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PATIENT NEWSLETTER | SEPT / OCT 2016



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CDC

Centers for Dialysis Care

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Centers for Dialysis Care Newsletter
September / October 2016

Editor: Pamela S. Kent
Patient Education Coordinator
(216) 903-2004
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CDC

Centers for Dialysis Care

The Centers for Dialysis Care (CDC) has provided the information in this newsletter to inform you and your loved ones.



On the Cover
Harvest Time, Acrylics on canvas
Group project facilitated by founding
Art Therapist, Maryann Farago



The Centers for Dialysis Care (CDC) is a leader in providing patient-centered quality care to all individuals with kidney disease.

News & Notes

Don't Leave Flu Protection to Chance

The good news is you can get your flu shot at the dialysis unit. It takes about 2 weeks for your body to be protected after you get the flu shot. Get it early before everyone is getting sick with the flu. For people with kidney disease, the flu can make you sicker and last longer. The flu is different from a cold. The flu vaccine is a quick, easy and effective way of staying healthy.

Stop the Spread of Flu

- Get your flu shot
- Wash your hands often with soap and warm water
- Cover your nose and mouth when you cough or sneeze; throw the tissue in the trash can
- Avoid touching your eyes, nose and mouth

Well Wishes



Diane P. Wish

The summer seemed to fly by so quickly this year. As we enjoy the milder weather we know that winter is not that far off. Children are back to school and many lives get back into a familiar routine.



It is with deep sorrow that I share with you that Dr. Peter DeOreo passed away surrounded by his family on July 18, 2016 following a quiet, courageous struggle with cancer. Dr. DeOreo was the Chief Medical Officer and CDC Cleveland East Medical Director. Dr. DeOreo's passing is a great loss to CDC. He was a nationally recognized nephrologist and was affiliated with University Hospitals of Cleveland and Case Western Reserve School of Medicine throughout his 37-year career in Cleveland. Dr. DeOreo was a true scientist and a master statistician whose work greatly improved the care of all CDC patients. He spent his entire professional career at CDC and provided leadership that demonstrated his commitment to our patients and our mission. As Ralph Waldo Emerson once stated, "Death comes to all but great achievements build a monument which shall endure until the sun grows cold." Dr. DeOreo will be greatly missed but his legacy will live on.

Dr. DeOreo had planned to retire at the end of 2016 and CDC was in the process of hiring his successor. We are continuing to interview qualified candidates and hope to have his replacement identified in the near future. In the meantime, Dr. Richard Spech, Medical Director of CDC Shaker has agreed to fill in until a replacement is in place. We sincerely thank Dr. Spech for his willingness to step-in at this challenging time.

I wanted to update you on some news regarding the senior management team. As you may know I have been with CDC as the President and CEO for the past 32 years. As part of my succession plan my position is being divided into 2 roles. We are excited to have the addition of Gary Robinson who joined CDC this past July. Gary is the new President of CDC and will oversee clinical and administrative services of the dialysis units. Gary comes to CDC with 25 years of experience in the health care industry and he has served on the

CDC Board of Directors for the past 13 years. The addition of Gary to CDC represents an important investment in our future as we prepare for my retirement in late 2018. The CDC Board of Directors and I are excited about the possibilities we can realize by having the time for Gary to focus day to day operations while as CEO, I focus on our continued growth and expansion, advocacy for those with kidney disease on a national and state wide basis, and leading our acute dialysis services and integrated care initiatives.

With some recent retirements, we welcome Sharon Thomas and Sherilyn Churchia. Sharon joined CDC as the Executive Director of Clinical Operations. Sharon comes to CDC with a vast array of clinical leadership positions, most recently as the Chief Nursing Officer of UH Parma Medical Center. Sharon has a proven track record in the areas of clinical quality, safety, and increasing patient satisfaction scores. Sharon is responsible for the oversight of clinical operations for both hemodialysis and the home dialysis programs.

Sherilyn Churchia has been promoted to the Director of

continued on page 4 >

Well Wishes (continued from page 3)

Nutrition Services. Sher has worked as a Renal Dietitian with CDC for nearly 16 years. Sher has a solid renal nutrition background and will lead the nutrition department into a bright future!

CDC will soon be celebrating Employee Recognition Week. This provides an opportunity for us to thank the staff for all of their hard work and dedication. I am sure that the staff would appreciate hearing a few comments from each of you about how you feel about the care or service they provide. In this busy world we frequently forget to stop and tell others how much we appreciate them. I am very proud of our staff and hope that you think so too.

CDC Shaker is in the final phase of a major renovation of the entire clinical space. In addition to the new physical layout, the facility will have a new state-of-the-art water system and B Braun dialysis machines. CDC Warrensville is also going to be renovated beginning later this year.

You may have heard that CDC closed the Warren unit as of August 15, 2016. This was an extremely difficult decision and we evaluated every option prior to making this decision. Warren opened in 2000 and at one point we had over 100 patients dialyzing at the unit. Due to increased competition and more patients on home dialysis, which we

strongly support, the patient census continued to decrease. With a shrinking census of 25 patients we could no longer afford to continue. I want to thank all of the staff at Warren who continued until the facility closed to provide high quality care and assist with the transition. All patients have transferred to other facilities in the area.

Even though we needed to make this difficult decision at Warren I want to assure you that CDC is continuing to invest in updating all of our older facilities and in purchasing the newest technology when our equipment needs to be replaced. We have an active strategic plan and are making significant progress towards those goals. We have expanded our home dialysis programs and are now offering staff-assisted home dialysis to patients in 3 nursing homes. In addition we are managing a robust acute dialysis program with 20 locations, 13 of which are in Ohio.

CDC is committed to being a leader in providing patient centered quality care to all patients with kidney disease. We also remain committed to our CARES values: Customer service, Accountability, Relationships, Excellence, and Safety.

Diane P. Wish
CEO

A King Among Men

What makes up a King?
Is it power?
Is it money?
No it is heart and Soul
A King is someone who Cares,
And is always there.
A King is someone who teaches
And his lessons are words of gold.
A King is someone who values Family,
And always provides stability.
A king is someone who is a role model,
And his legacy transcends generations.
A king is someone who dies in peace,
And God gives him the key to heaven.
Peter DeOreo was a king.
His Life and Wisdom will prosper forever in our memories.
He had a heart of Gold and the spirit of a champion.
CDC, the renal community will miss him but Peter has now passed the torch to us to continue his work.
We will work together to continue your dreams.

— RJ Picciano, BA,
CHT, OCDT, CHBT,
Fluid Management
Coordinator



A Prescription for Confusion: When to Take All Those Pills

Managing medication can be confusing, especially if you are taking multiple prescriptions. Centers for Dialysis Care is offering an opportunity to participate in a program that provides a simpler, safer way to manage your medications. This program is offered through a partnership with ExactCare Pharmacy, a local full-service pharmacy.

About the Program

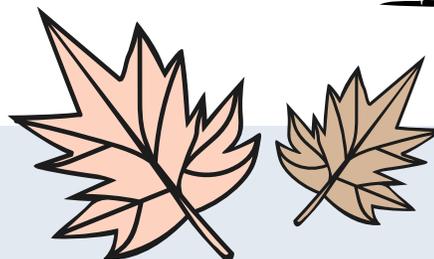
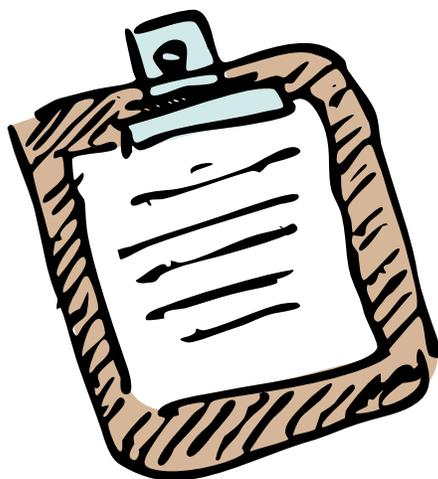
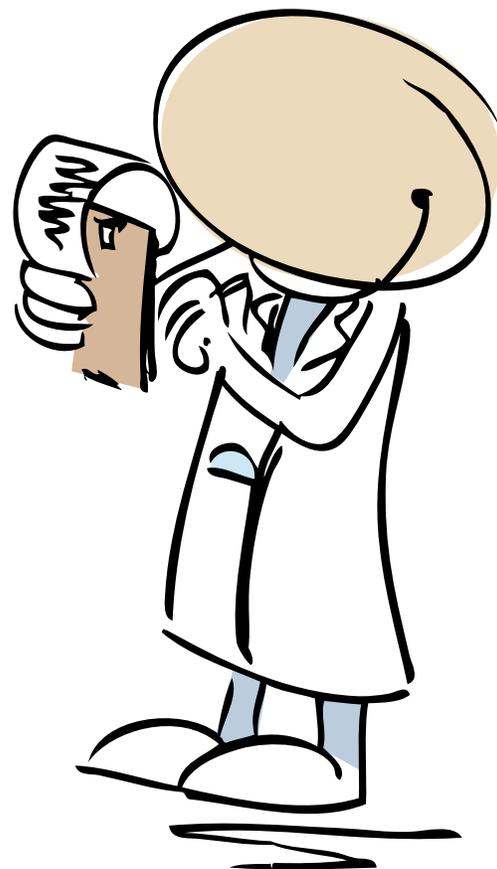
Benefits to You

- A simpler, safer way to manage your medications.
- Easy-to-use packaging, customized to you.
- No more counting pills or filling pill containers.
- Refills managed for you.
- Your own pharmacy care team.
- Your medications delivered to your home each month.
- Increased understanding of your medication's purpose and potential side effects.

Getting Started

The ExactCare Pharmacy service will be available at CDC and will be first rolling out at Shaker and Painesville. When you sign up, an ExactCare representative will visit you at home to review the program and gather your prescription information. ExactCare then will work with your doctors each month to verify and fill your prescriptions, coordinate your refills and review medication updates. This service will be made available to all of the facilities by the end of the year.

If you have any questions or would like to sign up, please contact:
Marilyn Culley, RN MSN CNP
ExactCare Pharmacy
(216) 310-0653



You are under no obligation to enroll with ExactCare Pharmacy and you may continue to use your pharmacy of choice. Centers for Dialysis Care and ExactCare Pharmacy are separate companies. Centers for Dialysis Care receives no financial benefit based on your choice of pharmacy.

Get a Grip & Avoid a Trip

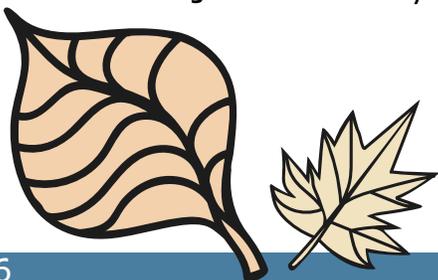
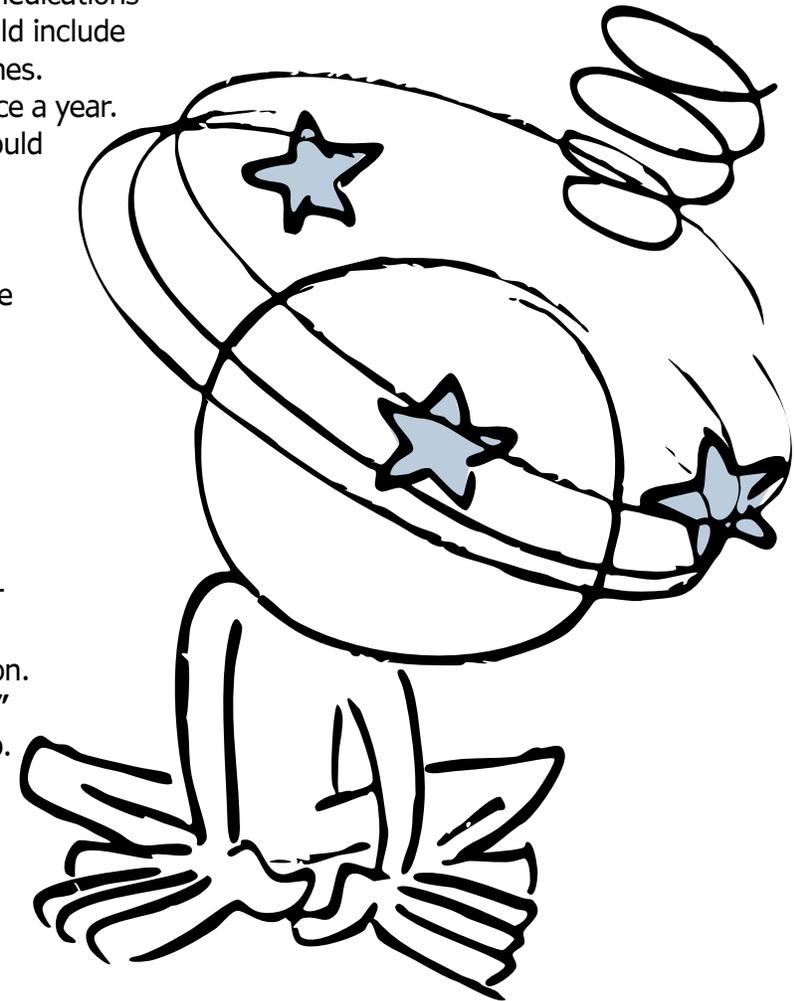
Many falls do not cause injuries. But one out of five falls does cause a serious injury.

Did you know?

- Falls can cause broken bones, like wrist, arm, ankle and hip fractures.
- Falls can cause head injuries. These can be very serious, especially if the person is taking certain medications like blood thinners.
- Many people, who have fallen, even if they are not injured, become afraid of falling. This fear may cause a person to cut down on their everyday activities. When a person is less active, they become weaker and this increases their chances of falling.

We know it is not possible to prevent every fall, but you can reduce the risk of a fall.

1. Ask your doctor to assess your risk of falling and talk with them about specific things you can do.
2. Ask your doctor or pharmacist to review all of your medications to see if any can make you dizzy or sleepy. This should include prescription medicines and over-the-counter medicines.
3. Have your eyes checked by an eye doctor at least once a year.
4. Make your home safer by getting rid of things you could trip over.
5. Add grab bars inside and outside your tub or shower and next to the toilet.
6. Make sure your home has lots of light by adding more or brighter light bulbs.
7. Wear safe, non-slip street shoes when coming in for dialysis treatment.
8. At each treatment:
 - Use the grab bars located at the scales to assist with your balance.
 - Weigh yourself with your shoes on.
9. After reclining during treatment, be sure to sit up for a few minutes before trying to stand.
10. Be careful when bending over from a standing position. Your body may still be adjusting to being "off dialysis" and bending over can make your blood pressure drop.



Community Partners

The Power of Yes: Organ and Tissue Donation Myths Debunked

The decision to register as an organ donor is a very important one as it can save someone's life. In fact, when someone signs up as an organ, eye, and tissue donor, they have the opportunity to save and enhance almost 50 lives! However, some people are hesitant to register as donors due to various myths and misconceptions. The purpose of this article is to dispel two of these popular misconceptions so that you can reconsider signing up as an organ donor.

Myth: *I'm too old to donate. Nobody would want my organs.*

Fact: The nation's oldest donor was 92 years old, proving that you are never too old to donate your organs. The oldest donor was named Carlton, who was a retired teacher and devoted father from Texas. Carlton was actually only nine days shy of his 93rd birthday when he became the nation's oldest organ donor. Carlton's wife and children made the decision to donate Carlton's liver following his death from a brain hemorrhage. Thanks to this gift, a 69-year-old woman suffering from end-stage liver disease is alive and is progressing well. This proves that there is no defined cutoff age for donating organs. The decision to use your organs is based on strict medical criteria, not age. Don't prematurely disqualify yourself. Instead, let the doctors decide at the time of your death whether your organs and tissues are suitable for transplantation.

Myth: *I'm not in the best of health. Nobody would want my organs or tissues.*

Fact: Very few medical conditions automatically disqualify you from donating organs. The decision to use an organ is based on strict medical criteria. It may turn out that certain organs are not suitable for transplantation, but other organs and tissues may be fine. Only medical professionals at the time of your death can determine whether your organs are suitable for transplantation.

The truth is that people of any age, even those that have certain medical conditions, may be organ, eye, or tissue donors. Please do not rule yourself out as an organ, eye, and tissue donor and let a medical professional decide if your organs, eyes, or tissues are viable. If any of these misconceptions were holding you back from registering as a donor, sign up today by contacting Cleveland MOTTEP for a donor form or sign up next time you visit the Bureau of Motor Vehicles.



For more information, please contact:

Linda Kimble, Executive Director at 216-229-6170 extension 137 or lindad.kimble@cdcare.org

For the Fun of It



Football

K	V	G	X	N	E	O	C	E	N	T	E	R	X
C	C	O	C	I	N	K	M	O	W	I	N	K	L
A	X	A	A	Y	O	N	I	K	S	G	I	P	I
B	P	L	B	C	Z	Y	E	H	O	H	L	O	M
R	M	P	A	G	D	R	H	L	E	T	L	B	N
E	V	O	J	H	N	F	E	L	H	E	A	W	F
T	X	S	U	K	E	I	M	V	S	N	O	R	R
R	O	T	B	K	L	E	N	D	I	D	G	O	L
A	G	U	R	Y	T	L	U	N	H	E	R	U	X
U	T	O	C	A	B	D	A	C	U	P	C	A	Q
Q	Y	W	Z	H	P	G	U	B	A	R	I	E	Y
C	K	O	B	A	B	O	L	U	T	T	D	Y	R
Q	Z	J	S	C	T	A	I	T	A	O	C	N	F
H	G	S	O	J	U	L	C	N	U	M	O	H	E
R	K	H	Z	G	X	I	I	K	T	H	T	F	U

Words:

Catch

Field

Helmet

Receiver

Center

Field Goal

Hike

Running Back

End Run

Football

Pass

Tight End

End Zone

Goal Line

Pigskin

Touchback

Extra Point

Goal Post

Quarterback

Touchdown



Yards

Emergency Preparedness

Emergencies related to severe weather or disasters can occur without warning. These types of emergencies can affect having power, water and food, and transportation. It is especially important for individuals on dialysis to be prepared.

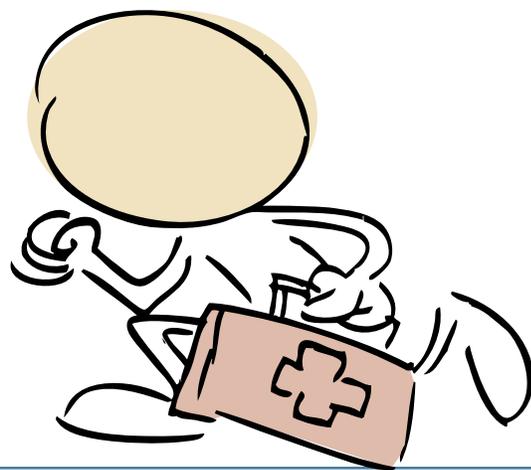
Prepare Ahead for Possible Emergencies

- **Supplies:** Have 2 appliance thermometers on hand, one for the freezer and one for the refrigerator. Also, get a cooler for food storage during extended power outages.
- **Storage:** Dry food should be stored on high shelves to prevent water damage during flooding.
- **Ice:** Keep a full ice bucket in your freezer. Ice can be used to keep food cold during a power outage.
- **Water:** Keep a supply of bottled water in storage in case tap water is made unsafe for use.
- **Monitor:** Food will remain safe in the refrigerator at temperatures below 40° F and in the freezer at temperatures below 0° F.

Choose Your Foods Wisely

If you cannot get to dialysis during an Emergency:

- Choose foods with a low sodium content
- Limit items listed below to the following amounts:
Fluids: 16oz (2 cups)
Milk products: ½ cup
Meats, fish, poultry, eggs: ½ the amount you normally eat; **Avoid all high potassium fruits and vegetables.**
- In a power outage, eat refrigerated food first since it will spoil first.



Make An Emergency Diet Toolkit

Use a cooler as the storage space for the following supplies:

- Canned tuna
- Juice boxes
- Canned fruit
- Hard candies
- Peanut butter
- Powdered milk or non-dairy creamer
- Low sodium crackers
- Bottles or jugs of water
- First aid kit
- Matches
- Money
- Flashlight
- Batteries
- Can Opener
- List of medications
- Hand sanitizer
- Paper napkins/plates
- Disposable silverware
- Emergency phone numbers

Forgotten Food: Reducing Food Waste

Are you guilty of forgetting a food in the refrigerator until it is too later? The average American tosses \$370.00 of food yearly. Of course, some of it is peelings, cores and bones, but most of it is, or once was perfectly good food. What can you do to reduce food waste? How about keeping a food waste diary for at least one day? Start by keeping track of daily non-food scraps that are tossed in the trash.

Here are some tips to identify why certain foods are being tossed out?

1. Was the food intended to make a certain recipe?
2. Was extra food bought because it was on sale?
3. Was it an impulse purchase because it looked interesting at the store?
4. Was it purchased with the intention of cooking a healthy meal?
5. Was the food forgotten about until it was too late?
6. Was it left at room temperature when it should have been refrigerated or frozen?
7. Was it correctly wrapped?
8. Was it not prepared correctly?

Now you can create personal food goals that limit food waste in the future. Try to find ways in your home where you might be able to reduce your food waste.



Planning on Traveling?

The holiday season is just around the corner. If you plan to travel during that time please let your social worker or nurse know as soon as possible. Dialysis patients can travel however arrangements need to be made in advance.

Healthy Eating



Ryan's Coffee Pot Roast

Contributed by the son of one of the Dietitians working at Centers for Dialysis Care

Ingredients

- | | |
|--|--|
| 1 – 1 & 1/2 pound Roast | 1/4 cup balsamic vinegar |
| Pepper – to taste | 1 1/2 Tablespoons Dijon Mustard |
| 2 Tablespoons olive or vegetable oil
(enough to cover bottom of skillet) | 2-3 small onions, peeled, chopped |
| 1 cup coffee | 2 cloves garlic, sliced or 1/2
teaspoon garlic powder |
| 1 cup red wine* | 4 – 5 carrots, peeled, cut into
1" pieces |
| *(May substitute wine with 1/4 cup
coffee plus 1/4 cup balsamic
vinegar) | Rosemary, thyme, and bay leaf to
taste |



Vincent's Wonderful Microwave Chicken

Created by a CDC patient

Ingredients

2 Chicken Breasts, skinless, fresh – not frozen. Dark meat can also be used if preferred. You must cook more than one piece of chicken to create moist chicken.

Herb and/or spice of choice, low sodium – NOT salted seasoning (Choose from rosemary, curry, lemon pepper, oregano, basil, garlic powder, onion powder, sage, thyme, dill, powdered hickory, chili powder, cumin, low sodium dry BBQ rub)

Low sodium Butter, sliced into pats, 2 to 4 pats (or teaspoons) per chicken breast. Olive oil may be used instead. Use 2-4 teaspoons oil for each piece of chicken.

Healthy Eating

Recipes to Collect

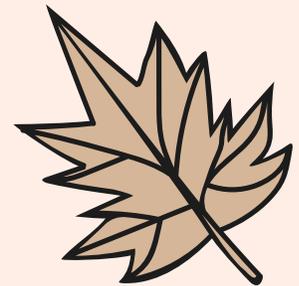


Preparation

- Prepare vegetables.
- Sprinkle pepper on roast.
- Pour the olive or vegetable oil in a skillet. On the stovetop over medium heat, brown the roast starting with the fatty side down. Place browned roast into crockpot, fat side up. Make a few cuts into the fat.
- Add carrots to skillet, cook until about half done (10 minutes). Remove to crockpot.
- Add onion/garlic combination to skillet. Cook 5 minutes. Remove to crockpot.
- Combine coffee, wine, and balsamic vinegar with Dijon mustard. Pour over roast and vegetables.
- Add rosemary, thyme, and bay leaf as desired.
- Cook on LOW setting for 6-8 hours or cook on MEDIUM setting for 4-6 hours.
- Remove roast and vegetables from crockpot to serving dish.
- Place drippings/broth in saucepan on stovetop. Simmer to reduce by half the amount.
- If you prefer gravy, use a mixture of 1 part flour to 4 parts rice or almond milk (can mix in a shaker bottle) to thicken. Example: 1/4 cup flour to 1 cup rice or almond milk. Simmer about 10 minutes.

Preparation

- Rinse chicken, pat almost dry with paper towel. Remove any unwanted fat. Place in microwave safe baking dish or glass pie pan.
- Sprinkle with seasonings of choice.
- Top each piece of chicken with butter or oil.
- Cover with plastic wrap, pull to seal tightly. (Use a microwave safe plastic wrap and leave about 1 inch of space between wrap and food. If you do not want to use plastic wrap to avoid any possible leaching of chemicals from the wrap to the food, a microwave safe dish with a lid could be used.)
- Microwave boneless chicken on high for 6 minutes. If bone-in chicken is used microwave for 8 minutes.
- Allow chicken to sit at least 5 minutes after microwaving before removing plastic wrap/lid.
- Now use the chicken for any recipe or meal you desire.



CDC

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Corporate Office

18720 Chagrin Boulevard
Shaker Heights, Ohio 44122

(216) 295-7000 • cdc.org



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