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

News and 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

On the Cover
Red Poppies, Acrylic
Ozzie Walters and Shelly Robinson
Message from the CEO and President

Gary and I had the honor of attending “The Leonard C. Rosenberg Foundation 12th Annual “Gift of Life” Golf Outing held at Signature of Solon this past August. The funds raised at this golf outing help Cleveland Minority Organ and Tissue Transplant Education Program (MOTTEP) continue the mission of decreasing the number and rate of people in need of organ and tissue transplants through prevention and education and expand programming and new organ donor recruitment efforts in the Greater Cleveland minority community. Pastor David Cobb, a MOTTEP Board Member and kidney transplant recipient stated,

“I, along with other transplant recipients, appreciate all the efforts of MOTTEP and am thankful for all the financial support to help those who are in need of transplantation.”

Cleveland MOTTEP is affiliated with Centers for Dialysis Care Inc. (CDC) and housed at CDC East. CDC and the Rosenberg Foundation make it possible for Cleveland MOTTEP to perform its mission and continue to educate the community. This mission is accomplished through the promotion of awareness through education and advocacy about organ and tissue donation, transplantation and issues related to prevention and wellness.

Cleveland MOTTEP has recently celebrated their 20th anniversary as the only organization in Ohio that provides community-based programming exclusively to the minority community regarding organ and tissue donation. No organization is as well positioned to serve as a conduit of information and resources between the minority community, healthcare providers and organ procurement organizations, as MOTTEP.

Kidney transplantation is the treatment of choice for patients with end-stage renal disease (ESRD). The benefits of transplantation extend to ESRD patients regardless of age, gender, or ethnicity, as well as those with common comorbid conditions, including diabetes and hypertension. With advances in surgical technique, immunosuppression, and post-transplant care, criteria for kidney transplantation have evolved dramatically.

The determination of transplant candidacy is often a complex and difficult process that requires considerable resources. Transplant centers use a multidisciplinary approach involving the transplant surgeons and physicians, coordinators, social workers, financial counselors, nutritionists, and psychologists. Often, additional consultants are involved as necessitated by the specific patient’s situation. Many patients previously deemed as not being eligible for transplantation are now considered acceptable candidates for transplant.

The latest CDC patient survey showed that only 55.7% reported that the staff explained why you are not eligible for a kidney transplant. If you are not sure why you are not on the kidney transplant
Message from CDC (continued from page 3)

waiting list, please reach out to your social worker or nephrologist. If you would like more information about how to get on the list let them know as well.

This CDC patient survey is called the Consumer Assessment of Healthcare Providers & Systems (CAHPS) and is conducted by a company called DSS Research. A random sample of dialysis patients will be selected for the survey. If you are selected for the survey you will begin receiving notification of the survey in October. We received a 34.7% response rate on the Spring survey and would like to have an even higher response rate this time around. We encourage you to complete the Fall 2017 survey. The survey is fairly long but it only counts if all of the answers are completed. Please have your voice heard and provide us with your valuable input. The survey is totally anonymous. We thank you in advance for your willingness to tell us how well we are doing and how we can improve.

Diane P. Wish, CEO
Gary J. Robinson, President

You’ve Got Important Mail!
Please remember to complete and return the Medicare In-Center Hemodialysis Survey that you received in the mail.

Did you know that for every missed dialysis treatment your risk of going to the hospital is 40%? Think twice before missing a treatment and ask the staff to reschedule a treatment if you have to miss a treatment.

The POWER To Stop the FLU Begins with YOU Flu Shots Now Available at CDC
September is Healthy Aging Month

Healthy Aging Month is an annual health observance designed to focus national attention on the positive aspects of growing older.

It’s never too late to take control of your health; it’s never too late to get started on something new. Why not think about the positive aspects of aging instead of the stereotypes and the negative aspects?

September is a perfect time to celebrate Healthy Aging Month since it is time when many people think about getting started on new tasks after the summer. Healthy Aging Month is designed to encourage people to rejuvenate and get going on positive measures that can impact the areas of physical, social, financial and mental wellness.

Tips for Reinventing Yourself during September is Healthy Aging Month:

- Be positive in your conversations and actions every day. When you catch yourself complaining check yourself right there and change the conversation to something positive.

- Start exercising not only for your health but to socialize with old and new friends.

- Make this month the time to set up your annual physical and other health screenings.

- Find your inner artist. Have you always wanted to play the piano, violin, or tuba? Have you ever wondered if you could paint a portrait or scenic in oil?

- Become an organ, eye and tissue donor. There is no set age limit for organ, eye and tissue donation.

To learn more about Cleveland MOTTEP, visit www.clevelandmottep.org or if you wish to become a volunteer at Cleveland MOTTEP call Linda D. Kimble at 216-229-6170 x137

There are over 76 million baby boomers today over 50.
For the Fun of It

Advanced Care Planning

Let your wishes be known!
Find the following words in the word search puzzle and then match them to the definitions on the right.

1. Hospice
2. Living Will
3. Palliative Care
4. Peace
5. Power of Attorney
6. Quality of Life
7. Advance Directives

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

A. A term that describes how satisfied a person is with his or her life.
B. Health care that helps patients at the end of life.
C. A legal document that tells others what treatments you want in case you cannot speak for yourself.
D. A type of advance directive with instructions that outline a patient’s wishes for medical care in case he or she cannot communicate.
E. A feeling of calm that you can have from talking to your family about your wishes for your future healthcare.
F. Comfort and pain treatment to ease the effects of disease.
G. A legal right you can give a friend or relative to make decisions for you.

Answers:
What Role Does My Renal Dietitian Play in My Dialysis Treatment?

A renal dietitian specializes in the specific food and nutrition needs of patients receiving dialysis. Renal dietitians are not the “food police” and are not here to provide judgement but rather here to help you make informed decisions regarding your diet. Your renal dietitian closely monitors your nutritional status and works with the other members of your healthcare team including your doctor, social worker, nurses, and patient care technicians in an effort to help you feel your best.

Here is what you can expect from your renal dietitian:

- Completes nutritional assessments and develops individualized care plans based on your specific needs
- Reviews your monthly lab values with you to determine what areas of your diet may need adjusting
- Provides education on what your lab values mean and on what you can do to get your lab values within the goal range
- Monitors your fluid gains and provides education on how to prevent gaining too much fluid between treatments
- Works with the doctor and provides recommendations on medication adjustments including vitamin / mineral supplements and phosphorus binders
- Recommends nutritional supplements as needed
- Provides you with educational materials such as recipes, meal plans, handouts, guidelines for grocery shopping, etc.
- Encourages you to come to all your dialysis treatments to prevent you from going to the hospital
- Provides support and encouragement in order to help you live as healthy a life as possible
Before You Leave the Hospital

A successful recovery after your stay starts with a solid plan before you go. Plan early to reduce your chances of being readmitted and increase your chances for a healthy recovery. Take steps as soon as possible during your stay to plan for a successful transition from the hospital.

To begin, ask your nurse to have your discharge planner contact you to review the following:
- Your discharge plan
- Your complete medicine list and instructions
- Your upcoming appointments
- What to do if you don’t feel well

A Reason to Plan Early
If you need a rehabilitation facility, nursing home, skilled care or other service after your stay, you’ll need time to find and weigh your options. For help comparing services in your area, go to:
- www.medicare.gov/nursinghomecompare
- www.medicare.gov/homehealthcompare
- www.qualitycheck.org

Checklist for Discharge
Make sure you have the following information before you leave the hospital.
- **Discharge summary.** This includes why you were in the hospital, who cared for you, your procedures and medicines. Bring your discharge summary when you return for dialysis
- **Medicine list.** This includes all your new and former prescriptions, over-the-counter medicines, vitamins and supplements. Ask if there are any medicines you can stop taking or that are not good to take together. Also make sure you know why, how and when to take each one.
- **Prescriptions.** Check that your pharmacy has your new prescriptions and that you have a plan to get them filled. Managing medication can be confusing, especially if you are taking multiple prescriptions. CDC invites you 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.
- **Follow-up care instructions.** Beyond medicine, this can include:
  - Foods or activities to avoid
  - Tests or appointments
  - How to care for incisions or use medical equipment
  - Warning signs to watch for
  - Daily living adjustments (like how to get into bed)
  - Who to call with questions
- **After-hospital services.** Know how much support you’ll need in these areas:
  - **Personal care:** bathing, eating, dressing, toileting
  - **Home care:** cooking, cleaning, laundry, shopping
  - **Healthcare:** taking your medicines, doctor’s appointments, physical therapy, wound care, injections, medical equipment

Repeat back what you hear the discharge planner say to make sure you understand the details correctly.

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Artist in Focus

The featured cover art for this newsletter was created by Shelly Robinson, East and Ozzie Walters, Shaker.

The cover art for this issue is unique in that two artists from different dialysis centers created this beautiful acrylic painting called “Red Poppies”. Both artists have had a history of being creative and both have done or still do crochet, a hand needle craft, making blankets or scarves. Ms. Robinson does crafts or paints t-shirts with grandchildren at home or uses adult coloring books to pass the time. In the past, she sewed clothing for herself and family. Ms. Walters still writes poetry and creates flower arrangements for her church services. Both ladies enjoy painting with acrylic paints or watercolor paints and were encouraged by art therapists to participate in the art therapy programs at East and Shaker. Ms. Robinson began her dialysis treatments this past winter and Ms. Walters has been a patient at CDC for 12 years.

Ms. Walters explained that an invitation from an Art Therapist named Eileen got her started and she helped with a quilt project many years ago. Creating with a group of people helped her feel accepted. She was inspired by Bob Ross, the painter on PBS TV and French Impressionist artist Paul Gauguin, to create a picture of a waterfall with a forest background. She shared that before she came to CDC she “did not know she had a creative streak” in her mind. She finds reactions from other people who see her artwork as very satisfying, especially when someone asks her to draw or paint something for them. Being asked to express ones creativity is self-esteem building and honors the creative energy of the artist.

Both ladies encourage everyone to “at least try art therapy once.” Ms. Walters said, “Use watercolor paints and experience it and take it from there because making art while getting a dialysis treatment will relieve your stress and the pressure of arriving for treatment. It is something to help take care of anxiety and it takes me to a different place and time.” Creating art “takes away worries and concerns in life” for the five hours in the chair. Working on the group project Red Poppies was “a shared adventure with another patient” in Ozzie Walters’s opinion. Even though they do not know each other, Ms. Walters was inspired by Ms. Robinson’s bright red poppies. Ozzie also stated that she liked helping to finish this project because this “takes me away from dialysis and changes my frame of mind from getting hooked up to the dialysis machine, to being relaxed and letting time go by much easier. I feel so glad I have art to do. It is a time and stress reliever.”

For Shelly Robinson (East) the most satisfying part of painting with the art therapist is she “helps me make my art look good, so I feel good and enjoy doing it. I feel accomplished and rewarded for working hard because I do not have anything else to do” and just like Ms. Walters said, “it helps pass the time!”
Before You Leave the Hospital (continued from page 8)

Top 10 Questions to Ask Before a Hospital Discharge
1. What number can I call 24 hours a day if I have questions or concerns? Who is my contact?
2. Has my follow-up appointment been scheduled? With whom? Do I have a ride there?
3. What are key warning signs I need to watch out for? Whom do I call if they happen?
4. What special equipment do I need? What special instructions do I need (wound care, injections, etc.)?
5. What kinds of activities and foods are limited? For how long?
6. Do the doctors caring for me after my stay have access to my test results and medicines? Do I need follow-up tests?
7. Are my new medicines safe to take with my other medicines, vitamins or supplements?
8. Do I know how and when to take my medicines and how I will get prescriptions filled?
9. Who will provide the extra personal, home or healthcare services I may need?
10. Who can help me if I have concerns about medical costs?

Pneumococcal Disease is Serious...Make Sure You are Protected!

What is pneumococcal disease?
Pneumococcal disease is caused by bacteria that can lead to serious infections in the lungs (pneumonia), blood, and brain (meningitis).

How do you catch pneumococcal disease?
You can catch pneumococcal bacteria from an infected person who coughs or sneezes around you.

Is pneumococcal disease serious?
Yes. Even with good medical care, pneumococcal disease can be deadly. The disease is hard to treat because some bacteria have become resistant to antibiotics. Pneumococcal bacteria can cause pneumonia, blood infections, and meningitis. Such infections can lead to deafness, brain damage and even death.

Am I at risk?
Yes. Anyone can get pneumococcal disease.

How can I protect myself from pneumococcal disease?
You can protect yourself from pneumococcal disease with a vaccination. The dialysis unit can vaccinate you. You can receive this vaccination along with your flu shot.

Ask your nurse or care manager if you are up to date for all vaccines!
Healthy Eating

Chicken Apple Salad
Yield: 5 servings

Ingredients
1 ½ cups cooked chicken, cubed
½ cup celery, diced
2 cups raw apples, unpared, diced
¼ cup mayonnaise
¼ tsp. ground cinnamon
1/3 tsp. lemon juice
¾ cup seedless green grapes

Blueberry Cake Muffins
Yield: 18 muffins

Ingredients
2 cups flour
1 ½ tsp. baking powder
½ cup margarine (softened)
¾ cup sugar
2 eggs
1 tsp. vanilla
½ cup milk
1 cup blueberries

continued on back cover >
Healthy Eating

Instructions:
1. Combine all ingredients.
2. Chill.
3. Serve on lettuce leaves.

Instructions:
1. Preheat oven to 375 degrees.
2. Put paper liners in 18 muffin cups.
4. Using a large bowl, beat sugar, margarine, vanilla and eggs until light and fluffy. Add milk and flour mixture. Beat only until smooth. Fold in blueberries.
5. Divide muffin batter evenly into muffin cups.

Each muffin equals one salted starch.