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CENTERS FOR DIALYSIS CARE NEWSLETTER | FALL 2013

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CDC

Centers for Dialysis Care

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Centers for Dialysis Care Newsletter
Fall 2013
Editor: Marilyn Hahn
Design: Impel Creative

This newsletter is a publication for the patients at the Centers for Dialysis Care. Articles are contributed by staff and patients from all the facilities. If you are interested in having an article published, please contact the Volunteer Services office at (216) 229-6170, ext. 130.

On the Cover

Orchids
Elizabeth Womack-Murphy
CDC Oakwood
Courtesy of CDC Art Therapy

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

CDC

Centers for Dialysis Care



The Centers for Dialysis Care (CDC) is an independent provider of dialysis and related health services to individuals with kidney disease. CDC offers 18 locations across northeast Ohio, including CDC Access Care.

2013 Holiday Schedule

Thanksgiving Week Schedule—Closed Thursday, November 28, 2013

Mon/Wed/Fri Patients

Sunday, November 24, 2013
Tuesday, November 26, 2013
Friday, November 29, 2013

Tues/Thurs/Sat Patients

Monday, November 25, 2013
Wednesday, November 27, 2013
Saturday, November 30, 2013

Christmas Week Schedule—Closed Wednesday, December 25, 2013

Mon/Wed/Fri Patients

Sunday, December 22, 2013
Tuesday, December 24, 2013
Friday, December 27, 2013

Tues/Thurs/Sat Patients

Monday, December 23, 2013
Thursday, December 26, 2013
Saturday, December 28, 2013

New Year's Week Schedule—Closed January 1, 2014

Mon/Wed/Fri Patients

Sunday, December 29, 2013
Tuesday, December 31, 2013
Friday, January 3, 2014

Tues/Thurs/Sat Patients

Monday, December 30, 2013
Thursday, January 2, 2014
Saturday, January 4, 2014



Welcome



I think the summer went by much too quickly but fall is here. Kids are back to school and life is back to more of a routine. We all have great hope for the Browns and the Buckeyes.

Medicare

As you know since 1973 Medicare has been providing insurance coverage for people on dialysis regardless of age and they now cover about 85% of them. Since 2011 the payment for dialysis services has been bundled together to include the cost of the treatment, laboratory blood tests and all medications given on dialysis. Prior to 2011 dialysis facilities lost money on the cost of the treatment and made money on the medications. Due to the new bundled reimbursement and the label change on EPO, which said to give the lowest amount in order to prevent the need for a blood transfusion, the amount of EPO has decreased.

In early January Congress was looking for ways to prevent the country from falling off the "fiscal cliff." To solve part of the problem they passed a law that said to pay dialysis facilities less money since less EPO was being

used. The Center for Medicare and Medicaid, CMS, recently published proposed rules however they are looking for a 12% or \$30 per treatment cut. This would be devastating to the majority of facilities in the USA.

Even though the amount of EPO per treatment has gone down the price of it has gone up. Other costs have gone up as well. We pay our staff more each year and the cost of providing them with health insurance also goes up. CDC has used the money we now get from Medicare to buy new dialysis equipment, heated chairs and TVs.

We have put a lot of money into renovating the dialysis facilities. Recent improvements have been made at Oakwood, Cleveland East, Euclid, Shaker and Cleveland West. CDC is committed to have clean, safe and attractive facilities for patients to dialyze. Other facilities will be

"I want to thank everyone who signed a letter to send to our legislators. I carried almost 700 letters to DC."

done next year as long as we don't get a huge cut in the reimbursement.

Everyone in the dialysis industry has been working very hard to urge CMS that their proposed cuts are too drastic. We are also asking Congress to tell CMS to make sure that access to care is preserved and that they need to ensure that the final payment amount

covers the cost of care. I have been to Washington DC several times in the past few months to meet with all of our legislators. Both Senators Sherrod Brown and Rob Portman are on the powerful Senate Finance Committee. Recently staff from both Senate offices has been to CDC Cleveland East to hear more about the issues and to talk with Dr. DeOreo, staff and patients. Representative Dave Joyce toured the Painesville facility as well. Tours with the other 3 Representatives at CDC facilities in their districts are scheduled.

I want to thank everyone who signed a letter to send to our legislators. I carried almost 700 letters to DC. I know that many of the staff also sent email letters to them. Comment letters were sent from many organizations and individuals to CMS at their request to explain the impact of the proposed

rules. Final rules will be published in early November which will include the final reimbursement rates.

I want to thank everyone again for all of your help.

DIANE WISH
President & CEO

Doctor's Notes

Why am I thirsty after Dialysis?



There are lots of reasons. The most important is that after dialysis, your body has more

salt than water in it. The machine takes off the water weight you gained, but often leaves the salt (sodium) behind. This high salt makes you thirsty so you will drink more to replace the water your body needs to balance the salt.

Between dialysis treatments, the salt comes from your diet, the food you eat, the choices you make, and the salt shaker. During dialysis, the salt comes from the dialysate fluid.

Most patients have a body salt (sodium) amount that is LESS than the amount in the dialysate fluid. So, at the end of the treatment, patients leave dialysis with more salt than they came with, even though they weigh less. Our bodies tend to keep a steady balance between salt (sodium) and water. So, if we have more salt than water, we are thirsty and want to drink more water.

Since we use dialyzers and dialysis machines capable of removing water and toxins very well, we have been able to use shorter dialysis treatments. One side effect of shorter treatments is that some patients experience cramps from fast removal of water.

At first, doctors thought that if they increased the amount of salt (sodium) in the dialysate fluid that would lower the chance of getting cramps. For many years this was a popular practice. In fact, dialysis machines have settings that actually increase the salt (sodium) to high levels for a short period of time (usually less than ½ of the treatment time) to soften the effect of fast fluid removal. This method is called “sodium profiling,” “variable sodium,” or “sodium modeling.”

As with most things in medicine, there is both good and bad from the practice of sodium modeling. The good is a short term lowering of cramping. The bad is that patients who dialyze on the higher sodium dialysate fluids or use sodium modeling are thirsty after dialysis. They gain significantly more water weight between dialysis treatments than patients who don't use sodium modeling. That requires them to have more fluid removed, risking more cramps and discomfort. In some patients, this excess salt (sodium) results in more difficult to control blood pressure.

Over that past few years, kidney doctors have changed their minds about this high salt (sodium) dialysate fluid and sodium modeling. Most are moving away from the practice. At CDC only about 30% of patients are dialyzed using sodium modeling. A lot of our kidney doctors do not use it at all.

Our medical service committee (CDC Medical Directors and other kidney doctors from our staff) decided to stop using sodium modeling. We will stop using it in September, unless your kidney doctor believes that in your case we should stop it gradually by decreasing the amount of excess salt (sodium). After December 2013, CDC will no longer use the sodium modeling program on the dialysis machines.

There are better ways to deal with cramps than increasing sodium. The most effective is to be sure that you are taking no more salt (sodium) than your dietitian recommends. This will reduce the amount of weight (fluid) that needs to “come off” during dialysis. The machines can be set to take more fluid off at the beginning of the treatment and less at the end, to allow your body to adjust (this program is called “UF Profiling”). Sometimes the best way is to increase dialysis time by 15 to 30 minutes. In some patients, turning the temperature down on the machine will also improve comfort. Obviously, you should talk to your kidney doctor about these choices.

Summary

1. **What?** CDC will stop using sodium modeling in September 2013.
2. **What Is It?** Sodium modeling is a setting on the dialysis machine that increases the amount of salt (sodium) in the dialysate fluid.

3. **Why Use Sodium Modeling?** It appears to reduce cramping in some patients for a while.
4. **How Is It Bad?** It adds more sodium (salt) to your body. This makes you thirsty and more likely to gain more water weight. In some patients, it may make the blood pressure worse.
5. **How Would I Know That I Am On Sodium Modeling?** Ask your patient care tech or RN. It is on your orders and is shown on the machine itself.
6. **What If I Am On Sodium Modelling And I Don't Feel Well When It Is Stopped?** Review what you are feeling with your kidney

doctor. There are other ways to make you comfortable on dialysis that don't add salt (sodium) to your body.

7. **Are There Other Things I Can Do?** Most importantly, gain less water weight between dialysis treatments. Water weight comes from the fluid (water) you drink. You drink because you are thirsty. You are thirsty because your body needs to balance the extra salt (sodium) in your body with water.
 - a. Use less salt (sodium) on your food.
 - b. Talk to your dietitian about choices in your diet to reduce salt (sodium).

- c. Gain less water weight between dialysis treatments.
- d. Talk to your kidney doctor to see if you should add 15 to 30 minutes to your dialysis treatment.
- e. Talk your kidney doctor about turning the temperature down a little on the dialysis machine.

CDC to Stop Administering Blood Transfusions

CDC will no longer administer blood transfusion during dialysis after 2013. If your kidney doctor believes you need a transfusion she or he will arrange for you to get any necessary treatments at an outpatient center that specializes in blood transfusion.

Insurance Information

Medicare Patients

It is important for all Medicare patients to maintain their Medicare Part B coverage. Please keep up on all Medicare premiums. It is imperative that dialysis patients remain current with all premiums due in order to ensure that they continue with their Medicare coverage.

If you are receiving Social Security, your premium can be deducted from your monthly check. Otherwise, please make payments to Medicare by the due date. If you have any questions or are interested in this option, please contact your PSR or social worker.

If you are having trouble paying for your Medicare premiums please notify a social worker or PSR immediately to prevent a termination of your Medicare benefits.

If you have new insurance please provide a copy of the insurance cards to the PSR or social worker immediately

to ensure no interruptions of payments or contact the Insurance Coordination Specialist, Tai James at 216-283-7200 ext. 275.

If you have outstanding bills with CDC please contact the patient billing rep, Karolyn Kirkwood at 216-283-7200 ext. 299 for assistance. You may be eligible for a monthly payment plan or other financial assistance.

Did You Know...

That you can add your checking account or credit card information to your CDC account? CDC now has the ability to set up monthly payments for outstanding bills that will be automatically deducted from your listed accounts. This is an easy and convenient way to pay your CDC bills. If interested, contact the Business Office at 216-283-7200 ext. 299.

Music Notes

Music Centennials and Bicentennials

May 29, 1913 – The ballet *The Rite of Spring*, by Igor Stravinsky, premiered in Paris, France. Police were called to calm the riots that broke out because of its “modernistic” music and dance. You may have heard (and liked) it in the movie “*Fantasia*” or in an orchestra performance.

Consider adding to your music listening repertoire the following musicians whose centennial or bicentennial birthdays occur in 2013:

Opera

- Richard Wagner (5/22/1813) – composer (*Lohengrin*, *Das Rheingold*)
- Giuseppe Verdi (10/10/1913) – composer (*Aida*, *La Traviata*)
- Risë Stevens (6/11/1913) – singer
- Richard Tucker (8/28/1913) – singer

Classical

- Margaret Allison Bonds (3/3/1913) – composer, pianist, teacher.
- Benjamin Britten (11/22/1913) – composer (*A Young Person’s Guide to the Orchestra*)

Popular

- Jimmy Van Heusen, (1/26/1913) and Sammy Cahn (6/18/1913) – songwriters
- Frankie Laine (3/30/1913) songwriter, actor, singer – “*Rawhide*”.
- Harry Mills (8/9/1913) – singer (*Mills Brothers*)
- Tony Martin (12/25/1913) – singer

Blues

- Etta Baker (3/31/1913) – Piedmont blues guitarist/singer.

- Muddy Waters (4/4/1913) – Guitarist (*Mississippi and Chicago blues*)

Jazz Band/Orchestra

- Woody Herman (5/16/1913) – Songwriter, saxophonist, clarinetist, singer, band leader (“*Woodchopper’s Ball*”).
- Bob Crosby (8/23/1913) – Orchestra leader

Musical Theater/Movies

- Mary Martin (12/1/1913) – singer, actress (*Peter Pan*, *South Pacific*)
- Danny Kaye (1/18/1913) – Actor, Dancer, Singer, (“*White Christmas*”)

Country

- Grandpa Jones (10/20/1913) (*HeeHaw*)



Creative Arts News

Artist in Focus

Malinda Jenkins

CDC of Cleveland-East

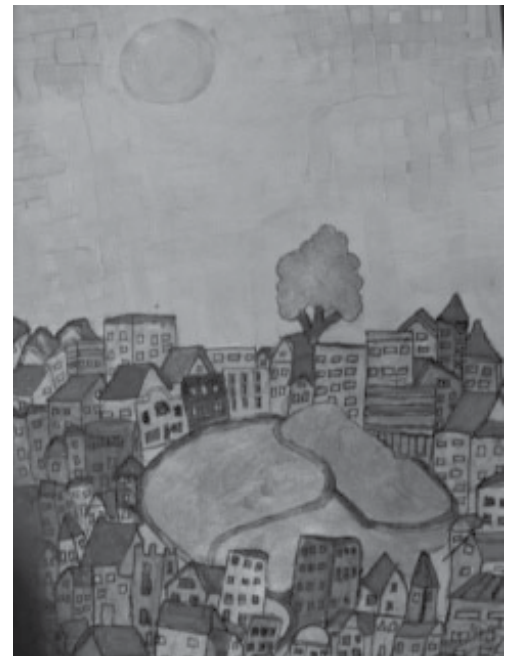
1. **Have you always been creative?** No
2. **Why did you begin working with art therapy?** I've always loved crafts and I find working with art therapy very rewarding.
3. **What materials do you enjoy working with?** Nothing specific, anything available but I particularly like to paint with acrylic.
4. **What inspires you to create art?** I like to see that I can take nothing and turn it into something.
5. **How long have you been working on your art?** Two years.
6. **In what other areas of your life are you creative?** I love to cook
7. **What other artist or piece of art work has inspired you?** Bob Ross
8. **What is the most satisfying thing for you about making art?** Usually I don't like what I am working on but when finished I am surprised how much I love it.
9. **What does art do for you as a dialysis patient?** It satisfies me that I have done something worth while on dialysis and it passes the time.
10. **What advice would you give someone who is just starting out or is thinking about creative work?** To try it. After the results you get you will be so happy you tried it.



Celebrating the Seasons

As the leaves change color and the temperature slowly descends, the Creative Arts Therapy Department begins to think toward Fall and holiday activities or "Holiday Happenings". Each facility that has Creative Arts celebrates the seasonal changes differently. Patients will continue to work on their individual projects as well as have the opportunity to engage in holiday activities in the lobbies or during treatment.

Creative Arts Therapy Department is putting out a "Call for All Patient Artists" to begin thinking about the CDC Holiday Greeting Card Competition. As in years past the art submitted must be of a non-denomination theme. Winter scenes are a good place to start. The painting that won last year was that of a snow globe. The art must be rectangular in shape. The paintings will be due at the end of September. Let your Creative Arts Therapist or



Volunteer Coordinator know you are interested. If you have any questions these would be the folks to ask also.

For the Fun of It

Word Search

Autumn

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

Find all the words from the word list:

BACK TO SCHOOL	OCTOBER
CORN MAZE	PUDDLE
FALLING LEAVES	RAIN
HALLOWEEN	RUBBER BOOTS
HARVEST	SEASON
NOVEMBER	SEPTEMBER



Sudoku

7				2		9		
			4	3		2		
					8	4	6	3
	2			1		5		
4	1		2		7		8	9
		9		8			2	
6	4	7	1					
		5		6	2			
		2		4				5

		2				8		
	7			8			5	
4		5		1		7		6
			7	9	4			
8			3		5			1
			8	6	1			
6		9		4		2		8
	4			5			6	
		1				9		

This is a zigzag word search puzzle. Words go left, right, up, down, not diagonally, and can bend at a right angle. There are no unused letters in the grid, every letter is used only once.

Patient Profile



ROSIE MASON

CDC of Warrensville Heights
Monday, Wednesday,
Friday – 2nd shift

Rosie Mason is a faith centered person who puts all her trust in the Lord. Born in Cleveland and raised in Twinsburg, Rosie was the 4th of eight children growing up as a minister's daughter. She attended Chamberlin HS where she played volleyball and sang in both the school and church choirs. Following high school she went through a program at Kent State to become a Para-professional, and took a job working with psychiatric patients at various state run facilities in the Greater Cleveland area. She retired in 2000 after 30 years of service.

While working she met a wonderful co-worker named Alonzo, who she has been happily married to for the past 37 years. They settled near the Cleveland/ Warrensville Hts. border and raised a son, Derrick, who is a librarian and lives in Colorado. One of Rosie's greatest blessings is her husband, whose love is

unconditional. He has been at her side through a host of health challenges as well helping to support Rosie's siblings when they were facing difficult times. She especially appreciates his ability to remain calm no matter what is going on.

Rosie suffers from a genetic kidney condition so she knew she was going to need dialysis, she just didn't know when. In addition, she has diabetes and problems with her blood pressure. At her doctor's encouragement, she had fistula surgery prior to starting dialysis. In 2008 she learned she was in renal failure and started treatments

Although she was always allergic to certain medications, shortly after starting dialysis she had a range of allergic reactions that she now lives with. Later in 2008, Rosie learned she had breast cancer and had to undergo a double mastectomy, chemotherapy and radiation treatments. At one point, Rosie spent every day getting some type of treatment. Yet, she faced that difficult time like she approaches everything with her immense faith and never wavering patience.

Rosie's faith is sustained by her involvement with the Affinity Missionary Baptist Church under

"Rosie encourages those struggling with anything to put their trust in the Lord. Rosie's incredible outlook is a testament to her faith."

at the Warrensville facility. Rosie spends her time at CDC visiting with staff and patients, and working puzzles. She struggles with the diet restrictions because some days she feels like eating and other days she does not.

the leadership of Pastor Ronald E. Maxwell where she sings in the church choir. She lives each day to praise and honor her maker. Rosie encourages those struggling with anything to put their trust in the Lord. Rosie's incredible outlook is a testament to her faith. May we all be like Rosie, living each day with gratitude for our blessings.

Patient Profile



ZOILO POZO

CDC of Heather Hill
Monday, Wednesday,
Friday – 2nd Shift

Zoilo Pozo achieved the American dream by working hard and facing challenges with a can do attitude. Born in Maracaibo, Venezuela he was an only child who excelled in school and on the baseball and soccer fields. As a young man he went to work for the Shell Oil Company accepting positions with greater responsibilities. In 1955 he decided to move to the US to learn English which he felt was necessary to advance his career opportunities.

He arrived in New York City where he spent too much money visiting nightclubs. At the recommendation of the Venezuelan consulate, he moved to Cleveland to get a job as a clerk in the shipping business translating manifests. In 1958, Zoilo brought his parents to Cleveland. His Mom was happy here, but his Dad decided to return to Venezuela as he struggled with the language.

Zoilo's cousin Sylvia also came to Cleveland to go to school and they often socialized. One evening, she invited him to dinner at a classmate's house where he met a beautiful woman named Margaret. They fell in love and married in 1960. He affectionately refers to Margaret as Amor which means "love" in Spanish. They settled in South Euclid and had 3 children: Linda, Richard and Charles. A devoted father, he coached numerous soccer teams while raising his family. He also opened his own automotive parts business which he retired from in 2001. Currently, Zoilo lives in Newbury and his children and grandchildren are in nearby towns. Zoilo is mourning the loss of Amor who passed away this past September after 53 years of marriage.

carries a picture of him in his wallet next to pictures of his family. Following the doctor's recommendation Zoilo had fistula surgery prior to needing dialysis. In December of 2012, Zoilo noticed some swelling in his ankles which he learned was a symptom that it was time to start on dialysis. His transition to dialysis went fairly smooth due in large part to having a working fistula.

Each of Zoilo's children offered to be tested to be a living kidney donor but he would not allow them as he is not interested in having a transplant. While at dialysis, Zoilo visits with fellow patients, caregivers and staff, sharing his playful spirit. He also participates in art therapy despite having to use his left hand, where he enjoys painting. Zoilo lives on his own, driving himself to and from

"Zoilo Pozo is a hard-working, family-man with a big heart and playful spirit."

Seven years ago, Zoilo learned he had a blockage in an artery of his left kidney most likely caused by his smoking habit. Zoilo is extremely grateful to his nephrologist, Dr. Lautman, for helping him stay off of dialysis for so long. Zoilo refers to Dr. Lautman as his angel, and even

dialysis. He credits his wonderful neighbors who help him with yard work and other projects around the house. Zoilo Pozo is a hard-working, family-man with a big heart and playful spirit. We are grateful to have him as part of the CDC family.

Healthy Eating

Pumpkin Bars

Serving size: 1 bar

Ingredients

2 cups flour
2 tsp. baking powder
2 tsp. cinnamon
1 tsp. baking soda
4 eggs
16 oz. can pumpkin
1 ½ cups sugar
1 cup cooking oil

Preparation

1. Pre-heat oven to 350-degrees.
2. In a small bowl, stir together the first 4 ingredients.
3. In a large bowl, combine eggs, pumpkin, sugar, and oil. Beat until well combined. Add dry ingredients to the egg mixture and stir until well blended.
4. Spread into an ungreased 15 x 10 x 1-inch baking pan.
5. Bake for 25-30 minutes.
6. Cool and cut into 36 bars.

Nutrition Facts (per serving)

128 Calories, 2 g Protein, 7 g Fat, 115 mg Sodium, 45 mg Potassium

Tips for a Healthy Holiday Season

The average holiday meal is well over 2,000 calories! That's about how much you should consume over the course of an entire day. Don't let the holidays drag you down and get you off track. Follow the tips below and you'll be sure to have a healthy and successful holiday season.

Enjoy high protein foods that may be at your holiday parties

- Make sure to always choose a protein food; don't skip your protein food to allow for extra dessert!
- Good choices for protein foods would be roasted turkey, chicken, beef, pork, duck, lamb, veal, calamari, fish, seafood, squid and deviled eggs.

Pay attention to phosphorus at all times

- Use whipped nondairy topping instead of ice cream on desserts.
- Avoid nuts, seeds, whole grain products, chocolate, colas and baked beans.
- Candies such as Jolly Ranchers, jelly beans, fruit chews and Skittles are low in phosphorus.
- Remember to take your binders before eating your holiday meal or holiday snack.
- Carry your binders with you to any party or holiday get-together.

Limit high sodium foods whenever possible

- Enjoy roasted fresh meat such as turkey, chicken, beef and pork.
- Avoid smoked or cured meats.
- Try low sodium seasonings when roasting your poultry.
- Limit your intake of ham or self-basted turkey if that is all that's available. Take a small portion and fill up on other foods.
- Try making your own bread stuffing; packaged stuffing mixes are usually very high in sodium.



Holiday Eggnog

Serving size: 1/3 cup

Ingredients

- 1 ½ cups liquid non-dairy creamer
- ½ cup frozen or refrigerated egg substitute
- 2 tablespoons white sugar or sugar substitute
- 1 ½ teaspoons vanilla
- Nutmeg or Cinnamon

Preparation

1. Combine the first 4 ingredients in blender, mix well.
2. Chill in refrigerator for at least ½ hour.
3. Garnish with a sprinkle of nutmeg or cinnamon.

Nutrition Facts (per serving)

134 Calories, 3 g Protein, 8g of Fat,
159 mg Potassium, 53 mg Phosphorus

Tips for a Healthy Holiday Season (cont'd)

- Make homemade gravy from pan drippings that are thickened with corn starch or flour. Canned gravy and packaged gravy mixes are high in sodium.
- If you like mashed or sweet potatoes make sure to follow the low potassium potato soaking instructions.

Go easy on potassium at the dinner party

- Moderation is the key. Have only “tastes” of the higher potassium foods and focus mostly on the lower ones.
- Many traditional holiday favorites such as pumpkin pie, pecan pie, yams, sweet potatoes, squash, and nuts are also high in potassium.



CDC

Centers for Dialysis Care

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visit us online