Patients receiving dialysis remain clinically extremely vulnerable to COVID-19 compared with the general population and transmission has occurred in dialysis units. We recommend that dialysis away from base ([DAFB](#)) should be discussed on an individualised basis between the patient and their clinical team using the principles stated below. Information on incidence of new COVID-19 infections in UK dialysis units can be found on the latest [Renal Registry report](#)

1. Assess risk based on the current incidence of COVID-19 in the base unit / locality and the designated unit/locality for DAFB.
2. Ensure that there is a documented discussion between the clinical staff at the base unit and the DAFB centre for shared awareness of COVID-19 rates and confirmation of number of recent COVID-19 infections in the base unit or receiving service. Ensure that the patient is aware in advance of the local protocols that they will need to follow.
3. Those wishing to have holiday dialysis should have received 2 doses of COVID-19 vaccine separated by at least 3 weeks before travelling. Travel should ideally be at least 2 weeks after the 2nd dose to build up an immune response. However, if a patient has refused vaccination or been unable to be vaccinated this should not exclude them being considered for DAFB.
4. Patients should have a negative PCR COVID-19 swab 3-5 days before travel.
5. On return to the base unit, patients should dialyse in isolation for 2 weeks, and have COVID-19 tests as per unit protocol. The base unit should consider its capacity to isolate patients on return from holiday whilst planning the timing of patients' holidays.
6. Patients should not travel if they are a close contact (within 2m distance for at least 15 minutes) of any individual with COVID-19 infection, including other

patients on the dialysis unit, within the preceding 14 days. Or been advised to self-isolate for any reason.

7. Patients should not travel if they have symptoms of COVID-19 or are awaiting a COVID-19 PCR test result.
8. Patients should not travel if they have planned surgery within 14 days after the proposed holiday return date as they will be asked to self-isolate for 14 days before the operation.
9. Patients should follow the local guidance for high risk prevalence, in the DAFB locality. This guidance is likely to vary with time and between areas.
10. Advise patients to take out travel insurance before making any bookings due to the risk of sudden cancellations. Check what is covered by travel insurance in the event of an infection with COVID-19 just before or during the holiday.

Additional resources

UK holiday arrangement and dialysis swap service (free service)

<https://dialysisfreedom.co.uk/>

Kidney Care UK Holiday grant support

<https://www.kidneycareuk.org/get-support/holidays-and-respite-breaks/>

NKF website holiday advice section

<https://www.kidney.org.uk/holiday-guide-for-kidney-patients>