

Patient Rights

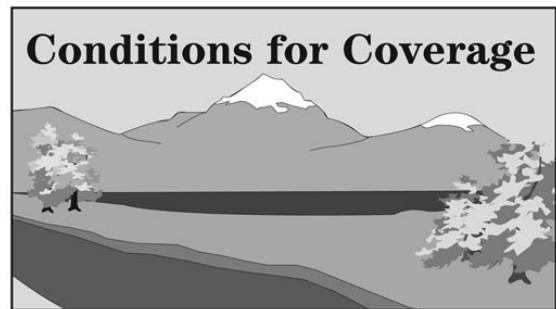
By Joyce F. Jackson, President and CEO



Northwest Kidney Centers must inform patients of their rights and responsibilities when they begin treatment and must protect and provide those rights.

As a patient, you have a right to . . .

- Be treated with respect and dignity.
- Recognition of your individual and personal needs.
- Receive all information in a way that you can understand.
- Privacy and confidentiality in all aspects of your treatment, as well as your personal medical records.
- Be informed about and participate in all aspects of your care. You have a right to know of any changes in your doctor's dialysis prescription and reasons for them. You have the right to refuse these changes.
- Be informed of your right to refuse or discontinue treatment.
- Be informed of your right to refuse to take part in experimental research.



- Make advance directives and know your facility's policy regarding them.
- Be informed about all types of treatment options and locations.
- Receive information about treatment options not offered by your facility.
- Be informed of your facility's policies regarding your care.
- Be informed of your facility's policies regarding the reuse of dialysis supplies.
- Be informed by your doctor or qualified practitioner about your medical status.
- Be informed of services available in your facility.

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New Year's Resolutions: Not Again

By Monica Van Winkle, MS, Renal Dietitian

Why do so many people make the same New Year's resolutions every year, especially when food and dieting are involved? Doesn't it seem self-defeating to resolve to do the same thing over and over again, failing more and more each time?

If change were not possible, the best resolution would be to stop making New Year's resolutions altogether. Before abandoning all hope, though, let's consider the psychology behind the New Year's resolution.

In early January, the resolve to change typically follows a month of overeating, drinking and overlooking exercise. It's more appealing to modify eating and exercise behaviors when you are feeling physically unwell after a month of overdoing it.

The motivation to change often grows smaller when a person has devoted a month to new eating habits and exercise behaviors. Why? Maybe results aren't seen quickly enough or maybe it's too cold to get outside and walk. Whatever the reason, the following suggestions can be used to make 2009 the last year you make the same resolution.

1. Set *realistic* goals and make changes in small steps. For example, if losing weight is your priority, remember that the most successful means of losing weight is by going slowly. Cutting out too many calories too quickly can prevent weight loss and keep you from maintaining a healthy weight. Work with your dietitian to set the best amount of calories that won't slow your metabolism. Your dietitian can also help determine the right amount of physical activity you need

to stay healthy and maintain energy levels.

2. Stay focused on the process and not the end result. As with many things in life, people get caught up in the destination and not the journey on the road to reach the finish line. Enjoy spending time with loved ones while going for a bike ride or take pride in learning a new skill like cooking (with low sodium, of course).
3. Lastly, don't give up when you make mistakes. Changing behavior is difficult and mistakes are to be expected. We can all learn from and use our mistakes to help us do better next time.

Give Home Hemo a Trial Run at a Dialysis Center

Daily home hemodialysis fosters independence and improved health overall. The Home Hemo dialysis department at NKC would like to give you more information about home treatment choices. One way of doing this is to offer you daily hemodialysis in the Home Hemo department on a trial basis.

You can receive daily hemodialysis treatment for a short period (about two weeks). At the end of this time you and your doctor can evaluate how the daily routine has affected your feelings of improved health and well-being.

There are no strings attached. If you meet eligibility standards and decide to go on home hemodialysis, we will make arrangements for training. If you prefer to stay in-center after the trial period, you are free to do that. For more information, please contact Gerry Morrison at 206-292-2771, ext. 6810 or gerry@nwkidney.org.

Patient Rights

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- Be informed in advance of any charges for services not covered under Medicare.
- Receive the necessary services outlined in your plan of care.
- Be informed of your facility's emergency plans.
- Be informed of your facility's rules and expectations regarding patient conduct and responsibilities.
- Be informed of your facility's Connections program for suggestions or complaints, and NKC's internal grievance process. Also to be informed of how to contact the Northwest Renal Network or the Washington State Survey Agency about filing an external grievance.
- File a grievance with NKC, Northwest Renal Network, or Washington State Survey Agency without fear of reprisal or denial.
- File grievances either personally, anonymously, or through a representative.
- Be informed of your facility's policies for a routine or involuntary transfer, a routine or involuntary discharge, and discontinuation of services.
- Receive written notice 30 days in advance of being involuntarily discharged, except in cases of immediate threats to self, other patients or staff.

A complete and detailed list of NKC Patient Rights and Responsibilities is available from your social worker, nurse manager, charge nurse, or NKC Community and Patient Relations coordinator, Sonja Coffman at 206-292-2771, 6923 or sonja@nwkidney.org.

Renal Support Network: Hopeline, Podcasts, Newsletters and More

Northwest Kidney Centers staff are strong supporters of the Renal Support Network's (RSN) efforts to make life better for people at any stage of kidney disease. The RSN is a not-for-profit, patient-run and patient-directed organization.

The RSN offers patients a variety of resources including a toll-free help line, a weekly podcast, web and print, resources highlighted below:

HOPEline can be your helpline.

Toll-free phone number: 800-579-1970

Volunteers with chronic kidney disease have been trained to give you support and information.

Podcasts



KidneyTalk is a weekly internet podcast on important kidney disease topics. Hosts Lori Hartwell and Steven Furst have very knowledgeable guests on their programs.

Newsletters

Kidney Times and ***Live & Give*** newsletters are available online and in your unit.

To access podcasts, newsletters, and more, visit the RSN Web site, www.RSNhope.org.

You Can Prevent Infections

We are beginning new steps to reduce the chances that patients, staff and visitors will spread infections. Thank you for cooperating to keep everyone as healthy as possible.

Hand Hygiene

- Use hand hygiene (either hand sanitizer or soap and water) every time you enter and leave a dialysis unit.
- When washing your hands, use only sinks that are clearly marked “Hand Washing” (sinks marked “Utility” are not for hand washing).
- Always wash your hands with soap and water after using the bathroom and before and after eating or drinking.
- Cover your cough with your sleeve or sneeze with a tissue. Throw away the tissue. After coughing, sneezing or blowing your nose, wash your hands with soap and water.

Dialyzing In-Center

- When patients are going on or off dialysis, everyone except the nurse or the dialysis technician must stay at least three feet away from the dialysis station. Visitors may be asked to sit in the waiting area during this time. An “on” is defined as connecting a patient to dialysis and taping needles. An “off” is completed when final dressings are placed.
- The patient laptop computer and cordless phone will be brought to you after the on and removed before the off. Staff will ask you to use hand sanitizer before and after you use these shared pieces of equipment.
- As a patient you may notice that it takes longer for nurses and dialysis technicians to answer alarms. Be assured that the staff will take the right steps in an emergency

situation to address your medical needs in a timely way.

Family and Visitors

- A family member or other visitor who assists with hemodialysis procedures (such as self-cannulation or holding puncture sites) must wear personal protective equipment to protect themselves from the risk of exposure to blood or body fluid.
- Visitors must wear personal protective equipment if they sit in an isolation room with a dialysis patient. Personal items brought into the isolation room must be removed in a closed bag.
- Surgical masks are available to individuals with respiratory symptoms who wish to remain in the dialysis unit. However, NKC would prefer you stay home when ill. By doing so, you will help reduce the risk of infection to our patients.
- Anyone experiencing a runny nose, frequent cough, frequent sneezing or temperature of 101 degrees or more, should stay home to reduce the risk of infection to our patients.
- Visitors must provide their own personal protective equipment including a gown or lab coat and face shield (protective eyewear and mask) and transport it in a closed bag each time they come to the dialysis unit. Without personal protective equipment, the visitor will not be able to assist with hemodialysis. This change will be effective Jan. 1, 2009.
- Staff at your unit can provide a list of where to purchase personal protective equipment and the costs.

2009 Event Calendar



NORTHWEST KIDNEY CENTERS DAY IN OLYMPIA

Wednesday, January 28

8:30 a.m. – 4 p.m.

Spend the day in Olympia with NKC employees, patients, and board members advocating for issues that help kidney disease patients. For more information, please contact Marcie Wirtz at wirtzm@nwkidney.org or 206-292-2771, ext. 1107.



NATIONAL KIDNEY MONTH

March 2009

Approximately 30 million adult Americans have kidney disease.

This month is dedicated to education, prevention, and treatment. For information about National Kidney Month, please visit www.kidney.org.



WORLD KIDNEY DAY

Thursday, March 12

Hundreds of organizations worldwide join forces on this day to support those who have kidney disease. This is a chance to make a difference. Join us! For more information, visit www.worldkidneyday.org.



NATIONAL DONATE LIFE MONTH

April

This month is a time to raise awareness of the need for organ, tissue, marrow, and blood donations. For more information and to help raise awareness, visit www.organdonor.gov.



KIDNEY HEALTH FEST

Saturday, May 2

Please join us for our seventh annual Kidney Health Fest for African American Families. This is a free, festive, fun event for the entire family. For more information, please contact Marcie Wirtz at wirtzm@nwkidney.org or 206-292-2771, ext. 1107.



2009 BREAKFAST OF HOPE

Thursday, May 21

Mark your calendar for the Breakfast of Hope from 7:30 a.m. to 8:45 a.m. at the Seattle Westin Hotel. The Breakfast supports NKC's high-quality, life-sustaining dialysis care and patient programs. For information, please contact Marcie Wirtz at wirtzm@nwkidney.org or 206-292-2771, ext. 1107.



CEREMONY OF REMEMBRANCE

Saturday, December 5

10 a.m.

The Ceremony of Remembrance is an opportunity for family, loved ones and NKC staff to take time to unite in a morning of reflection. Join us at SeaTac Pavilion to remember those we have loved and lost.

For more information about upcoming Northwest Kidney Centers events, please visit our Web site: www.nwkidney.org.

Slow Cookers for a Quick Meal

By: Erin Cox, RD



It's cold outside! Perhaps you are craving a bowl of soup or a creamy casserole dish. Can you fit these comfort foods into

your diet? You can, but watch out for high-sodium ingredients. Many soups, stews and casseroles use canned foods that have too much salt. Avoid canned goods by preparing meals from scratch. Don't like spending time in the kitchen? Try a slow cooker!

Slow cookers (the best known brand is Crock-Pot) can make home-cooked meals a snap. All you have to do is put the ingredients in the pot, turn it on, and your dish will be ready in a few hours. It can even be cooking while you are away for dialysis. When you come home, a hearty meal will be waiting for you.

I know what you're thinking. If it's that easy, does it taste good? The answer may surprise you. Cooking food for a long period of time brings out natural flavors. When you cook with less salt, you may lose flavor. You can replace that salty flavor by slow cooking your food and by adding other spices and seasonings.

Slow cookers can be purchased at most department stores. You can find one for as little as \$20. For more information on slow cookers or recipes, ask your nutritionist.

For a simple, flavorful meal that is low in salt, try this slow cooker recipe:

Slow Cooked Texas-Style Chili

Makes 4-6 servings

Ingredients

- 1 pound lean ground beef
- 1 large white onion, chopped
- 1 (8 ounce) can tomato sauce
- 1 1/4 cups water
- 1 (4-ounce) can chopped green chili peppers
- 1 orange or red bell pepper, chopped
- 2 tablespoons chili powder
- 1 tablespoon garlic powder
- 1/4 teaspoon ground cumin
- 1/2 teaspoon dried oregano
- 1/2 teaspoon dried thyme
- 1 teaspoon dried basil
- Cayenne pepper (*optional*)

Directions

1. In a large pot, cook beef over medium heat until browned. Stir in onion and cook until soft. Place in slow cooker.
2. Stir in tomato sauce, water, green chilies, bell pepper and spices. Cook for 8 to 10 hours on low or 4 to 6 hours on high for good flavor. Try topping chili with cilantro, sour cream or hot sauce for an added kick!

Output is published bi-monthly for kidney patients and interested persons by Northwest Kidney Centers. It is available on our Web site at www.nwkidney.org.

Output provides general information and is not intended to serve as a treatment guide. Patients must never change their treatment unless directed to do so by their doctor or transplant team.

Values: Service • Excellence • Integrity • Teamwork • Stewardship
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Coach's Corner

Redefining Health

By Sharon Pahlka, kidney patient and life coach



Maybe you saw the article in the November issue of *Newsweek* by Kim Lute. I was inspired. She had undergone two liver transplants by the age of 28, plus her large intestine was removed. But the article was not about her illness, it was about her

outlook on illness. Despite complications, she thinks of herself as the picture of health and will not allow her health problems to define her. Indeed, she suggests we all redefine health.

Is the picture of health defined as freedom from illness, weaknesses, failings and afflictions—the traditional definition? Or could it also be people who have lost their health and fought hard to gain it back? Could it be someone who knows what loss of health really means and who constantly strives for the best health they can achieve right now?

I wish I had had Kim's thoughts years ago. When I would think of myself as "normal" and work and play at full speed, I was often accused of living in denial. It *is* hard to learn your limits, I would often exceed mine. But you only know how much you can do by pushing your limits. Life is so much more than the ups and downs and difficulties of poor health. When I am going through surgeries, X-rays or numerous blood draws, it gets all my attention, but it also helps to remember that these times are just a part of my life and will pass.

Along with the setbacks of living with kidney disease, we can also have the satisfaction of our victories over it and an increased

appreciation of life. Many will not see us as healthy, but, as Kim Lute says, "The presence of illness isn't nearly as important as one's ability to overcome it."

Coaching Question: What is *your* picture of health? How do you define yourself? What does an illness have to teach you about life?

Coaching Tip: Let your health be defined by life, not an illness.

Homework: Write down your definition of illness and what defines you. Can your picture be improved?

Quotes:

"This, too, shall pass." *William Shakespeare*

"They can because they think they can." *Virgil*

NKC Pharmacy – Specialists Make A Difference

Do you go to a doctor who *specializes* in treating kidney disease? Of course. Do you sign up for a transplant at a hospital that *specializes* in kidney transplants? Of course. Do you use a pharmacy that *specializes* in dialysis and transplant medicines? It's a great idea. The NKC Pharmacy specializes in:

- Stocking all the medicines you need.
- Having complete knowledge of these medicines so you get the best advice.
- Maintaining a state-of-the-art computer system to check for drug and disease interactions.
- Offering compassionate customer service.
- Delivery to your home.
- Direct billing to your insurance / Medicare.
- 10 percent cash discount.

The pharmacy, located at 700 Broadway, is open 8 a.m. to 4:30 p.m., Monday through Friday. Refill your prescription by calling the 24-hour refill line at 206-343-4125, or fax to 206-343-4884.

2008 Ceremony of Remembrance

Dr. Michael Kelly shared the following words at NKC's Ceremony of Remembrance on Dec. 6, at the SeaTac Pavilion.

"I think it is very important that we gather together as a community to publicly show our love and respect, and to remember and honor your family members, friends and our patients who have died of kidney failure.

"As I thought about what to say today one word kept coming to me. COURAGE. At first glance you might think courage is the wrong noun because people who start dialysis are typically afraid of what lies ahead for them. I think many choose dialysis out of their very real fear of dying.

"However, more impressive to me when I think more deeply is how courageous these people were. When they came for their office visits, our time was filled with discussions about the adequacy of dialysis, their blood pressure, their hematocrits, their diet and phosphorus levels and any number of medical issues. We doctors did not appreciate the courage and stamina these people had!

"Getting out of bed at o'dark thirty; driving to dialysis; getting huge needles stuck into their arms, sometimes not successfully; dropping blood pressure; vomiting; cramping; then driving home and feeling wrung out for the rest of the day. And, they have to

prepare themselves to do this three times a week for the rest of their life! That is when their course was smooth. When the course was bumpy, there were access clottings, hospitalizations, multiple surgeries, infections, amputations, heart attacks, and strokes.

"Why did they continue to do this?

"To a large degree they did it for you, their loved ones. I can't tell you how many times patients told me that they did not want to continue dialysis but they did because their kids, grandkids and great grandkids wanted them to stay alive. They chose dialysis to be here for them, their family. To me this shows great courage and great love.

"Life with chronic kidney disease is not a walk in the woods. It is tough. These people were strong. They may not have looked strong on the outside but they had an inner strength and courage that pushed them on until the end. They truly deserve our love, respect, and our remembrance not just as patients or relatives, but as really courageous human beings."

Save the Date
Ceremony of Remembrance
Saturday, Dec. 5, 2009
SeaTac Pavilion
