



## Patient Infection Prevention Campaign Pledge

My dialysis healthcare team has educated me  
on infection prevention practices.

### I Pledge

to protect myself and others by doing the following:

- Using frequent and good handwashing techniques
- Washing my vascular access or keeping my catheter site dry
- Asking staff members to follow infection prevention protocols
- Notifying my healthcare team if I notice any signs or symptoms of infection

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For more information or to file a grievance, please contact:  
The Renal Network • 911 E. 86<sup>th</sup> St., Suite 202 • Indianapolis, IN 46240  
Toll-Free Patient Line: (800) 456-6919  
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