Class 5 - Options

- 1. Definition of uremia
- 2. Historical timeline for ESRD options
- 3. Dialysis, transplant, natural end of life options are choices You make with your MD
- 4. Dialysis HD, how it works
 - a. Access creation How, when, why, pro/con
 - i. AVF
 - ii. AVG
 - iii. Bloodstream catheter
 - b. Timeline if proactive progressive eGFR decline
 - i. 30 save veins, ask about AVF, vein mapping
 - ii. 20 confirm with 24 hr creat clearance, meet surgeon
 - iii. Handgrasp exercises after AVF surgery, work with surgeon
 - c. Low BP risk on HD how to mitigate
 - d. HD pro/con
 - e. HD in center pro/con
 - i. Help them help you work with team
 - ii. Understand orders give input/feedback to MD, RN, CPT
 - iii. Prevent crisis vs. manage crisis
 - f. HD home pro/con
 - g. HD and travel
- 5. Dialysis PD, how it works
 - a. Peritoneal membrane
 - b. PD dialysate
 - c. PD catheter
 - i. Placement, timeline, exit care
 - ii. Urgent care programs
 - iii. Surgical excellence
 - d. CAPD explanation of how done, pro/con
 - e. CCPD explanation of how done, pro/con
 - f. Supplies
 - g. PD and travel
- 6. Transplantation
 - a. What it takes,
 - b. Kidney transplant sources
 - i. Deceased donor vs. living
 - c. Transplant procedure overview
 - d. Financial/insurance questions
 - e. Medications after transplantation benefit/risk
 - f. Rejection
 - g. Restrictions
 - h. Outcomes, Prognosis, options if transplant kidney fails
- 7. Natural end of life option
 - a. How it can go overview
 - b. Right to choose based on goals for bodily life, preferences
 - c. Importance of labs, food, fitness, inner peace for longevity and QOL
 - d. Support via RD, MD, palliative programs if available
 - e. Hospice support if < 6 mos. Estimated by MD
- 8. No right/wrong Your choice understand then choose, shared decision with loved ones and healthcare team