Pre-class questionnaire

Class #5 - Options

- 1) Dialysis is the ONLY option I have, if or when my kidneys fail.
- 2) Any serious illness that drops my blood pressure can cause my GFR to drop. If my GFR is already below 20, I could suddenly reach kidney failure if I get seriously ill.
- 3) If I might want to prolong my life beyond kidney failure with hemodialysis, it is better to prepare by having elective outpatient surgery to create a fistula when my kidney function is around 20 (by GFR and/or 24 hour urine creatinine clearance) because:
 - a. A serious illness could suddenly reduce kidney function to an unsafe level
 - b. Hemodialysis catheters often cause serious infections, hospitalizations and death
 - c. It can take up to 1 year for a fistula to mature before it can be used
 - d. A fistula created from a good artery and vein, allowed to mature fully before use, with careful needle placement, can last for a lifetime
- 4) Peritoneal dialysis (PD) can be done
 - a. Without needles
 - b. At home
 - c. With stricter limits on food and liquids than hemodialysis
 - d. During a power outage
 - e. But I will not be able to swim in the ocean
- 5) Kidney transplantation
 - a. Is available for ANYONE with CKD or on dialysis
 - b. Wait time for a cadaver kidney can exceed 5 years in Hawai'i
 - c. Once GFR is less than 20, I can accumulate time credit if on a transplant waitlist
 - d. As my 1st choice for kidney failure means I will not need dialysis
 - e. Is not an option for those older than 70
- 6) Living natural life to the fullest through the end of kidney function, with medical, nutritional and comfort support *without* dialysis or transplantation is:
 - a. An option that I have the right to choose
 - b. A process that usually involves kidney pain
 - c. A process that usually involves decreased appetite, mental status and coma
 - d. A decision that requires approval from my doctor, a judge or my family
 - e. An option that can be supported by my doctor, palliative and hospice programs