Texas ESRD Emergency Coalition

Dialysis & Disasters
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Presenters:

Anna Ramirez, BS, MPH, CPH: Outreach Coordinator ESRD Network of Texas, Inc

David Ramirez: Vice President of Operations, Dialyspa, TEEC Chair Person
Dialysis is a medical treatment for people who have kidney failure.

Dialysis patients come into a dialysis center three times a week to have the impurities cleaned out of the blood stream.

Large needles are placed in a special access in the patient’s arm. Blood is pumped out of their body, cleaned, and then pumped back in.
Dialysis Facilities

• Dialysis facilities are very dependent on electricity and water for their operations. They cannot operate without the required utilities.

• The nurses and technicians that perform the dialysis treatment have had specialized training.

There are over 500 dialysis facilities in Texas.
Patient Connection to the Dialysis Unit

• Patients receive life sustaining treatment
• Spend a minimum of 15 hours a week at the dialysis unit
• Have a close connection to staff and other patients
• Feel the unit is a home away from home
Home Dialysis Patients

- Home hemodialysis patients have treatment at their homes 3 to 6 times per week.
- Difficult to take a hemodialysis machine and supplies with them in an evacuation.
- Will have the same needs as a hemodialysis clinic patient.
Home Dialysis Patients

- Peritoneal dialysis patients perform treatment at home.
- Can be done away from home.
- Some patients will be able to take supplies with them and perform treatments away from home.
- Greatest need will be a continuing source of supplies.
Transplant Patients

• Require immunosuppressant medications.
• Must take the medications in order to keep their transplant.
• Disasters could put them at risk to not having their medications.

There are over 11,000 transplant patients in Texas.
• Patients will become critically ill and perish without treatment
• This is basic life support that becomes more important than anything else during a disaster
Patient Concerns if Treatment is Interrupted by a Disaster

- Heightened sense of fear and confusion
- May be physically weak, dizzy, disoriented
- May have just begun treatment at time of disaster and will be concerned about next treatment
Issues During Disasters

• Many dialysis facilities may be inoperable
• Patients can be scattered in the evacuation.
• Utilities and supplies can be scarce
• Local communication can be disrupted.
Needs of Patients

- Priority will be to find and receive treatment.
- Patients should have some disaster preparation.
- As a group, they will be weaker and sicker than the average person.
Patient Disaster Preparedness

• Patients are encouraged to evacuate early to ensure placement at an open dialysis facility.

• Patients should take emergency supplies with them.

• Start the emergency/disaster diet (sometimes called the three day diet) immediately.

• If patients must go to a shelter, to inform the person in charge of their special needs.
INFORMATION!

Greatest fear will be where and when will they receive treatment.

Will want to know who is in charge.

Will need to be reassured that their needs are understood.
Emergency Diet

• Special diet reduces protein and potassium.
• Sodium restriction is very important.
• Patient disaster manuals have detailed meal plans included.

Fluid restriction is a large part of the emergency diet. Many shelters push hydration however, this could be very harmful for a dialysis patient.

Canned, drained, salt-free:
- Tuna, Chicken, Salmon (no bones)
- Carrots, Green beans, Green peas

FRUITS
(2 servings a day)
- Canned, drained: Pears, Plums
- Peaches, Fruit Cocktail
- Pineapple, Applesauce

BREADS & STARCH
(2 - 4 servings a day)
- White Rice, Noodles, Macaroni
- White Breads & Rolls
- Cooked cereals
- Crackers, salt-free
- Graham crackers, Wafer cookies

DRINKS
(cut in half)
- Water, Koolaid, Cranberry juice
- Root Beer, Lemon/lime Soda

SWEETS (good for calories)
- Sugar, Gum drops, Hard Candies
- Jam, Jelly, Syrup, Honey
- Cranberry sauce, Marshmallows
- Skittles®, Starburst®, Lifesavers®

FAT (good for calories):
- Cooking oils, like Canola oil
More Diet Ideas (page 2):

- Eat only half (1/2) of the meat that you would usually eat.

- Drink only half (1/2) of what you would usually drink. Even limit foods high in water like cooked cereal/pastas, fruits, vegetables, gelatin, ice cream, sherbet, ice.

- Plan to have only salt-free foods!

- Avoid all high-potassium foods. Some of these are milk (all kinds), beans (all kinds), nuts (all kinds), bananas, potatoes (French fries, baked potatoes, yams), oranges & orange juice, prunes, spinach, avocado and substitute salt. Keep a list from your dialysis dietitian in your emergency box.

- If you have diabetes, plan for ways to treat low blood sugar.

No Electricity? Food in the refrigerator will stay fresh for a few days. Open the refrigerator as little as possible to keep foods cold.

Use foods from your refrigerator first!
The mission of TEEC is to ensure a coordinated preparedness, plan, response and recovery to emergency events affecting the Texas ESRD community.
Who Is TEEC?

• TEEC is a voluntary group of ESRD providers, professionals, patients and other state, regional and local agencies that have an interest in providing the best solutions for continuity of care for ESRD patients during an emergency or disaster situation.
Mobile Command Center

- TEEC has established a toll free number for ESRD patients that will be used during emergencies.
- The command center will be staffed by representatives from the Network, LDO’s, nurses, physicians, social workers and dietitians.
- Command center is the ESRD community's voice to state officials during a time of need.
• Educates facilities on how to prepare for emergencies
• Educates patients
• Serves as a resource for patients, facilities and external stakeholders
Identifying Patients

- The wristband project
  - Identified by all state and health agencies as dialysis patients.

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This **BAND** contains vital information about your health. If you will be evacuating from your home, put your BAND on. If you evacuate to another location, show your BAND. BAND is waterproof so you can shower with it on. If you lose your BAND request a new one from your Facility.

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Don't Leave Home Without It

**GET BANDED!!!**
Disaster plan for patients

Telling patients to go to the hospital Emergency Room IS NOT A DISASTER PLAN
Kidney Community Emergency Response (KCER) Coalition

• **Mission**: Collaboratively develop, disseminate, implement & maintain a coordinated preparedness & response framework for the kidney community in the event of any type of emergency or disaster.

• **Vision**: KCER is the leading authority on emergency preparedness & response for the kidney community by providing organization & guidance that seamlessly bridges emergency management stakeholders & the ESRD community nationwide.
KCER Tools & Resources

• www.kcercoalition.com
• Response Team Pages
  – Information & education
• Drills & education
• Helpful links
  – ESRD & disaster-related information
  – www.kidney.org/help
EMSystems

• Real-time data source
• Communication between health care providers
• Alerts
• Evacuation planning
  – Mapping
  – Resource availability
• https://emresource.emsystem.com/EMSSystem
Dialysis Facilities

- Federal and State Rules for facilities regarding Emergency Preparedness
- Facilities are required to have back up agreements with another facility and another hospital
- Required to have drills
- Required to contact their local EOCs annually
- Some facilities have generators
TEEC Website

www.texasteec.org
TEEC Toll Free Number

1-866-407-ESRD
TEEC is here to help!

- No matter what the emergency...
Questions?

Contact Information

Anna Ramirez – Outreach Coordinator – ESRD Network of Texas:  aramirez@nw14.esrd.net
469-916-3800

David Ramirez – Vice President of Operations, Dialyspa:  david.ramirez@dialyspa.com
713-218-6500

www.texasteec.org