

Vascular Action Chronicles

Interventional Nephrology by Nephrologists

Getting to know one of our Techs Tom Fort, RT(R)...

Tom is one of our Radiologic Technologists who assists the doctor during procedures. He is our resident "jokester" who helps keep the atmosphere light for all of our patients! Tom is an avid hunter with a long standing quest to find the elusive turkey! In addition to hunting, he enjoys biking, grilling, and singing tunes from the Eagles –especially *Hotel California!* Tom has worked with our doctors for the last seven years in both Tampa and Leesburg.



"I am a slow
walker, but I
never walk
back."

Abraham Lincoln

Let's Talk Options! #3 - Kidney Transplant

Kidney transplant is another great option for many people with end stage renal disease. It allows the patient the freedom to live closer to how they lived before dialysis. There are many criteria and considerations to become a candidate for transplant including, expected survival, time and compliance on dialysis, and co-morbidities. Obese patients are required to lower their BMI to 30 or less. Donated kidneys can be from a live or a deceased donor. The pre-qualification process can take approximately 12 months. Live donated kidneys can be from a family or friend, or from an exchange program, and are available as soon as the qualification process is complete. The wait time for a cadaver (deceased donor) kidney is roughly 3-5 years. Once you are qualified, you are placed on a waiting list. As soon as a donor kidney becomes available, the patient will be called by the transplant group and surgery will be performed within 24 hours. Usually the patient begins to feel better after the first 2 weeks. There will be a course of anti-rejection medications that you will take as long as the donated kidney is working. Donated kidneys usually work for an average of 10-12 years. Although most activities are acceptable, patients are asked to avoid contact sports or any activities that would likely result in injury to the new kidney.

However, kidney transplant is not a lifetime guarantee. Transplanted kidneys can fail for a variety of reasons. The best way to insure a longer lifespan for the transplanted kidney is continued follow-up with your nephrologist along with excellent medication compliance.



Joke of the day:

What do you call a rabbit with fleas?

Bugs Bunny!

Coming up...

As you know, Vascular Action practices "Interventional Nephrology by Nephrologists". In the next few months, a study will begin in which we hope will demonstrate how our doctors help dialysis patients through regular maintenance of their accesses. This study is important because Interventional Nephrology is a new, emerging sub-specialty of medicine. These procedures were formerly performed in hospitals by only surgeons and radiologists. Watch for updates in the upcoming newsletters!

Give us a Pulse

Your opinion matters. As a patient service organization, we believe that your opinion is most important. We are confident about the quality of services that we provide; however, we would like to give you the opportunity to provide feedback. To that end, we have created a patient satisfaction survey and would be delighted to receive your thoughts about our center and medical staff. The survey is accessible in the office and on our website at:

www.vascularactioncenter.com.

Please take the time to complete our three minute survey; this will allow us to improve our care.

Nurses Notes: Laughter in Medicine

Ever wonder why you just feel better when you are around certain people? Why some places you leave feeling better than when you arrived? Throughout history there are many evidences that point us to laughter as good medicine. Basic science shows us that when we laugh, our bodies release endorphins (aka "Happy Hormones"). This release causes us to experience a relief from stress hormones and a boost in our immunity. Laughter also helps reduce pain and calms our anxieties and anger. It has been known to strengthen our resilience, help to diffuse conflict, and strengthen relationships. It helps us to feel good and that feeling can affect us long after the laughter stops. So, help yourself to a good dose of laughter today and surround yourself with people that help serve up this kind of medicine!



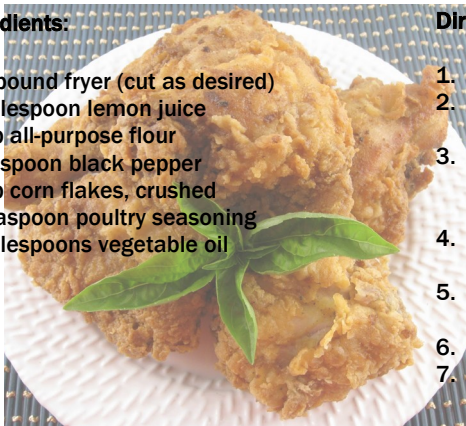
BAKED LEMON CHICKEN

Yield: 8 servings
Serving size: 1 peice

Recipe Corner

Ingredients:

- 2 ½ pound fryer (cut as desired)
- 1 tablespoon lemon juice
- 1 cup all-purpose flour
- 1 teaspoon black pepper
- 1 cup corn flakes, crushed
- ¼ teaspoon poultry seasoning
- 4 tablespoons vegetable oil



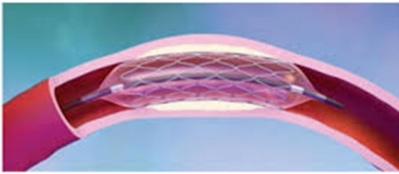
Directions:

1. Preheat oven to 400°F.
2. Wash chicken parts thoroughly and pat dry; rub with lemon juice.
3. In a small bag, combine flour, black pepper, corn flakes, and poultry seasoning. Shake well.
4. In a shallow baking pan (about 1" deep), grease with vegetable oil.
5. Place chicken in bag of ingredients, using the largest pieces first. Shake well.
6. Arrange coated chicken in pan.
7. Brown in oven 20-30 minutes on each side.

Nutritional content per serving :

- 280 calories
- 0 grams trans fat
- 74 milligrams sodium
- 15 grams protein
- 52 milligrams cholesterol
- 150 milligrams potassium
- 18 grams total fat
- 15 grams carbohydrate
- 120 milligrams phosphorus
- 3 grams saturated fat
- 1 gram fiber
- 12 milligrams calcium

BALLOON



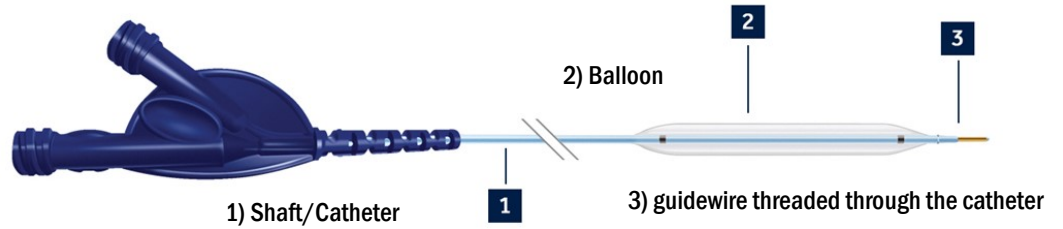
Stenosis : /stə 'nōsəs/

The abnormal narrowing of a passage in the body

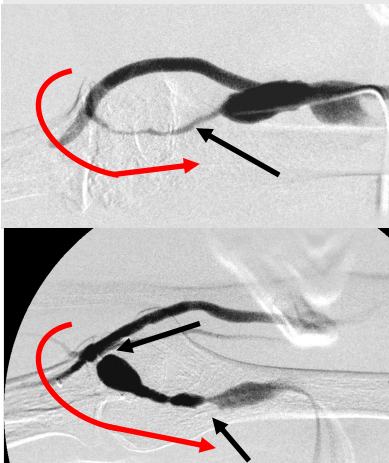
(specifically fistulas, grafts, veins or arteries for our purposes).

Tech Talk...

In the procedure room, your doctor will inject contrast through a long, thin tube called a catheter. This dye is easily seen on X-ray so that your doctor can visualize how your fistula or graft is co-operating with the attached artery and outflow veins. After a wire is passed through the access, a small balloon tipped catheter is then inserted and directed toward narrowed or blocked portions of your access circuit. When in the proper position, it is inflated to open a narrowed vessel and restore blood flow. The balloon is then deflated and can be easily removed in this minimally invasive procedure. The balloon itself is sized to match your anatomy. Based on location and lesion type, your doctor will choose either a flexible, slick balloon, for standard stenosis, or a kevlar lined balloon for more resistant stenosis. The kevlar balloons are also low profile, but they maintain structure and support under much higher pressures.



Inflow Stenosis (Narrowing at the beginning of the access.)

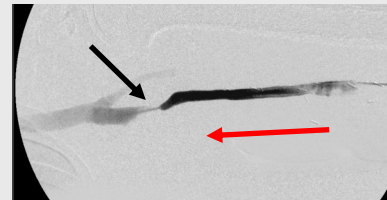
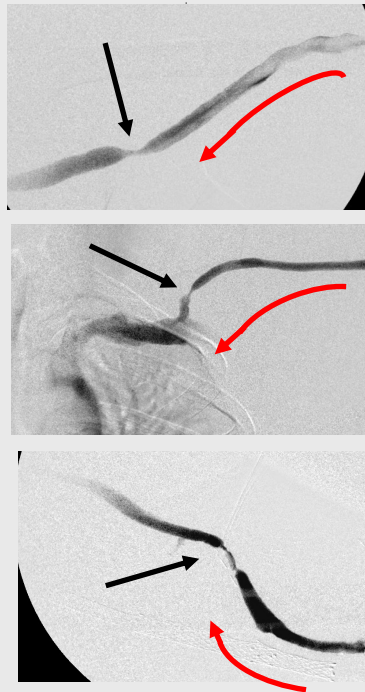


Key:

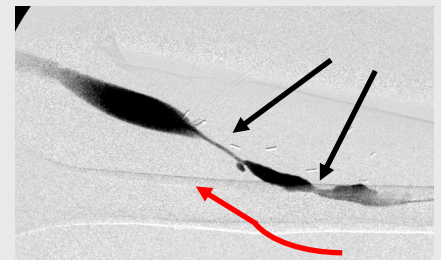
← = Direction of Flow

← = Stenosis

Outflow Stenosis (Narrowing at the back end of the access.)



Both Inflow/Outflow Stenoses (Narrowing in two locations along the circuit)



Inflow Stenosis

- Flabby, soft fistula
- Infiltrations
- High arterial pressures
- Decreased bruit/thrill
- Difficult cannulation

Outflow Stenosis

- Firm/swollen fistula
- Increased/prolonged bleeding
- High venous pressures
- Increases thrill
- Low KT/V due to recirculation

Both Inflow/Outflow Stenoses

- Combination of both sets of symptoms
- High risk for clotting

WORDSEARCH PUZZLE

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

STENOSIS
 TRANSPLANT
 COMPLIANCE
 CENTRAL VEINS
 PERIPHERAL VEINS
 RESEARCH
 ANGIOPLASTY
 IMMUNOSUPPRESSANT
 DONOR
 STUDY
 INFLATION
 LAUGHTER
 BALLOON
 SURVEY
 SPRINGTIME

El Transplante Renal es una opcion para el paciente con Enfermedad Renal Cronica en etapa terminal dependiente de Dialysis. Hay que cumplir algunos criterios basicos para ser candidato al transplante y prolongar las expertativas de vida.

El proceso de pre-cualificacion puede durar hasta 12 meses. El paciente debe conocer los beneficios, riesgos y limitaciones, ademas de someterse a un estudio cauteloso de cada sistema del cuerpo y conocer de sus expectativas de vida y cuidados antes, durante y despues del procedimiento. Ya en este punto el paciente es colocado en una lista de espera.

El transplante puede obtenerse de una persona viva o muerta he incluye un periodo de espera de 3-5 anos, es mas rapido si un familiar o amigo califica para donar, pues el transplante renal se realizaria tan pronto culminen los estudios al paciente, no necesitaria ponerse en lista de espera.

El equipo de transplante localiza al paciente mediante una llamada telefonica y este debe responder de inmediato o en un lapso de 24 horas. Despues de la cirugia, el paciente debe permanecer aislado, recibiendo medicamentos basicos para la aceptacion del nuevo rinon, unos dias en cuidados intensivos, sonda uretral por dos semanas y un estricto control de los liquidos ingeridos y eliminados, la mejoria el paciente comienza a notarlo despues de las dos primeras semanas.

Si todo evoluciona bien y el rinon colocado a nivel abdomino-pelvis es aceptado por el paciente, este debe funcionar bien por un period aproximado de 10-12 anos, por esta razon la fistula o el graft creado en el paciente para recibir dialysis antes del transplante debe ser mantenida y sequida periodicamente; y si por el contrario el rinon es rechazado o reyectado, el paciente no necesita que se le coloque un catheter central venoso temporal porque tiene su fistula o graft disponible para dializar.

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Information presented here is intended for the purpose of education and enrichment and is not intended to diagnose or treat any condition or substitute for medical advise.

Consult a qualified physician of your choice for diagnosis and/or treatment.