



## **PARTICIPATION CONDITIONS TO CRUISES WITH DIALYSIS SERVICE**

Cruises with onboard dialysis service have to be booked through VIAGGI PIU' offices, located in Cerea (VR) – Via XXV Aprile, 17 - Italy. Booking might also be carried out both via e-mail or fax. Your Travel Agency can also book for you by contacting us via phone, e-mail and fax.

The price of the cruise will depend on the availability but it will always be the most favourable one at the moment of your reservation, according to the quotes of MSC CRUISE.

Payment is required as follows:

- Deposit of 25% on your reservation
- Final payment 01 month before your departure

Payment is due via bank transfer, with every bank fees at your charge.

General conditions applied to our cruises can be found in MSC catalogue – Italian Market.

A written confirmation via fax, e-mail or mail is required for every reservation.

### **TRAVEL DOCUMENTS:**

All the clients need to check if they have the proper travel document for the cruise they have booked and its validity. Also, clients must verify if they need a visa to enter the countries where the ship stops.

### **INSURANCE COVER FOR CANCELLATION:**

Viaggi Più invites you to provide an insurance policy, upon confirmation of the cruise, to cover the cancellation costs.

The client must be covered by a medical insurance which includes possible repatriation at home.

## **INFORMATION ABOUT ONBOARD DIALYSIS SERVICE**

HCV (Hepatitis C) positive patients are accepted thanks to a machine specifically dedicated to them.

HbsAg (Hepatitis B) and HIV positive patients cannot be accepted.

On board, you can have bicarbonate dialysis treatments but not on-line dialysis or hemofiltration.



**Patients who do not produce the mentioned information will not be accepted on board and any cancellation fees and extra cost will be entirely charged.**

#### **PRICE OF EACH ONBOARD DIALYSIS TREATMENT**

- Cruises in the Caribbean Sea, Arabian Emirates and Brazil **Euro 390,00**
- Cruises to Northern Europe + Mediterranean Sea **Euro 350,00**

**DIALYSIS SERVICES MUST BE PAID AT THE MOMENT OF THE FINAL PAYMENT OF THE CRUISE.**

#### **Cancellation Penalty:**

- 50% until 31 days before departure date
- 100% 30 days or less before the departure date

#### **The required medical record includes**

- Dialysis information
- Current labs
- HbsAg (Hep B) test and HIV test (both negative) and HCV (Hep C) test which must not be older than 45 days.

The medical record must be sent to our agency compulsorily one month before departure. **HCV positive patients can be accepted provided they informed us on reservation.**

**Departures are guaranteed with a minimum of 6 dialysis patients and a maximum of 12 for each cruise.**

#### **ONBOARD DIALYSIS SHIFTS**

Dialysis shifts are discussed and organized on board and the decisions made by the manager of the dialysis centre, which will take into consideration both the destination of the ship and the needs of the patients, are incontestable. Extra shifts cannot be organized, unless a patient requires a private shift whose cost is entirely charged.



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## DIALYSIS FORM

NAME AND SURNAME:.....

DATE OF BIRTH:.....

ADDRESS:.....

TELEPHONE NUMBER:..... MOBILE: .....

TAX CODE: .....

E-MAIL ADDRESS : .....

CURRENT DIALYSIS CENTRE: .....

CURRENT NEPHROLOGIST: .....

CURRENT NEPHROLOGIST'S TELEPHONE NUMBER: .....

ONBOARD DIALYSIS DAYS REQUEST .....

LAST DIALYSIS DATE BEFORE DEPARTURE :.....

CAUSE OF THE KIDNEY DISEASE :.....  
.....

FURTHER HEALTH CONDITIONS: .....

DAYS IN WHICH MAKES DIALYSIS IN THE WEEK: .....

TIME IN WHICH MAKES NORMALLY DIALYSIS: morning or afternoon? .....

LENGTH OF EACH DIALYSIS SESSIONS: .....

TYPE OF ACCESS: .....RIGHT.....LEFT.....

MACHINE:.....

DIALYSIS METHOD: .....

FILTER:.....

AVERAGE BLOOD FLOW RATE:.....

DIALYSATE FLOW:.....



DIALYSIS COMPOSITION:

Na:..... (mmol/l) K:..... (mmol/l) Ca:..... (mmol/l)

Mg:..... (mmol/l) Gluc ..... (mmol / l)

Anticoagulation requirements: type ..... continuous .....

loading dose .....

COMPLICATIONS DURING TREATMENTS .....

.....

STARTING WEIGHT: Kg .....

AVERAGE WEIGHT INCREASE: Kg: .....

MEDICATIONS DURING DIALYSIS: .....

.....

HbsAg (Hep B): ..... HCV (Hep C) .....

HIV: .....

**Eritropoietine is not provided on board. Patients needing it must bring a proper quantity with them.**

Date .....

PHYSICIAN SIGNATURE

STAMP

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