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# kidney living<sup>®</sup>

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Winter 2017

Issue 17

**DON'T LET DIALYSIS  
STOP YOU  
FROM TRAVELING**

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WHY I KEEP  
WORKING

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CUT THE SALT  
WHEN DINING OUT



National  
Kidney  
Foundation<sup>®</sup>

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## HAPPY NEW YEAR!

I hope you enjoy this issue as much as I did. It includes tips on eating healthy, traveling and taking care of your teeth!

I was first diagnosed with kidney disease when I was 18 years old. Today, I have been a kidney patient for over 32 years, which includes 15 years on dialysis – 2.5 years on peritoneal dialysis and nearly 13 years on hemodialysis. At first, dialysis was traumatic and unpleasant. For me, it came with many obstacles such as my veins were too small, so clotting and de-clotting became routine. I also had extremely low blood pressure, which left me feeling even more sick and weak. My lack of appetite and changes to my eating habits, along with decreased fluid intake, were constant challenges.

On the positive side, I managed to work as much as my body allowed. I also traveled to cities in the U.S. and overseas - yes, it's possible and I recommend it to every kidney patient! Dialysis does not mean having to give up on everything, but perhaps adjusting our lives and finding ways to make room for a different kind of a life.

Finally, on January 3, 2008 I received a kidney transplant—it transformed my life. In addition to giving me hope, I developed a cautious, yet fighting attitude toward my disease. I have always tried to take advantage of every day and continue to seek activities such as meditation, yoga, painting, and travel to improve my mental and physical health. I also try to eat healthy and search for low sodium foods - using recipes and tips found in this magazine!



Wishing each of you all the best in 2017 and encouraging you to stay hopeful and active!

Sincerely,

*Ladan Soroudi*

Ladan Soroudi

## National Kidney Foundation

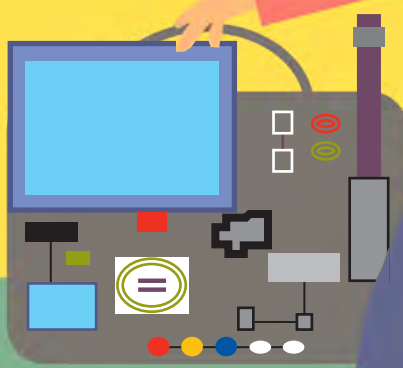
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It means you have good health!



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Do you continue to work on dialysis? How do you do it?



Insurance is so confusing!  
It makes my head hurt trying  
to understand my bills and  
coverage. What are the most  
important things to know?

Insurance is overwhelming!  
For most people, the most  
important thing to understand  
is how much will you have  
to pay out of pocket for your  
healthcare. So let's start with the  
basics that could add to your  
out-of-pocket costs:

**Premium:** Amount to be paid  
monthly or quarterly to keep the  
health insurance plan active.

**Out-of-pocket maximum:** The  
most you'll have to pay during  
a period (usually a year). Once  
you reach the out-of-pocket  
maximum, your plan pays 100%  
of covered services.

If you are unsure what your plan  
covers, read through the plan's  
documents or call the number  
on your insurance card to ask  
questions. Most people on  
dialysis have Medicare so you  
can visit [medicare.gov](https://www.medicare.gov) or call  
1-800-Medicare. You can also  
talk with your social worker or  
financial coordinator at your  
dialysis clinic.

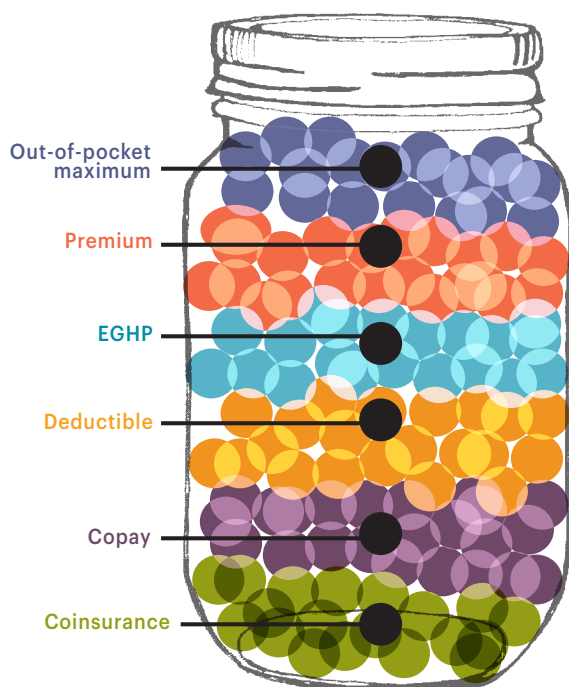
To learn more about  
insurance options and special  
considerations for people on  
dialysis, visit:  
[kidney.org/kidneyliving](https://www.kidney.org/kidneyliving).

**Deductible:** Amount you  
must pay for healthcare or  
medications before your  
insurance will pay.

**Coinsurance:** Amount you may  
still need to pay after meeting  
your deductible. Coinsurance  
is most often a percent (For  
example: 20%).

**Copayment (copay):** Amount  
you may have to pay for  
healthcare or medications. A  
copay is often a fixed amount  
(For example: \$25).

**Employer group health plan  
(EGHP):** Coverage sponsored  
by an employer or union.





# Take care of your smile. It can help take care of **YOU!**

By Cynthia Smith, DNP, CNN-NP, APRN, FNP-BC



Your smile doesn't just tell people how you're feeling. It also tells a lot about your health. Issues with the teeth and mouth are common in those with kidney disease and even more so for those on dialysis. Research suggests that decreased kidney function can lead to oral issues, and oral issues may worsen kidney disease.

Common problems include a dry mouth, bad breath, a bad taste in the mouth, mouth sores, a sore throat, inflamed gums, cavities and loss of teeth.

These changes can cause you to eat less or to make poor food choices if they are easier to chew and swallow. It can also lead to malnutrition and a higher risk for infection.

Periodontitis is an inflammation of the gums and underlying structures of the teeth. Periodontitis has been found in up to 80% of those on dialysis.

Being diabetic also increases the risk of periodontitis, and having periodontitis can make control of diabetes more difficult. Periodontitis has been associated with an increased risk of poor health, heart disease, and even death, especially in those who smoke.

There are many things you can do to improve your oral health that could improve your overall health.

## IMPROVE ORAL HEALTH

- Be sure to go to all your dialysis treatments and stay for the full time.
- Keep a healthy phosphorus level.
- If you smoke, QUIT!
- Brush and floss your teeth daily.
- Get regular dental cleanings.
- Watch for any changes in your mouth and seek treatment if problems develop.

A dry mouth is a very common problem, and can be a contributing factor for poor oral health. Many medications can cause you to make less saliva. If this is a concern, discuss it with your healthcare providers as there may be alternatives. Chewing sugar-free gum can help increase saliva, and saliva substitutes can be useful. Limiting caffeine, alcohol, and mouthwashes that contain alcohol can help. Avoid mouth breathing and consider using a humidifier.

Research is ongoing about the links between oral health, kidney disease, and overall health. There are many things you have to think about on dialysis, but maintaining your smile can really be beneficial. Take care of your smile—it can help take care of **you!**

# Travel Tips

*By AnnMarie Correia, RN*

Dialysis should not stop you from traveling. It takes some planning, coordination, and communication with the dialysis team, but it is very possible.

Here are some helpful tips for planning travel whether you are on hemodialysis or peritoneal dialysis.





## What you should keep in your carry-on bag at all times:

- **Medications**—pack all medications. Pack a few extra days worth in case of delays.
- **Personal information**—carry identification, emergency contact information, and the address of where you are traveling to.
- **Medical information**—carry a list of your medications, allergies, vascular access and dialysis treatment information, and contact information of your dialysis center.



### HD

#### In-center Hemodialysis

- Inform your dialysis team as soon as possible of your travel plans.
- Obtain information if dialysis treatment will be covered by insurance.
  - In many instances it is covered in the United States.
  - International travel may require out of pocket payment.
- Some dialysis centers have a travel department that can help set up dialysis arrangements. Your dialysis center staff will need to send your records in plenty of time before your visit. Planning in advance is ideal, although some labs are needed within 30 days of your traveling.
- Confirm your dialysis treatment information and schedule at dialysis center where you will be traveling to.

### PD

#### Peritoneal Dialysis

- Inform your doctor and home dialysis nurse of travel plans.
- Coordinate with the dialysis unit and supply company to ensure delivery of supplies to the destination.
- Pack additional supplies: Hand gel, liquid soap, antibacterial wipes (for work space and shower head), masks, transfer set, tape and caps.
- Your dialysis center may have you carry a peritonitis kit.
- Obtain information about dialysis centers and the nearest hospital at your destination in case of an emergency.
- If you are staying at a hotel, alert them that there will be a shipment of supplies delivered and additional trash that will need to be disposed.

*Note: People on peritoneal dialysis who go on a cruise will need to do CAPD (manual exchanges). The movement of the ship alters the scale on the cyclor. The cyclor also cannot be replaced if there is a problem.*

### HHD

#### Home Hemodialysis

- Inform your doctor and home dialysis nurse of travel plans.
- Coordinate with the dialysis unit so that supplies will be delivered to the destination.
- Pack additional supplies: tape, gauze, and heparin.
- Obtain information of the nearest dialysis center and hospital at your destination in the event of an emergency.
- If you are staying at a hotel, alert them about the delivery of supplies and additional trash that will need to be disposed. Also, alert them that you will need to dispose of needles.

*Note for all home patients (HHD and PD) with portable dialysis machines: If you are flying, notify your airline that you have a medical device so they can be sure to handle and store it appropriately. Carry with you a letter from your doctor stating your needs (machine, medications, supplies) and your condition while traveling.*

For more traveling tips visit:  
[kidney.org/kidneyliving](http://kidney.org/kidneyliving).

# LOVE TO dine out?

So do we! Here's some tips for avoiding salt when you eat out.

By Katy Wilkens, MS, RD



Here's a little tool to help you make better choices at restaurants, particularly to help you limit salt. About 90 percent of the salt we eat is added to our food before we eat it. A big chunk of that salt comes from restaurant meals. So how can you enjoy eating out without feeling guilty?

Try using a dining card. Many people with food allergies or gluten issues already use dinning cards as a way to help waiters and cooks know what they can't tolerate. Now you can try these great ideas to lower your sodium intake.

The dining card on the next page lists all the foods you need to avoid, but more importantly, it also lists all the great foods that you **can** have when you are living a low-sodium life. Let your waiter know you are on a special diet and cannot have foods with salt or salty ingredients in them. Use the card to help them help you decide what to order. You can even make extra copies of the card to share with your waiter to pass to the cook, so your meals can be custom-made low salt!

Checking the menu ahead of time is a great idea too. Many restaurants have their menus online now, and some post the nutrition content. I especially love restaurants where you can alter your meal online and see the immediate reduction in calories, sodium or fat right before your eyes!

If you'd like to print and laminate a copy of these cards for yourself, visit us online at **[kidney.org/kidneyliving](http://kidney.org/kidneyliving)**.







## MEXICAN

### SAY NO TO

Salt  
Flour tortillas  
Tortilla soup  
American cheese (pump or canned)  
Canned beans  
Refried beans  
Marinated fajita meat  
Guacamole  
Salsa with added salt  
Salt on the margarita glass  
Spanish rice

### SAY YES TO

Fresh lime, lemon, chilies, pepper  
Cilantro, oregano, onion, garlic  
Tortilla chips without salt  
Corn tortillas  
Sour cream  
Lettuce, cucumber, Plain rice

**NO**

**YES**



## ITALIAN

### SAY NO TO

Salt  
Soups  
Broth or bouillon  
Antipasto plates  
Olives  
Sauces from jars or cans  
Prosciutto, salami  
Feta cheese

### SAY YES TO

Salads with dressing on the side  
Oil and vinegar, with no added salt  
Bread sticks, bread with dipping oil or butter  
Balsamic vinegar  
Fresh parsley, basil, oregano, lemon, lime, onions, garlic  
Small amounts of fresh vegetables  
Small amounts of tomato sauce or pesto without added salt  
Fresh mozzarella  
Small amounts of parmesan, provolone  
Fresh beef, chicken, pork, fish or eggs  
Pasta tossed with butter or olive oil and garlic



## ASIAN

### SAY NO TO

Salt  
MSG  
Soy sauce  
Fish sauce  
Hoisin sauce  
Black bean sauce  
Oyster sauce  
Canned broth  
Marinated meats  
Dried salted fish or shrimp  
Seasoned rice vinegar

### SAY YES TO

Ginger  
Sesame oil, chile oil  
Oil, vinegar  
Garlic, onions, chile peppers  
Rice, rice noodles, cooked dry noodles  
Barbeque pork  
Unseasoned rice vinegar  
Fresh vegetables & herbs  
Sweet & sour sauce  
Pineapple  
Green pepper  
Corn  
Fresh beef, chicken, pork, fish, shellfish or eggs

# The Recipes

## Eggplant Curry

Makes 4 servings (½ cup each)

### INGREDIENTS

- 2 young green onions  
(tops only)
- ½ tbsp. fish sauce
- 2 tbsp. curry powder
- 1 cup non-dairy creamer
- 2 cups eggplant, cubed
- ¼ cup lemongrass, chopped
- 2 cloves garlic
- 1 tbsp. canola oil
- 1 onion, chopped

### DIRECTIONS

1. Saute garlic, onion, lemongrass, and eggplant in large pan with oil.
2. When onion is translucent, add non-dairy creamer, curry powder and fish sauce.
3. Cover and cook until eggplant is tender.
4. Add green onions just before removing from heat.

### ANALYSIS

Calories: 174  
Total Fat: 4 g  
Sodium: 201 mg  
Carbohydrates: 29 g  
Protein: 1 g  
Potassium: 161 mg  
Phosphorus: 25 mg



## Cornflake-Crusted Chicken

Makes 12 servings (3 ounces each)

### INGREDIENTS

- 4 cups cornflakes
- 1 large egg
- 1 cup rice milk
- 1 tbsp. minced garlic
- ½ tsp. pepper
- 3 lbs. chicken breast, boneless
- 1-2 tbsp. olive oil
- 1 lemon (optional)

### DIRECTIONS

1. Preheat oven to 400°.
2. *Cut chicken breasts:* Place each chicken breast on a cutting board with the tip end of the chicken breast facing you. Place hand on top of the chicken breast. Starting at the thickest side of the chicken breast, carefully cut the breast horizontally in half to make 2 thinner pieces.
3. Transfer chicken to a large mixing bowl and run under cold water.
4. Season chicken with garlic and pepper.

5. Add egg and rice milk to a separate small bowl.
6. Crush cornflakes well in a food processor and transfer to a large bowl.
7. Dip each chicken breast first into egg and rice milk, and then roll in the cornflakes to coat.
8. Drizzle olive oil in a 9 x 9 cooking pan. Place chicken and cook in the oven for 30 minutes, or until done.
9. For a citrusy flavor, squeeze some fresh lemon juice on top.

### ANALYSIS

Calories: 204  
Carbohydrates: 11 g  
Total Fat: 6 g  
Protein: 24 g  
Sodium: 202 mg  
Potassium: 464 mg  
Phosphorus: 260 mg

## Fish Tacos with Lime Sauce

Makes 4 servings (2 tacos each)

### INGREDIENTS

- 1 lb. tilapia
- 2 limes
- ½ cup mayonnaise
- 1 tsp. chili powder
- ⅓ cup all-purpose flour
- 2 tbsp. vegetable oil
- 8 6" flour tortillas
- 1 cup shredded cabbage
- ½ cup shredded carrot
- 1 fresh jalapeno, thinly sliced

### DIRECTIONS

1. Rinse tilapia fish, pat dry with paper towels. Cut fish into 1-inch pieces.
2. For lime sauce, juice two limes over a small bowl. Stir in mayonnaise and chili powder.
3. Transfer ⅓ cup of the mayonnaise mixture to a medium bowl. Add fish; toss gently to coat. Discard the mayonnaise that raw fish was dipped in.
4. In a shallow dish, dip coated fish into flour.
5. Cook fish over medium heat in vegetable oil, in a large skillet. Cook for 2 to 4 minutes until browned.
6. Fill tortillas with fish, cabbage, carrots, and jalapeno. Drizzle with remaining lime mayonnaise.

### ANALYSIS

Calories: 298  
Total Fat: 9 g  
Sodium: 380 mg  
Carbohydrates: 26 g  
Protein: 27 g  
Potassium: 440 mg  
Phosphorus: 260 mg

## Mixed Berry-Chipotle Glazed Baby Back Ribs

Makes 4 servings (3 ribs each)

### INGREDIENTS

- 1 rack baby back pork ribs
- 1 tbsp. chipotle chili powder
- ¾ cup light brown sugar, packed
- 1½ tsp. garlic powder
- 3 cup mixed berries (raspberries, strawberries, blackberries, and/or blueberries)
- ½ cup ketchup
- 3 tbsp. cider vinegar
- 2 tbsp. chopped chipotle chilies in adobo
- 1 tbsp. olive oil
- 1 medium onion, chopped

### DIRECTIONS

1. In bowl, mix chipotle powder, ½ cup brown sugar, and 1 teaspoon of the garlic powder. Rub all over ribs. Tightly wrap in aluminum foil; refrigerate at least 2 hours or overnight.
2. Preheat oven to 350° F. Bake ribs for 1.5 hours or until tender.
3. Carefully unwrap. Take out ¼ cup juices, discarding the remaining.

4. In a food processor, pulse berries, ketchup, vinegar, chilies, remaining ¼ cup brown sugar, remaining ½ teaspoon garlic powder, and meat juices until smooth. Press through fine-mesh sieve into medium bowl; discard seeds.
5. In small saucepan, heat olive oil on medium-high. Add onion and cook 5 minutes or until soft, stirring occasionally. Add berry mixture, bring to a boil, then reduce heat and simmer 20–30 minutes. Sauce should reduce by about one-third (to about 2 cups).
6. Grill ribs 8 to 10 minutes over medium heat, basting with remaining glaze and turning over occasionally. Transfer to platter; garnish with berries. Serve with reserved glaze.

### ANALYSIS

Calories: 385  
Total Fat: 21 g  
Sodium: 379 mg  
Carbohydrates: 30 g  
Protein: 18 g  
Potassium: 440 mg  
Phosphorus: 40 mg





# What's the big deal about

# IRON

Iron is an important nutrient that helps your body make red blood cells. Red blood cells carry oxygen from your lungs to all parts of your body. Without enough iron, your body cannot make enough red blood cells. This condition is called anemia. Making sure you have enough iron helps to correct anemia. You may also need to take a special medicine called an erythropoiesis-stimulating agent (ESA).

## HOW MUCH IRON DO I NEED?

You need enough iron to keep a healthy hemoglobin level. Hemoglobin is part of your red blood cells. It's the part that carries oxygen through your body. Hemoglobin is made up of oxygen and iron. So, one way to know if your body has enough iron is to measure how much hemoglobin is in your blood. Your dialysis team checks your hemoglobin regularly—ask to see a copy of your most recent labs! When your iron is low, you may feel tired or weak, look pale, feel dizzy or light-headed, or be short of breath. You could even have chest pain or a faster heartbeat.

## DO I NEED EXTRA IRON?

Most people on dialysis need extra iron. Here's why:

- Blood loss during your dialysis. At the end of each hemodialysis treatment a small amount of blood is left behind in the dialyzer (artificial kidney). This can be a source of iron loss over time.
- Lack of iron-rich foods in your diet. Foods that are rich in iron like red meats and beans may be limited in your dialysis diet. A dietitian can help you choose foods that are good sources of iron, vitamins and other minerals.

## WHAT IS THE TREATMENT FOR LOW IRON?

You may be able to:

- Take extra iron by mouth in the form of a pill or liquid.
- Have iron added to your dialysate during your hemodialysis treatment (called "dialysate iron"). This is a new treatment that helps replace the iron that you would otherwise lose during your hemodialysis treatment.
- Have iron injected into your dialysis line during your hemodialysis treatment or injected into a vein during your clinic visit (called "intravenous iron" or "IV iron"). This may be an option if you have a severe drop in iron that cannot be replaced by other methods.

*Talk to your healthcare team about the importance of iron in treating your anemia. Ask about the pros and cons of the treatments listed above. Remember, you have choices when it comes to your treatment options.*



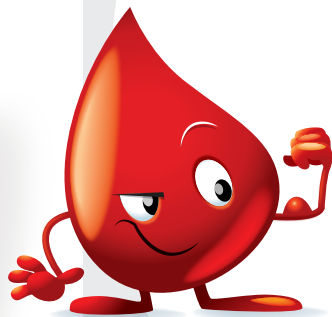
# Receiving Adequate Iron is Essential for My Good Health



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## IMPORTANT SAFETY INFORMATION Warnings and Precautions

Serious hypersensitivity reactions, including anaphylactic-type reactions, some of which have been life-threatening and fatal, have been reported in patients receiving parenteral iron products. Patients may present with shock, clinically significant hypotension, loss of consciousness, and/or collapse. Monitor patients for signs and symptoms of hypersensitivity during and after hemodialysis until clinically stable. Personnel and therapies should be immediately available for the treatment of serious hypersensitivity reactions. Hypersensitivity reactions have been reported in 1 (0.3%) of 292 patients receiving Triferic® in two randomized clinical trials.

Iron status should be determined on pre-dialysis blood samples. Post dialysis serum iron parameters may overestimate serum iron and transferrin saturation.

## Adverse Reactions

The most common adverse reactions ( $\geq 3\%$  and at least 1% greater than placebo) in controlled clinical studies include: procedural hypotension (21.6%), muscle spasms (9.6%), headache (9.2%), pain in extremity (6.8%), peripheral edema (6.8%), dyspnea (5.8%), back pain (4.5%), pyrexia (4.5%), urinary tract infection (4.5%), asthenia (4.1%), fatigue (3.8%), arteriovenous (AV) fistula thrombosis (3.4%), and AV fistula site hemorrhage (3.4%).



[www.triferic.com](http://www.triferic.com)

# Why I Work On Dialysis?

*Fellow dialysis patients sharing why they choose to continue to work and why. Share your experience online at [kidney.org/kidneyliving](https://www.kidney.org/kidneyliving).*

I worked full time while on in-center hemodialysis. The clinic I go to has a first shift that starts at 430am, which worked best for my schedule. At first, I really struggled with the work/dialysis life balance. I used to power through – trying to work through the fatigue. I didn't want anyone to see how weak I was. But, I started to open up about my disease and let my co-workers know what I was going through and it got better. I enjoy my work more, but I realize that it's just work. If I need a day off because I feel bad after dialysis, then I just take a sick day. *Christabel A.*



It's important to me to be able to work—I enjoy working as much as my body will allow. Through the years, I have had several different jobs such as gas station attendant, security guard, cashier at a convenient store, and in fast food. But I would have to say **the job I enjoyed the most was driving a taxi**. I had the opportunity to meet different kinds of people and made so many new friends. *Christopher R.*

I am 86 years old and on hemodialysis. During the months of April thru November, I work for our County Appraisal Review Board. This is intense work and can be emotionally draining. I love the interaction with people. I heartily recommend that you do something, if you are physically able, either for pay or as a volunteer, that will involve you with the working public. *J. B.*

I was fortunate that my job could be done anywhere I had my laptop and the internet. I could work from the center while I was receiving treatment. This was okay, but things got better when I started doing my treatments at home. When doing short daily home treatments and working full time, my suggestion/tip is to save one day a week (either Saturday or Sunday) where you don't work and don't do a treatment. *Vicki I.*



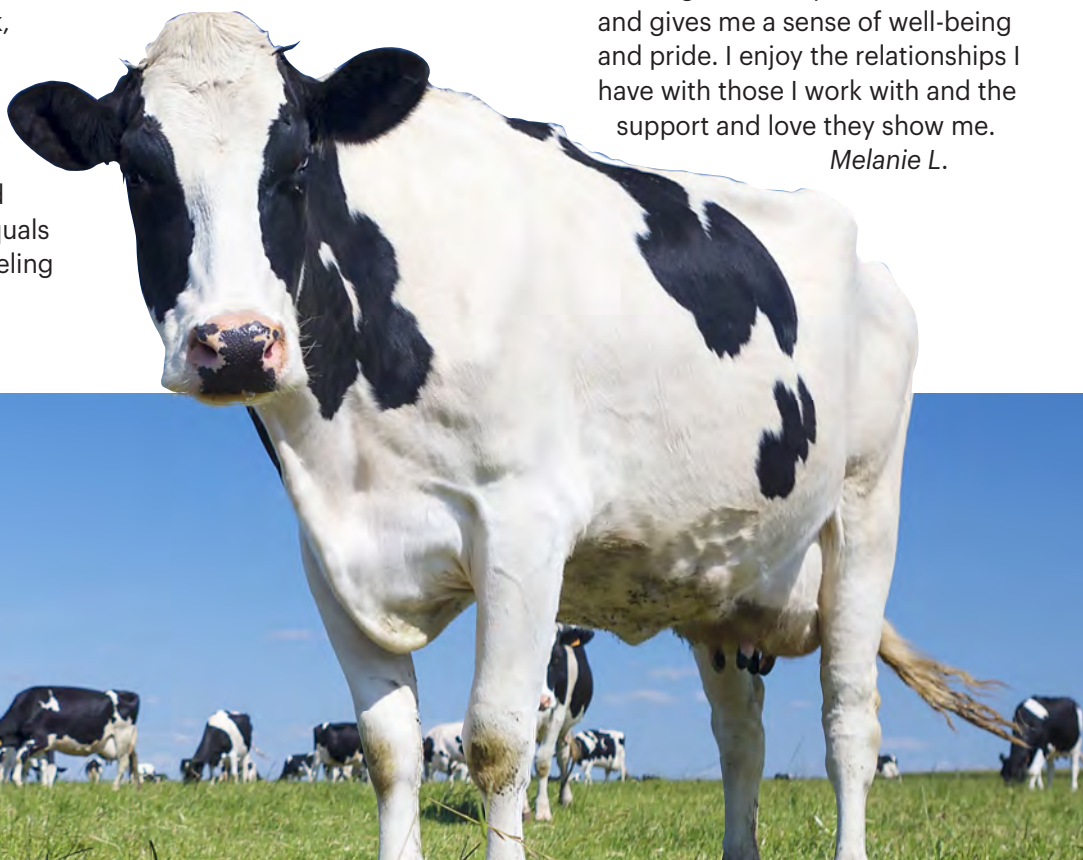
Unfortunately, I had to give up medical practice due to dialysis. I trained to become a medical coder, but, due to my commitment to dialysis, I have had a nearly impossible task in trying to find a position. *Mark B.*

The thing that helps me to continue working while on dialysis is how I feel getting up, going to work, and staying active instead of staying in the house. It helps me physically and mentally to interact with people at my job. I religiously watch my fluid intake, since too much fluid equals bad treatment days and not feeling like going to work. *Sidney M.*

I work full time as a self-employed massage therapist. What I do to be able to keep working is making sure my dialysis schedule is first thing in the morning, so my day is free after that. I also watch my diet and take my medications. I also exercise regularly and take short 20 minute naps when I need them. *Patty W.*

Working while on dialysis isn't always easy. You have to know your limitations and stick to them. Working does help with the depression and anxiety I've had since I started dialysis. It gets me out of the house and I get to feel normal for a while. *Lennette*

Working boosts my self-esteem and gives me a sense of well-being and pride. I enjoy the relationships I have with those I work with and the support and love they show me. *Melanie L.*



I am on home dialysis, work fulltime, and am pursuing a MBA in nonprofit management. I have found it's important to create relationships at work and be willing to let others know how I am feeling and what I need. I have found that many are willing to act with compassion and empathy but are unfamiliar with what I am going through. It is my responsibility to inform and ask for help. This is not always easy but I have found the rewards to be great. *Ray N.*

**I've been on peritoneal dialysis for 3½ years.  
At 82 years old, I am still farming.  
I have 125 beef cows and also  
raise alfalfa and grass hay.**

*Jake F.*



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