Allogeneic Stem Cell Transplants

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Attending for pre-transplant work up

Before you are admitted for your allogeneic transplant you will need to attend the hospital for a few tests. These tests are a sort of “MOT” for your body and provide information for the doctors to check you are well enough for the planned treatment and that it is safe to continue. These tests are called “pre transplant work-up” and usually include a heart scan, lung function test and kidney function test, although these can vary depending on what your consultant advises. A bone marrow test may also be required. You will be sent details of when and where to attend for these tests.

Insertion of your Hickman Line

Before you are admitted for your transplant, insertion of a Hickman line is required. A Hickman line is a reliable way for nurses and doctors to give intravenous medicines (medicines that need to go directly into a vein), nutrients (e.g. TPN) or to take blood samples. Having a Hickman line means you avoid having a new needle puncture every time you need treatment or a blood test. The Hickman line is meant to remain in place for a long time (months to years) so it can be used throughout your treatment. The insertion of the line will be organised by the coordinator – if it is to be inserted at the Queen Elizabeth Hospital Birmingham (QEHB) you will be required to have this procedure on the Friday before your planned admission date. You will be sent an appointment and information letter for this procedure.

Admission to ward for transplant

When the tests have been completed and the medical team in charge of your care have checked the results, your consultant will sign a treatment plan (also called a transplant protocol) for their team to follow when you are admitted to hospital.
Important information

• After a donor is selected and their availability/suitability is confirmed you will be allocated an admission date on transplant waiting list

• You will stay on the waiting list until admission for transplant, during which time your pre-transplant work up tests will be completed

• On occasion that your date on the waiting list has to be changed, for example, if you require more treatment, you will be informed as soon as possible

• The majority of transplant admission dates are on a Monday. You may be admitted on this day or on the preceding weekend (the Saturday or Sunday before). This is to ensure that you are admitted in good time to begin your conditioning chemotherapy

• Staff from Ward 625 will call you as soon as a bed is available for your transplant and will expect you to come in within a few hours

• Please ensure you have made arrangements for transport at short notice to the hospital (if suitable, there is a train station nearby to the hospital)

• It is advisable not to travel or have any arrangements on the Saturday or Sunday before your admission date, in the event that you are telephoned to be admitted to the ward

• Please call the Bone Marrow Transplant Coordinator Team on **0121 371 14362** or **0121 371 14361** (Monday–Friday, 08:00–16:00) if you would like an update on your admission or have any questions
The following information is to help you during your stay on the transplant ward. This guidance has been produced to help keep you safe and to make your stay as comfortable as possible. Some of the advice is to help avoid things which may put you at high risk of catching an infection. This is because after you have had your high dose treatment your immune system will be low and it will be much harder for your body to fight off infections.

If you are unsure about any of this information please ask one of the nursing team who will be happy to help.

What happens next?

1. You arrive on Ward 625 (stem cell transplant ward) at QEHB
2. You will be clerked by a doctor and your admission assessments will be completed by the nurses
3. You will need some blood tests
4. Once your blood tests have been checked by pharmacy your chemotherapy will be made and will begin, usually the day after your admission. The chemotherapy will be given via your Hickman line. The chemotherapy is given in accordance with an individualised rota or chart for each patient. This is referred to as “conditioning” and you will receive medication over a number of days
5. On the last day of your chemotherapy your donor will begin their stem cell collection at their collection centre. This could be the Centre for Clinical Haematology (if it’s a relative) or somewhere else. We can only give you limited information about your donor at the time of your transplant but will be able to tell you what country they are donating in
6. Your stem cells from your donor will be given via a drip the day after your chemotherapy finishes
7. Please be aware your cells may be given on one or more days
8. You will be monitored daily during your recovery time (weight, blood pressure, temperature, blood tests, nurses’ checks, doctors rounds etc.)

9. The average recovery time is 2–4 weeks

10. During your stay you will be introduced to the post-transplant nurse specialists. These are the nurses who will be looking after you in clinic following your discharge

11. You will be ready for discharge once your neutrophils (one of the white blood cells that protect you from infection) are more than one, you are able to manage taking your medication and the doctors are happy that you are safe to go home

**What to bring in from home**

Pyjamas (clean set daily) - or you can use hospital pyjamas if you wish

Comfortable day clothes (clean set daily)

Dressing gown

Slippers (ideally with grip)

Shower gel or body wash (no bars of soap)

Any other toiletries you use regularly

Unperfumed body moisturiser

Toothpaste and soft toothbrush

Electric shaver (optional—disposable razors not advised due to risk of bleeding when blood counts are low)

Your normal medication (a few days’ supply)

Books/magazines/puzzles (new)

Tablet/laptop/mobile phone and chargers (at your own risk)
What the hospital provides (advisable to use these):

Towels
Bedlinen and pillows
Disposable flannels
Hospital pyjamas (if you wish to use them)

Accommodation

The ward is made up of some bays of four patients and some single isolation rooms. The whole ward is air filtered to minimise risk of infection and you will notice there are two doors at the entrance to keep the filtered air inside the ward. When you are admitted you may be allocated a bed in the four-bedded bays and then will usually be moved into an isolation room as your treatment starts. However, please be aware that rooms are allocated based on the clinical needs of current patients so this may not always be the case. Visitors are not permitted to stay with patients overnight unless there are special circumstances. If you have any concerns about your accommodation or privacy please discuss them with the ward staff.

Visiting

You may find it beneficial to have visitors whilst you are in hospital, as support from family and friends is a great way to keep positive. Even if you are in an isolation room whilst your immune system is low, it is safe for you to have visitors as long as they follow this guidance:

• They have not had a recent infection or recently been in contact with someone with a contagious infection
• They are not currently unwell with fevers, flu, diarrhoea or vomiting
• They wash their hands on arrival and before they leave the ward
• They remove their outdoor coats and put on a plastic apron before entering an isolation room (gloves/masks are not required)

• There are no more than three visitors per bed space at any one time

• They visit between 11:00 and 20:00 (visits outside of these times are at the discretion of the nurse in charge)

• Children may visit when accompanied and supervised by a responsible adult at all times. There is no age restriction however they should not visit if they are unwell. Please check with the nurse in charge if very young children or children who have recently been vaccinated would like to visit

• Please be aware visitors may be asked to wait outside the room at times in order to maintain patient dignity/confidentiality

Diet

It is important to try and keep your nutritional intake as good as possible whilst you are having your treatment, however you can have side effects which may affect your appetite. If you are struggling to eat your meals, please discuss this with the nursing staff as there are alternative menus and lots of appetising hot and cold snacks available at any time. If appropriate, you can be referred to a dietitian who can assess your dietary needs and give you tailored advice and supplements.

There is no evidence to show that changing your diet to avoid certain foods will stop infections and research shows that most foods are safe to eat even when your immune system is low.

Food provided by the hospital is checked to ensure it meets health and safety standards. Your family and friends are welcome to bring food in for you however there is no facility to warm these up on-site and hospital policy does not allow patients own kettles/microwaves/toasters to be brought in. Therefore snacks in sealed packets/air tight containers that can be eaten cold are best. There is some fridge capacity available so
please ask the ward staff if you need to store refrigerated food. Further advice about diet can be found in the Bloodwise “Eating well with neutropenia” booklet.

**Staying active**

It may sound obvious, but it is advisable to get out of bed, have a full wash and get dressed into clean day clothes every day. This will really help to give your day some structure, help you to sleep at night, prevent infection and will speed up recovery after treatment. If you are able to, you can also keep active by sitting out in a chair for meals, walking along the corridor or even just around your room or to the bathroom and back. If your immune system is low or you feel unsteady on your feet, please check with the nursing team first.

If you are feeling very tired or weak please ask the nursing staff for help, they will be happy to help you at any time even if they appear busy! If necessary you can be referred to the physiotherapy or occupational therapy teams to help you with your mobility.

**Phone calls**

Mobile phones are permitted on the ward but please be aware the signal is variable. There are bedside payment phones attached to the TV sets in some areas. If family and friends are calling the ward directly for information about your recovery, it is best to nominate one person to do this and pass on updates. Please be aware of other patients’ privacy and dignity when making phone calls in communal areas.

**Entertainment**

You will normally be in hospital for at least two weeks and so it is a good idea to bring some entertainment with you such as books, magazines, puzzles, games, laptop or tablet. If you would like to bring a tablet/laptop or other mobile devices to
use during your stay this will be at your own risk. There are televisions in some of the rooms on the ward with free access to radio however payment is required to access the television channels. Top up cards for the televisions can be bought from the payment machines in the hospital corridor. There is also a day room with a free communal television which is safe to use unless your immune system is low.

**Wi-Fi**

There is free Wi-Fi, which can be accessed via any mobile device by searching and connecting to the network called “NHS Wi-Fi”. Unfortunately nursing staff are not able to help with technical issues around Wi-Fi usage.

**Emotional support**

Being in isolation can be hard, but many of the difficulties you encounter can be overcome with the help of the nursing and medical teams who are keen to make your stay as comfortable as possible and who will try to deal with any concerns. The chaplaincy team are also happy to visit you even if you are not religious. However if you wish we can refer you to the cancer psychology service who provide specialist support if needed.

**Medical/nursing care**

You may be asked by the nursing team to complete a fluid balance chart. This means recording how much fluid you have drunk and how much urine you have passed each day so that the doctors can make sure you do not get dehydrated. The nurses will explain how to complete the chart but if you have any questions please ask.

There are usually four medication rounds each day; however each patient will be prescribed different medicines at different times. If you feel you need any of your medication in between these times, please speak to the doctors and nurses looking after you.
Your blood pressure, temperature and pulse will be checked regularly; these are called ‘observations’ or ‘obs’. If you are unwell or at risk of infection, the nursing team may need to check your observations more frequently including overnight.

During your stay you may require intravenous medication given as a drip via a line in your arm. These are given using electronic pumps which will beep when the drip needs to be changed. Please let the nursing staff know if you think there is a problem with your pump or it has finished and they will check it as soon as they are able.

**Feeling unwell/infections**

Every person is different and responds to treatment in a different way. Some people may feel unwell and need to rest but others may feel able to do a bit more. You may want visitors to come every day or some days you may want to rest instead. It is important to tell the hospital team and your friends and family how you are feeling so that they can support you whilst you recover. You must report any changes in your symptoms to your medical team immediately, however small and insignificant they may seem. This allows the medical team to correct any problems before they worsen. The doctors will advise you about the medication and interventions you may need during your stay in hospital. There will be a daily ward round where the registrar doctor visits each patient to assess them and decide if any additional treatment is required. A consultant will visit twice per week during your stay to check on your progress.
## Ward 625 - Haematology and Stem Cell Transplant Ward

| **Address** | Ward 625  
|            | Level 6  
|            | Queen Elizabeth Hospital Birmingham  
|            | Mindelsohn Way  
|            | Edgbaston  
|            | Birmingham  
|            | B15 2GW  
| **Ward Manager** | Kate Gooding  
| **Telephone** | 0121 371 6293  
| **Visiting Times** | 11:00–20:00  
| **Fresh flowers** | Not permitted  
| **Mobile phones and devices** | Permitted at own risk  
| **Bedside radio** | Free where available  
| **Bedside landline phone** | Available with pre-paid card  
| **Bedside TV** | Available with pre-paid card  
| **Communal TV** | Free  
| **Wi-Fi** | Free (email required)  
| **Accommodation** | Four-bedded bays and isolation rooms (allocation depending on clinical need of current patients)  

## Contact information (pre-admission)

**BMT Coordinator Team:** 0121 371 4361  
Monday–Friday, 08:00–16:00
The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4323.