The National Kidney Foundation

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STRUCTURED POST-TRAVEL INFECTION SURVEILLANCE FOR SAFEGUARDING HAEMODIALYSIS PATIENTS

Nur Faezah Binte Mohamad Adam[1], Lu Wenxian[1], Nur Syafiqah Shamsuddin[1], Lily Tan[1], Rebecca Tang[1], Zhang Xia[1], Pauline Tan[1], Jason Choo[2]

[1]Nursing Services, The National Kidney Foundation, Singapore

[2]Medical Services, The National Kidney Foundation, Singapore

INTRODUCTION

International travel among haemodialysis (HD) patients poses significant infection risks due to varied global infection control standards, including potential transmission of HIV, Hepatitis B, and Hepatitis C.

OBJECTIVE

To mitigate these risks, a structured workflow was developed to guide nurses in monitoring patients returning from overseas and HD optimise patient safety, to prevent Sero convertion and cross contamination.

METHODS

A structured, multi-step approach was adopted,consisting of three core components: country risk stratification, a risk assessment questionnaire, and surveillance protocol:

Picture 1*: Three-step approach for post-travel HD surveillance & Intervention*

1. Country Risk Stratification

Countries were categorised into risk levels using NHS travel guidance for HD patients (Table 1).

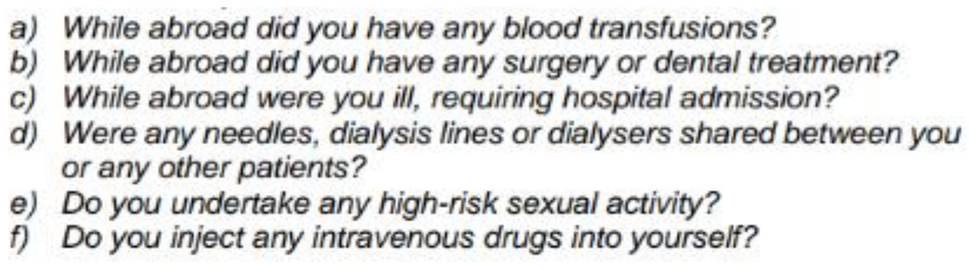
Table 1*: Country risk levels*

Risk Category	Countries/Areas
Low Risk (LR)	United States, Canada, United Kingdom, Australia, New Zealand and Japan
Medium Risk (MR)	Countries not listed under HR and LR
High Risk (HR)	Indian subcontinent (Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka) and Africa

2. Risk Assessment Questionnaire to Identify Risk Exposure

Captured travel details, dialysis arrangements, medical needs, and potential exposure activities. High-risk classification also applies if any “Yes” responses given in the Risk Assessment Questionnaire.

Picture 2*: Risk Assessment Questionnaire*



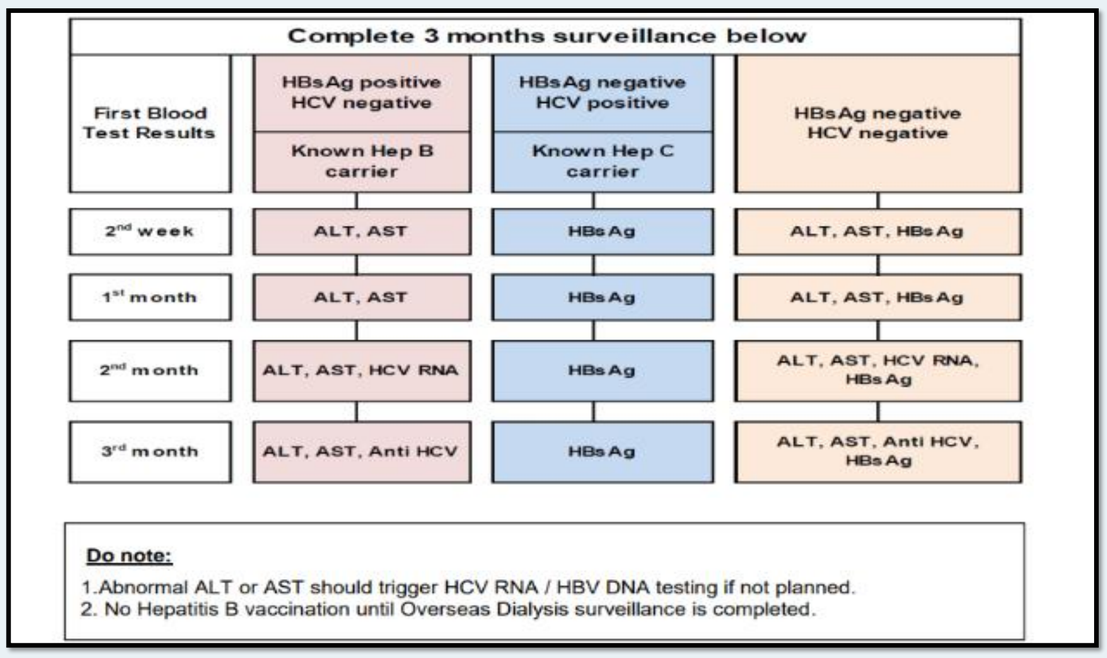
a) *While abroad did you have any blood transfusions?*
b) *While abroad did you have any surgery or dental treatment?*
c) *While abroad were you ill, requiring hospital admission?*
d) *Were any needles, dialysis lines or dialysers shared between you or any other patients?*
e) *Do you undertake any high-risk sexual activity?*
f) *Do you inject any intravenous drugs into yourself?*

3. Surveillance Protocol & Intervention

- Low-risk countries: One-time blood test after travel
- Medium/high-risk countries: Three months surveillance

METHODS (Cont’d)

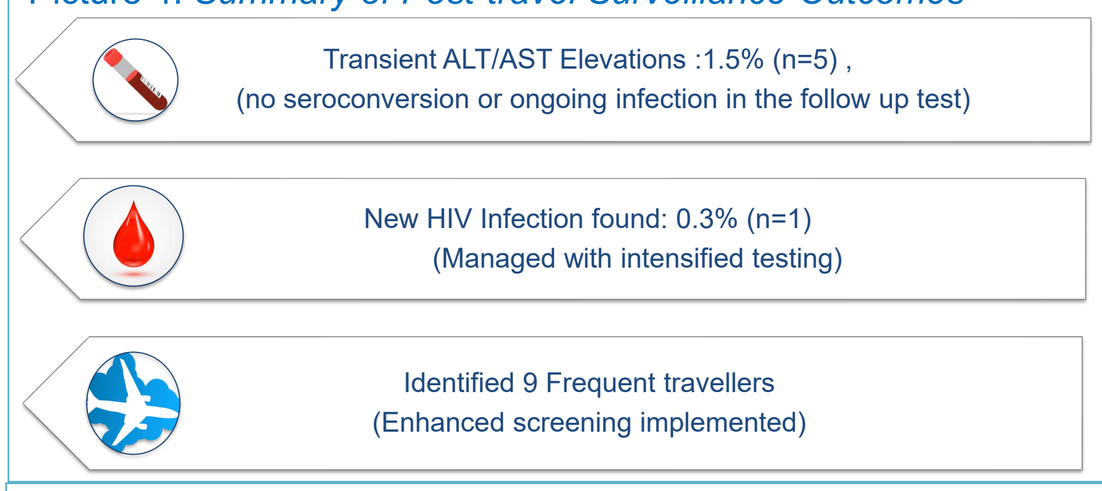
Picture 3: Blood Surveillance Protocol & Intervention



RESULTS

From June 2023 to March 2025, 338 patients underwent post-travel surveillance. No Sero conversion and cross contamination were found in the dialysis centre related to post-travel dialysis, demonstrating the effectiveness of the structured workflow and safe international travel management for HD patients.

Picture 4: *Summary of Post-travel Surveillance Outcomes*



Conclusion

This structured workflow integrating the country’s risk stratification, a risk assessment questionnaire and tailored surveillance protocol & Interventions ensures timely infection risk identification and informed appropriate clinical interventions. This workflow supports safe international travel of HD patients while maintaining rigorous infection surveillance.

References

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