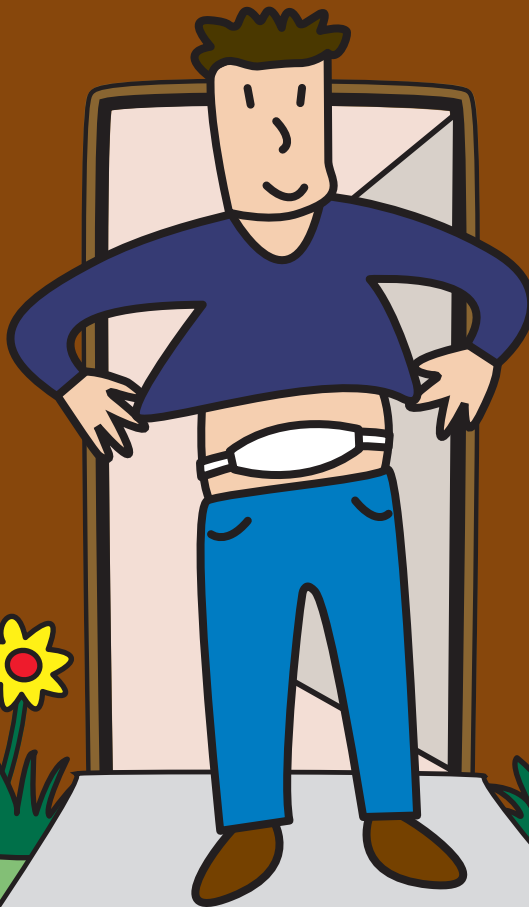


*Freedom & Comfort
for Home Dialysis People
since 1997*

2019



Stickman Dialysis

kidneystuff.com



Welcome

It's hard to believe from our humble beginnings producing our belts and warmers in my parent's farm basement back in 1997 that we now have our very own building here in Arundel, Maine dedicated exclusively to our products for home dialysis people.

Thanks to you, our customers, we are celebrating over 22 years in business. The first products came from my desire as a PD patient to take more control of my own health and life. This year we've added a few items for home hemodialysis (HHD) people as well. HHD is growing in popularity, getting people out of hospitals and living thier lives, and we're thrilled to be part of it.

We're going to continue offering the highest quality products at fair prices for home dialysis people. We take pride in sourcing our materials and components as locally as possible, and I am proud that we manufacture our products locally and that I get to oversee the whole process.

I wish you the best of health and I thank you once again for your support and hope that we can help make your life a little more comfortable with our products.

Mr. Jean Clermont, president & founder

Laura Prichard, marketing & sales

About our company

Jean Clermont was introduced to kidney disease at the ripe age of five when he had his left kidney removed. About 22 years later, at the start of an auto racing career, the other side was diagnosed with kidney disease resulting in 5 years of Peritoneal Dialysis. One of the challenges he faced while racing was warming solutions while travelling to various tracks across America and England. Though he usually wasn't the quickest driver, he was always guaranteed to be the fastest PD person on the track!

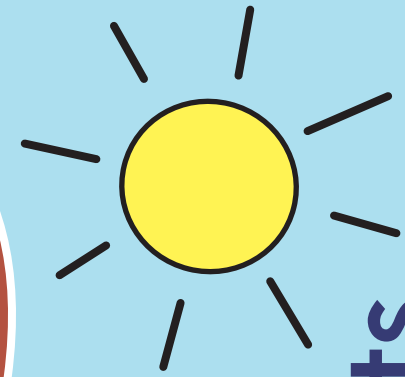
In 1997 Jean built his first portable solution warmer and soon after the inquiries from others, wanting the same freedom came pouring in. "What about a belt"? After several design ideas Jean came up with what is now the PD favorite....The Original Tuck-away belt and Stickman Dialysis was born.

The company name originating from Jean's high school nickname because of his slim, six foot three build.



Jean has since received two kidney transplants, and in 2016 was joined by his wife Laura to manage the sales and marketing aspects of the company while Jean focuses on manufacturing and design.





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- Shipping is by **US Postal Service** only, and will take less than 3 weeks, unless an item is out of stock.
- Customers outside the USA may be charged

taxes and/or duties at your local post office upon receipt. We apologize that we cannot anticipate such charges when you place order.

- Please call us first before making any returns.
- MAIL ORDERS
PO Box 415
Kennebunk, ME
04043 USA

- Order By Phone:
1-888-366-7460
+1-207-985-1717
Mon-Thur: 9am-4pm (ET)
Fri., Sat., Sun.: Closed
- Order Online Anytime at **kidneystuff.com**

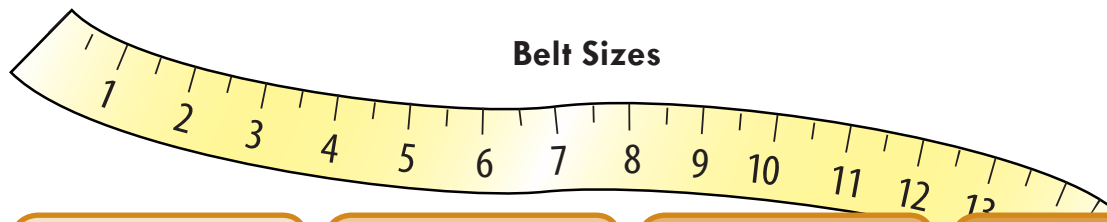
Tuck-Away Belt

The One and Only...



Kiss That Irritating Tape Goodbye!

For over two decades, thousands of people worldwide have chosen the Tuck-Away Belt because of its great design and comfortable fit. We've sewn thousands of these belts for patients throughout the world as a wonderful alternative to using adhesive tape to keep their catheter safe and secure. See how much easier and cleaner a tape-free belly can be!



Small
26"-32"
66cm - 80cm

Medium
32"-42"
80cm - 105cm

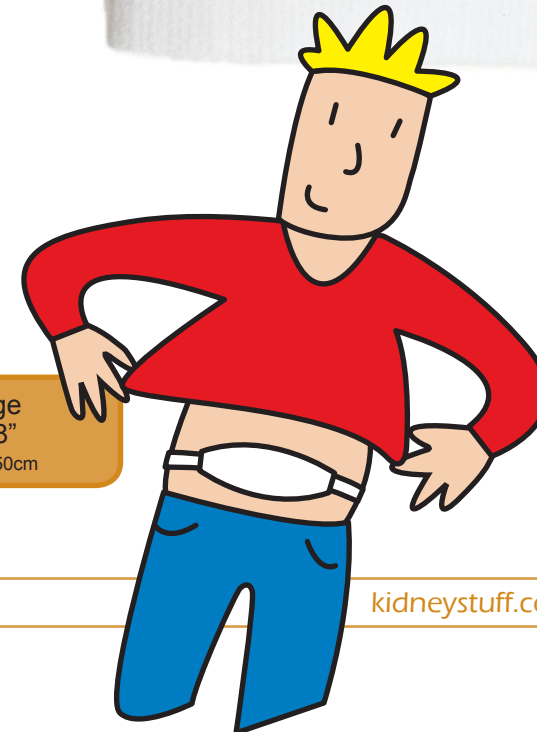
Large
40"-50"
100cm - 125cm

X-Large
48"-58"
120cm - 150cm

See page 5 for fitting instructions

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...Original Tuck-Away Belt 2



Belt shown actual size



Listing #100661

The Tuck-Away Belt is manufactured, marketed, and listed in accordance to US Food and Drug Administration regulations as required for this type of medical device.



1, 2 or 3 belts: **us\$25.00 each**
4 or more belts: **us\$21.00 each**

Tuck-Away Belt



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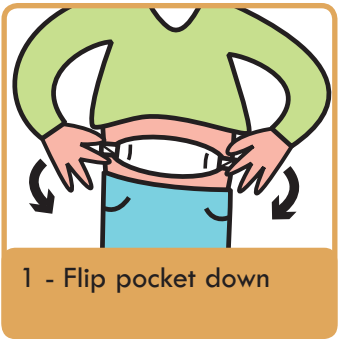


How To Use The Belt

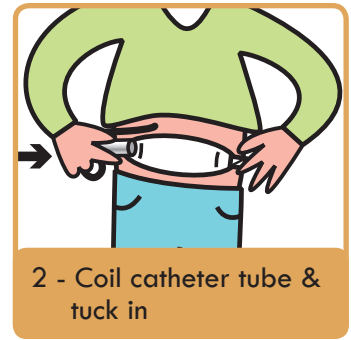
Daytime Use

Wearing the belt is simple: you put it on, tuck the catheter in, flip it up and forget about it. The belt is worn with the openings against your body, and the tension of the belt against your belly is what keeps the catheter in place. The belt can easily be adjusted during the day for comfort and to ensure that there is no pulling on the exit site.

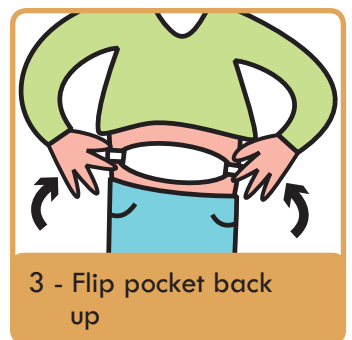
The Tuck-Away Belt may be worn with the D-ring on either side of your body, regardless of which side your exit site is located. For your own health and safety, continue the same exit site care, hygiene, maintenance and protection recommended by your health care professional.



1 - Flip pocket down



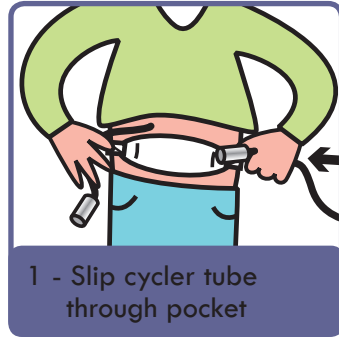
2 - Coil catheter tube & tuck in



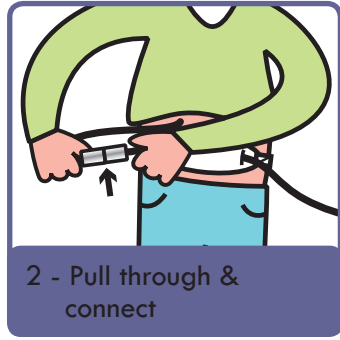
3 - Flip pocket back up

Cycler Use

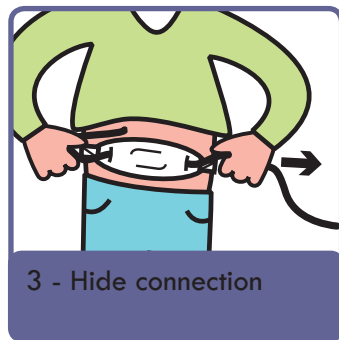
To use the belt during the night while on a cycler, you simply pass the cycler tubing right through the belt's pocket, do your connection, then pull the connection back into the pocket, and go to sleep. Again, you continue using the same exit site care and protection you learned during your PD training.



1 - Slip cycler tube through pocket



2 - Pull through & connect



3 - Hide connection



4 - Flip pocket back up & go to bed

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Three Colors to Choose From

4



Over
100,000
Sold
Worldwide!

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Tuck-Away Belt



More About Belts

Belt Fitting

To determine the correct size, measure your waist size, in inches, or simply go by the size of the pants you wear. Be sure to take the measurement while you are full of fluid if you keep yourself full all the time. If you are kept empty during the day, measure yourself as such and order the appropriate size for daytime use. Upon receiving your belts, try one on for size and if it does not fit, call us to exchange any unopened belts..

Washing

The Tuck-Away Belts are machine washable and can be put in the dryer. Just wash them with your underwear. They can be steam ironed if you like. It is recommended that the belts be washed daily and that the Velcro be fastened together during laundering to keep it from collecting lint and sticking to other garments.

Warning: Be sure to get approval and instruction from your doctor or nurse before doing any water activities while on peritoneal dialysis. There is always a risk of infection, especially when swimming and bathing in inappropriate waters. Speak with your nurse or doctor about your risks and how to avoid infections.



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Why would I need more than one belt?

The Tuck-Away Belt is just like underwear – except that the belt is worn right next to or even over your exit site, so it is extremely important to keep it clean. In fact a clean belt is even more important than clean underwear, so use a fresh, clean belt every day. Germs near your exit site can lead to infection – and that's bad news!

How do I wash the belts?

The belts are machine washable and can be machine dried or hung to dry.

How long does a belt last?

You can expect belts to last at least four months if you wash them every day. So if you buy three, you'll be ok for well over a year.

What if it doesn't fit?

For hygienic reasons, we can't accept returned, opened belts, so we ask that you measure carefully when ordering. When you do receive your order, just open one belt and wear it until you are sure it is right for you. Any unopened belts can be returned anytime for a refund or exchange.

Are the belts covered by private insurance?

Check with your insurance agent to see if the belts are covered. If you are covered, you will have to purchase the belts yourself and submit a claim for reimbursement. We cannot file claims for any insurance on your behalf.

Are the belts covered by Medicare?

No. But consider that three belts will last over a year – that's less than a dollar a week!



Other benefits:

- Can be worn for catheters on left or right sides
- May or may not be worn covering your exit site
- Use with or without dressings (ask your nurse!)
- The itchy part of the velcro does not touch the skin
- Can be used in the shower

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Tuck-Away Belt

PD Belts are underwear: please wash them daily!

100% Sewn In The USA
 Our factory makes every single part of these belts. The pouch is made of a woven fabric with a one way stretch, giving it a nice, comfortable fit that stays in place. The brushed finish of the fabric makes it so soft and non-irritating, you'll forget you're even wearing it!



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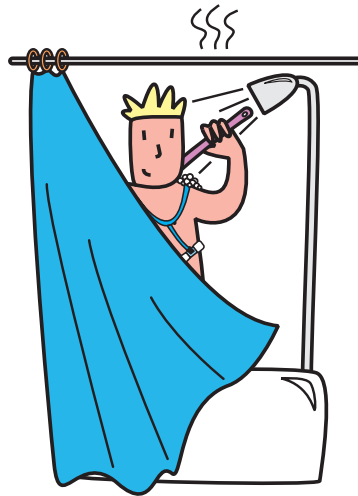
7

The PD-Showermate

A new way to shower!

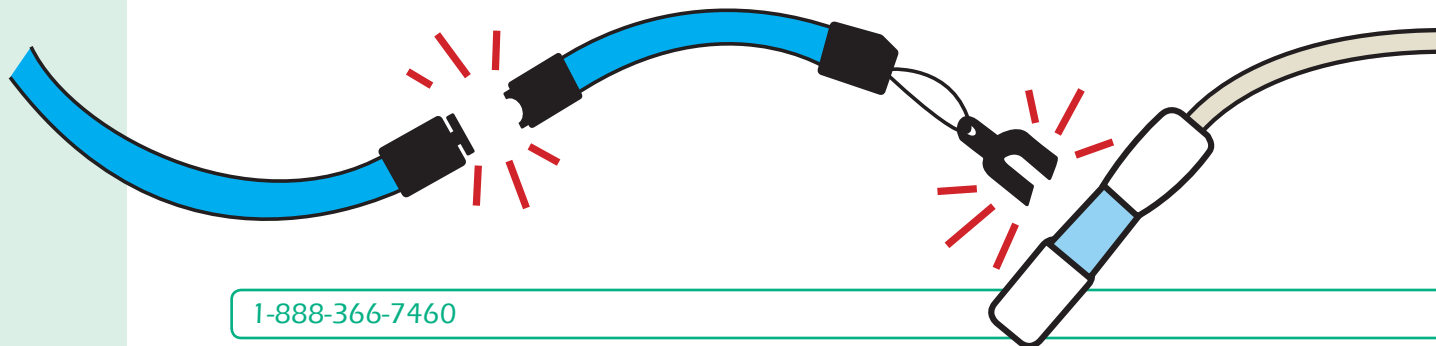
The PD-Showermate is a safe lanyard designed specifically to hold your PD catheter while showering.

So easy to use: just put it over your head, adjust the length so that it safely reaches your catheter, and simply clip it to your catheter connector!



Double Safety!

In a slippery shower, anything can happen, and the last thing you want is a painful and possibly dangerous tug on your catheter. That's why we've got two safety features: one release built into the lanyard which will pull apart if tugged, and the clip which goes onto your connector, which can easily slip free should it need to.



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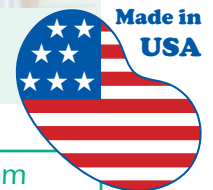


Features:

- Works with both Fresenius and Baxter style catheter sets.
- Two safety release mechanisms.
- Adjustable length.
- Replacement clips available (\$7/pair)



us\$18.00



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PD Essentials

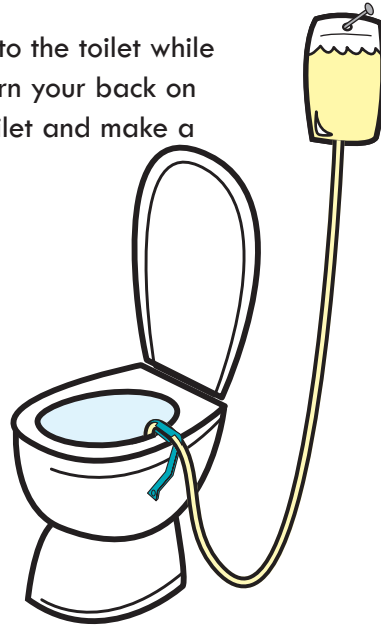


Drain-Away Clip

No More Floods!

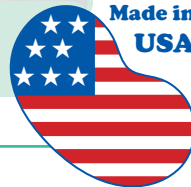
Funny how PD bags drain well into the toilet while you watch, but as soon as you turn your back on 'em, the tubes jump out of the toilet and make a big mess! Well, the Drain-Away Clip keeps 'em in line!

The Drain-Away Clip really comes into its own for those who have a "direct drain" setup for the cyclor. It clips to the edge of the toilet bowl, under the seat and holds the tubing in place so that it drains where it's supposed to every time!



us\$10.00

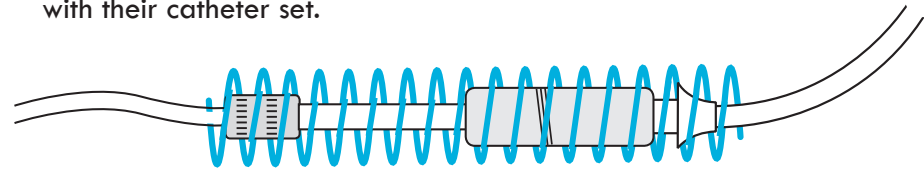
Made in USA



Beep-Away Spring

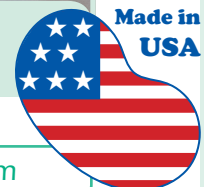
A better night's sleep!

By simply sliding over your transfer set and lines, the Beep-Away Spring helps reduce the potential for tubing kinks during nighttime cyclor PD, reducing the frequency of machine alarms during nighttime treatments and helping you and loved ones get a better night's sleep. It is soft and flexible and can also be used with pediatric and geriatric PD patients to help minimize tampering with their catheter set.



us\$14.00

Made in USA



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de in USA



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Tripod iv pole

Up, Up and Away!

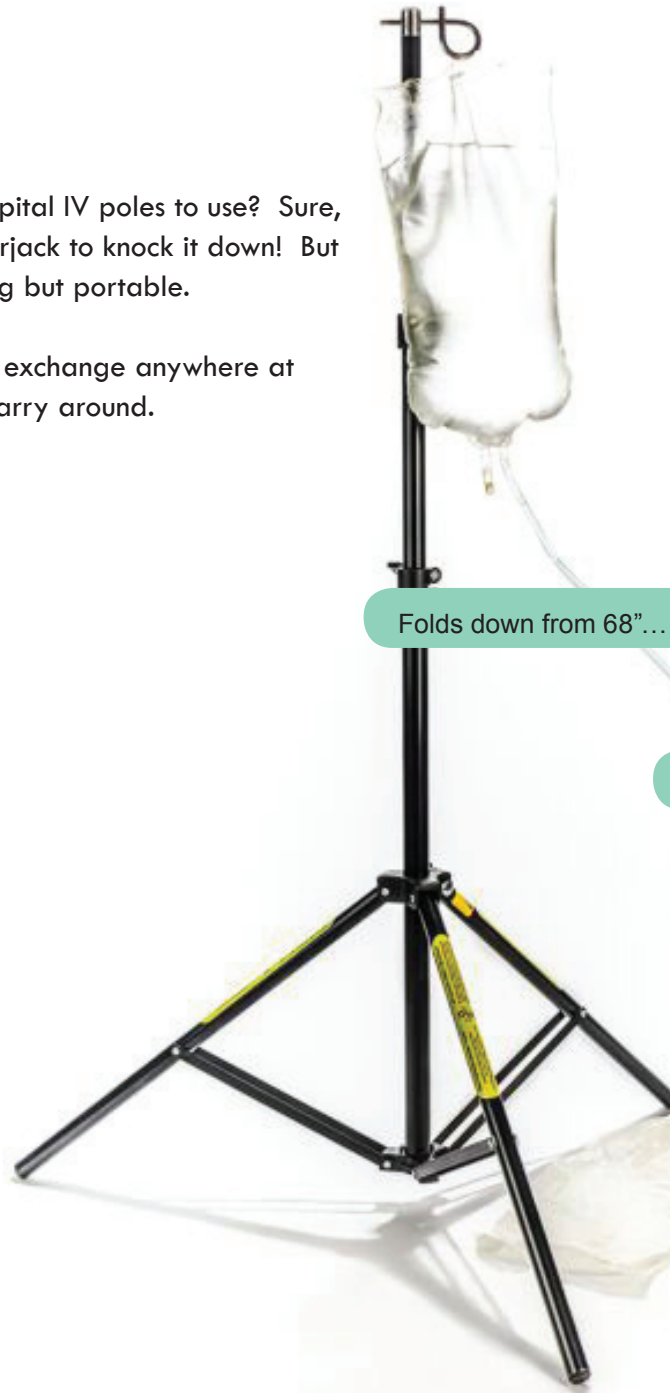
Have you been given one of those heavy hospital IV poles to use? Sure, it works great at home – you'd need a lumberjack to knock it down! But if you've got to hit the road, they are anything but portable.

Our Tripod sets up in seconds, lets you do an exchange anywhere at anytime, and is light weight and discreet to carry around.

Assembled in U.S.A.



us\$175.00



Folds down from 68"...

...to 28" – in seconds!



Features:

- Extends to 68" (1.72 m)
- Collapses to 28" (0.66 m)
- Weighs 2 lbs (0.9 kg)
- High visibility "anti-trip" markings
- Carrying case with shoulder strap

PD Essentials

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you will





Gentle, Healthy, Portable Warmth

10

Properly warmed solutions are simply healthier and more comfortable. All of our personal warmers are calibrated at the factory to the optimal temperature for dialysis solutions – no adjustments are required by you. They are self regulating, so you don't have to worry about overheating. Our Daytripper plugs into your vehicle's cigarette lighter, as well as any household outlet.

At Home

Our Daytrippers are the ideal solution for your home: You won't need to be waiting around the microwave or running back and forth to the kitchen. No more heating pad guesswork. With a dedicated warmer next to your exchange area, a nice warm bag of solution is always within reach.

On The Road

One of the great advantages of PD is the ease with which you can travel. With a little planning, you can easily get up and go in no time – for a few hours, days, or months. No hospital visits to plan – you're in control of your own health and your own schedule. So take advantage of the freedom and independence that PD gives you: pack your bags and discover the wonders of the world.

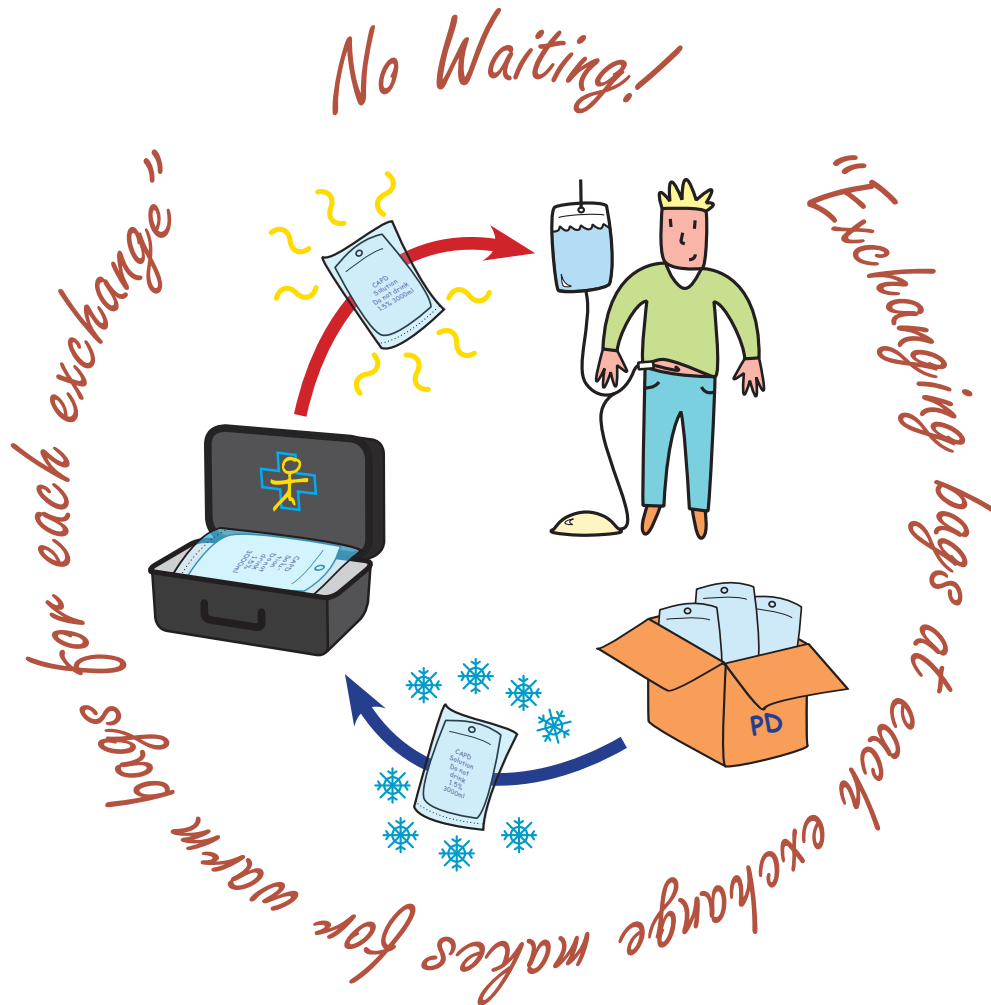
Emergencies

In the case of power failures and other emergencies where a cyclor might not work, our efficient Daytrippers can be plugged into a car's cigarette lighter for a continuous supply of warm bags until the situation blows over.

In Hospitals

Always have a variety of PD solutions warm and waiting for training or inpatient use. We now carry a full line of hospital warmers for any sized unit, giving you up to 20 Solution bags standing by, warm and ready for your patients.

Solution Warmers



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Daytripper "E"

CAPD Warmer

An economical choice!

The Daytripper E is a single-bag CAPD solution warmer designed for personal use at home, at work, or on the road.

It uses the exact same proven reliable temperature control systems as our original Daytripper, in a lightweight case at a lower price.



1-888-366-7460

Features:

- External power cord access
- 110V AC power adapter (220V optional)
- Energy efficient - uses less than 20 watts of electricity
- UL Certified for US and Canada
- Temperature indicator
- Green LED power indicator
- Easy to clean plastic case
- Holds one solution bag up to 3L
- Six month warranty



US\$295.00

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Features:

- External power cord access
- 110V AC power adapter (220V optional)
- Energy efficient - uses less than 20W of electricity
- UL Certified for US and Canada
- Cigarette lighter plug
- Temperature indicator
- Green LED power indicator
- High impact, easy to clean durable plastic case
- Large mesh storage pocket
- Holds one solution bag up to 3L



us\$450.00

Proven Durability

The Daytripper is a single-bag warmer designed for personal use at home, at work, or while travelling, and is often used by hospitals and clinics as part of their loaner programs.



The plastic case and aluminium heating plate are easy to clean and will withstand years of use. It has a factory pre-set, tamper-proof thermostat which will keep solutions at the perfect temperature indefinitely, never allowing them to overheat. The intuitive design requires almost no training or instruction – just plug it in!



Daytripper
CAPD Warmer

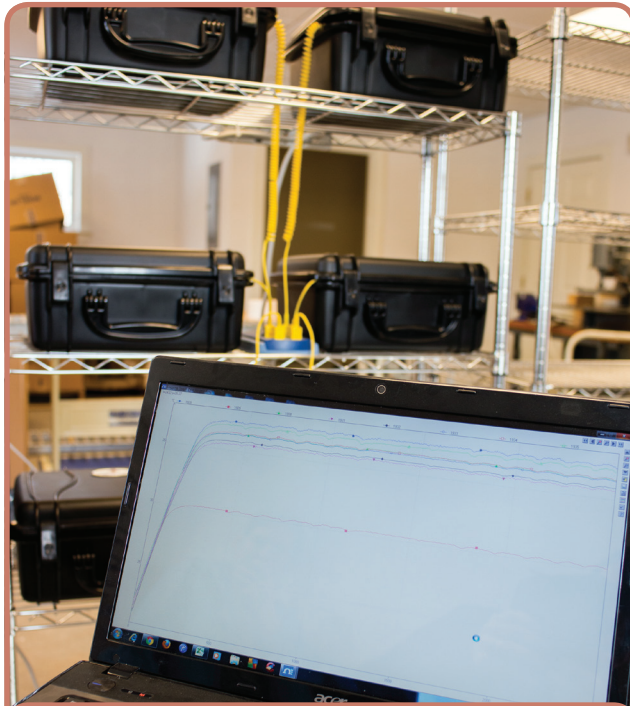
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Solution Warmers

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More About the Daytrippers



Accuracy

Each warmer is tested with a 2500mL solution bag for a minimum of eight hours after we build it. A temperature of between 37°C and 40°C (98°F and 104°F) must be reached and maintained during this time to pass our inspection. We make no guarantees of accuracy beyond this range as specified by the FDA. The temperature indicating strip is only a reflection of the warmer's progress and should not be relied upon for accurate solution temperature.

Warranty

When purchased for individual use, we will repair any part of your Daytripper should it fail at any time while owned by the original purchaser (Daytripper E for 6 months). This warranty does not cover breakage due to abuse such as dropping, throwing, burning, neglect, tearing (fabric) of any kind, chewing, kicking or other actions beyond normal travel and home use. The wall-plug adaptor is not covered by this warranty. Daytrippers (Original) sold to hospitals or institutions are covered by the same warranty for two (2) years from purchase date only. Please call us before making any warranty claim. We will not be held responsible for warmers sent to us without prior warning. Call our toll-free number to arrange for repairs.

Returns

We cannot offer returns for warmers. However, should you no longer require a warmer for your own use, we encourage you to contact your local clinic or kidney foundation to find it a new home.



Approvals & Certifications



Health Canada Santé Canada

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Frequently Asked Questions

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How long does it take to warm solutions up?

Our warmers are designed to warm solutions gently and accurately. They are not meant to warm instantly. Depending on the size of bag you are warming and ambient temperature, it will take two to three hours. This may seem slow, but if you remember to place a fresh bag into the warmer after each exchange, it'll be ready in plenty of time for your next one .

Why should I warm up my solutions?

For many, cold solutions cause discomfort such as cramping and chills. Others claim that they can tolerate cold solutions, but filling up on the cold stuff is not recommended. When cold solution enters the peritoneum, vessels carrying blood to the membrane constrict. This reduces blood flow, slowing waste removal and dialysis which, of course, defeats the purpose of doing the exchange. Regardless of how you do it, we urge you to warm your solution so you get the most out of PD.

How do I know if a bag is warm enough?

Most clinics teach patients to rely on their sense of touch to feel if it is right – much like testing a baby's milk bottle. The bag should feel slightly warm to your forearm or palm, but not hot. It is recommended that the temperature be between 36°C and 38°C or 96°F to 99°F. The solution will lose a degree or two while it hangs during the drain step of your exchange, so a slightly warmer bag is OK. All of our warmers have a temperature indicating strip which will give you an estimated solution temperature. The best indicator of all is your personal

comfort, and with time, you will learn to know what a properly warmed bag should feel like before and during your exchange.

Do I leave the outer wrapping on the bag during warm-up?

Always! The manufacturers of the solutions go to great lengths to ensure that everything inside the wrapping is sterile. They are meant to stay sterile until the minute you do your exchange.

Can the solution overheat?

No, not in our warmers. Factory set thermostats control the heaters to keep them at optimum temperatures. Should these thermostats fail, a secondary backup thermostat will kick-in for extra protection.

Can I take these warmers on a plane?

Yes, our Daytrippers qualify as carry on luggage, but just in case, it is recommended that you call the airline first and always have a letter from your doctor stating that this is vital medical equipment. Remember that most commercial planes are not equipped with power outlets.

Can I use the warmer overseas?

Yes, our Daytrippers come with a plug-in power supply that works on any 110 or 220 Volt power source worldwide. Please specify if you need a plug style other than the North American standard.

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ivNow Pods for PD Solutions

Hospital Warmers

The Logical Solution for your Clinic!

Stop wasting patient and nurses' time when it comes to safe solution warming protocols... add the ivNow solution warmer to your clinic's wishlist.

These affordable modular warming pods are quickly becoming the "Must-Have" item for clinics and hospitals. Simple to use, accurate, and safe: this is the proper way to set your PD training center up.



Features

- Available in 1, 2, or 3 bag capacity
- Perfect for clinics and training centers
- Convenient countertop installation
- Available pole or wall-mount options
- One year limited manufacturer's warranty
- Each pod accommodates 0.5L, 1L, 2L & 3L bags
- Lightweight, medical grade plastic housing
- Intelligent bag sensor knows when bag is present
- Heats to 40°C (104°F) in 30 minutes or less
- Accuracy of +0°/-2°C (+0°/-3°F)

US\$1300.00 • US\$2300.00 • US\$3300.00



Each fluid warming cavity is separately controlled and features an L.E.D. display. A sensor in the heating plate detects the I.V. bag and engages the heater to quickly warm the fluid. Temperature sensors continuously monitor the temperature of the fluid bag to maintain the fluid temperature within +0/-2°C (+0/-3°F) of the set point temperature. The electronic control monitors how long the bag has been held at temperature, and can be displayed at the touch of a button. The control alerts users when a fluid bag has been held at temperature longer than 14 days.



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The Perfect Solution for your Clinic!

16



Solution Warmers

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The new Designer Series allows you to put aesthetically pleasing warming units right where they are needed, allowing nurses and aides to maximize their time. The lighting inside the warmers softens your workplace, placing more emphasis on patient comfort and care.

Safety is a priority with Entermics Designer Series fluid warmers, ensuring each bag is safely warmed to recommended temperatures through the WarmSafe™ zone heating system. WarmRight® technology provides the right temperature for the right product to meet healthcare guidelines for PD solutions.



DC400L

- 8 to 14 Bag Capacity
- 2 Drawers
- Interior lighting



DC250L

- 4 to 8 Bag Capacity
- 2 Drawers
- Interior lighting



Cabinet Style Hospital Warmers

Set Your Clinic Up Right!

These are not heating pads, blanket warmers, or microwaves: these warmers are specifically designed and built for warming medical solutions in the smallest clinic or the largest hospital. Heated air circulates around the bags, warming them accurately, quickly and consistently. Full American-made construction is easily cleaned and ensures years of reliable service.

Features:

- Completely self-regulating with temperature set-point lock – avoid overheating from tampered controls
- Epoxy-coated wire basket drawers.
- Epoxy-coated exterior & interior surfaces
- Observation window lets you keep an eye on inventory
- Stackable – expand your capacity as your patient load grows
- The hands-free, push button door is designed to make loading easier when carrying an armful of bags.
- One year limited manufacturer's warranty
- Casters or cart options available

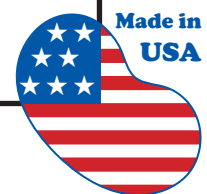
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Warmer Comparison

	Personal warmers		Hospital warmers				
	Daytripper	Daytripper E	ivNow1	ivNow2	ivNow3	DC250L	DC400L
Page							
Ideal Use	Home/Hospital/ Travel	Home/Travel	Hospital/Clinic	Hospital/Clinic	Hospital/Clinic	Hospital/Clinic	Hospital/Clinic
Bag Capacity	1	1	1	2	3	4-8	8-14
Dimensions (W" x H" x D")	15 x 7 x 13	14 x 8 x 10	13 x 8 x 7	13 x 8 x 14	13 x 8 x 22	22 x 19 x 23	22 x 24 x 26
Dry Weight	8 lb / 4 kg	4 lb / 2 kg	8 lbs / 4 kg	14 lbs / 6 kg	20 lbs / 9 kg	85 lb / 39 kg	100 lbs / 45 kg
Amperage Draw	1.6 A	1.6 A	1.3 A	2.5 A	3.8 A	5.8 A	5.8 A
Power	12vdc / 20 W	12vdc / 20 W	120vac/ 100 W	120vac / 200 W	120 vac / 300 W	120vac / 700 W	120vac / 700 W
Price	us\$450.00	us\$295.00	us\$1300.00	us\$2300.00	us\$3300.00	us\$5000.00	us\$6000.00
Warranty	Limited, non-transferable lifetime warranty for original purchaser. Two (2) year limited warranty for institutions.	Limited one year warranty for original purchaser.	Limited two (2) year manufacturer's warranty.				



*Prices and specifications are subject to change without notice

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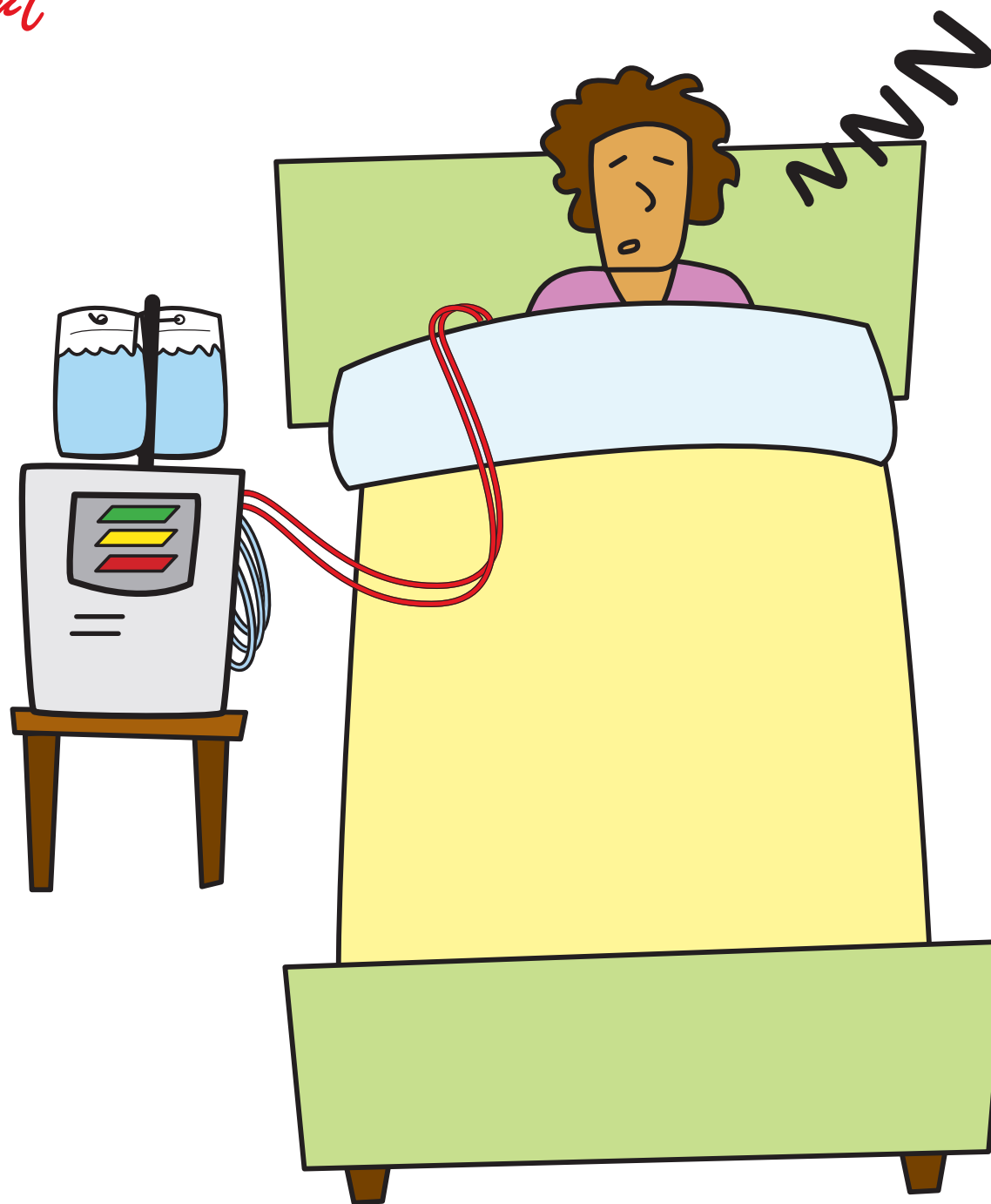


Home Hemo Support

New from Stickman!

Recent innovations have made hemodialysis an attractive option for many people who want to do dialysis at home, and Stickman wants to give them as many options for freedom and comfort as we've been doing for PD people for all these years.

We are proud of this initial offering of products, and hope to offer you more in the coming months and years. Please visit our website for new innovations, and make any suggestions for helpful products you might want us to carry.



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FreeFlex HemoBand

Comfort and safety for Home Hemo

This armband was designed specifically with the nocturnal home hemodialysis person in mind. It is easy to put on and adjust single-handedly, and is soft and comfortable to wear all night long.

4" wide, Latex-Free



us\$26.00



NEW!

20

To be used to immobilize hemodialysis tubing to the patient's arm above or below access. Does not replace securement and taping of access needles. Do not cover access or connectors with this product. Do not wear so tight as to prevent blood flow.



Small

7.5" - 11.5"
19cm - 29cm

Large

11" - 15.5"
28cm - 40cm

Our unique silicone "sandwich" design keeps your lines between two anti-slip surfaces and ensures all-night security and a safer night's sleep.



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21

Fistula Clamp

This spring-loaded fistula clamp makes waiting so much easier and gives the perfect amount (1 – 1½ lbs.) of pressure for hemostasis after needle removal.

Stainless steel spring. Green. Adjustable to fit all arm sizes.



us\$20.00



Line Clamps

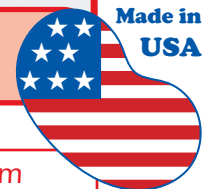
Easy to use yellow line clamps, sold 5 per order, and these are great for both hemo and peritoneal dialysis.

4½" long.

Great for HD and PD!



5 for us\$12.00

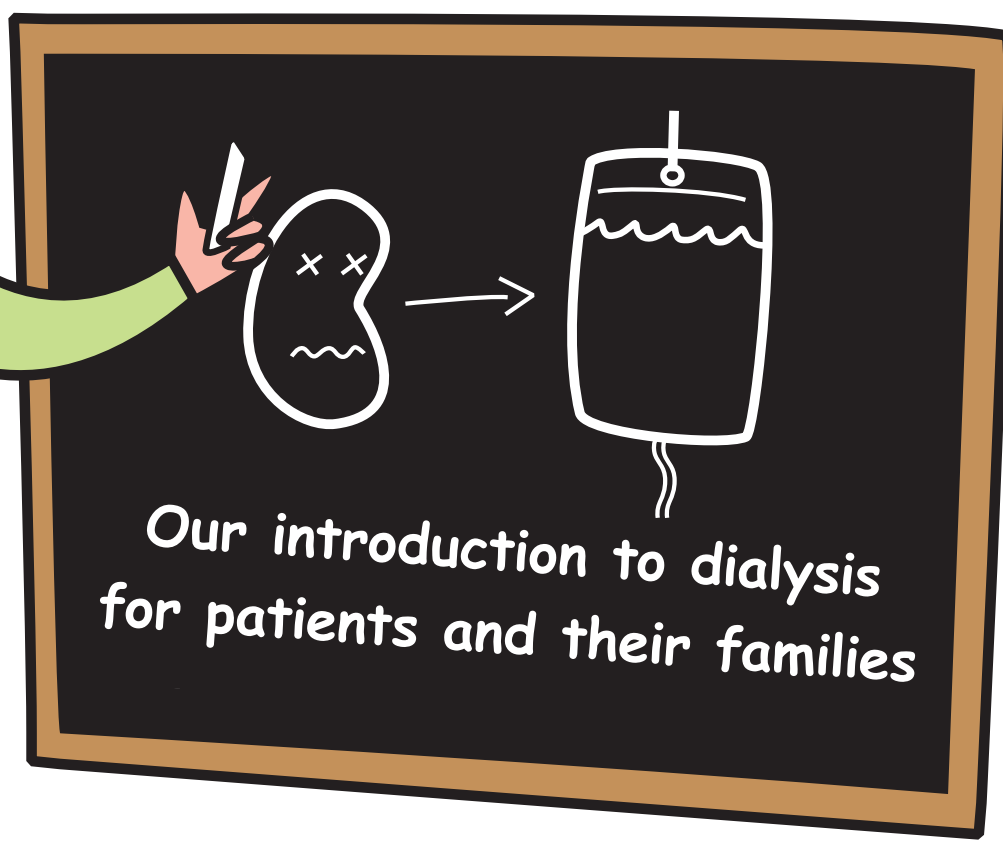
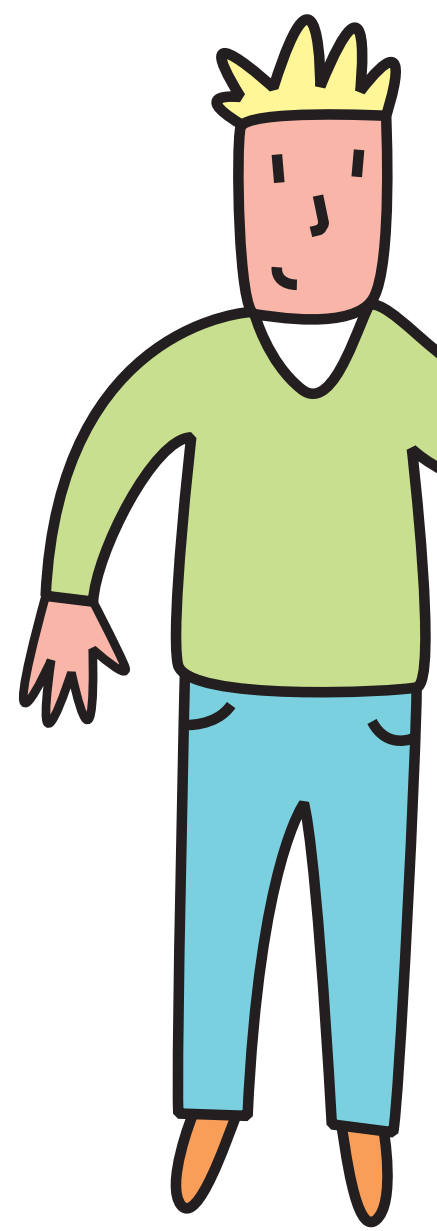


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Dialysis 101



Warning: The following section is simply a source of basic information about dialysis to compliment training by your dialysis center. Always follow your doctor or nurse's instructions and consult them if you have any questions regarding your particular dialysis requirements.



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Learn about Dialysis



Your Kidneys

What are Kidneys?

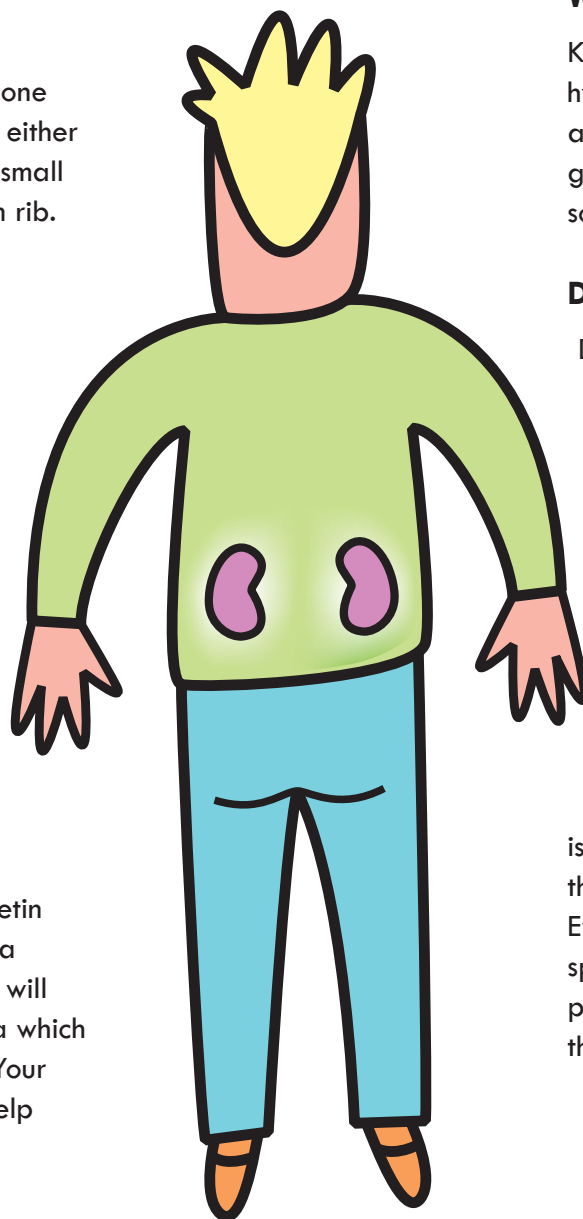
Most people have two kidneys, each one the size of a fist. They are located at either side of the backbone, just above the small of the back and level with the bottom rib.

What do they do?

Kidneys clean the blood by filtering out waste products and by balancing the body's water content. They do this by producing urine.

The kidneys also have other useful functions. They balance the amount of chemicals like potassium and sodium in the blood and they keep blood pressure under control.

Healthy kidneys also produce an important hormone called erythropoietin which helps build red blood cells. As a result of kidney failure, many people will experience a condition called anemia which causes fatigue and loss of appetite. Your doctor can prescribe medication to help with the symptoms of anemia.



Why do kidneys fail?

Kidneys fail for many reasons including diabetes, hypertension, hereditary kidney diseases such as polycystic kidney disease, infections such as glomerular nephritis, cancers and tumors, and sometimes from trauma such as accidents.

Diabetes and Kidney Failure

Diabetes is often confused with kidney disease. Kidney disease does not cause diabetes, but diabetes often causes kidney disease because diabetes narrows the blood vessels to the kidneys, starving them of blood. As a diabetic peritoneal dialysis patient, the calories in the PD solutions are taken into consideration.

Will I still pee?

Most likely yes, but expect a decrease as your kidneys lose more function. Just because urine is being produced does not mean that the kidneys are doing their job. Everyone is different, but generally speaking, PD patients will continue producing more urine for longer than patients on hemodialysis.



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Dialysis 101

What is Dialysis?

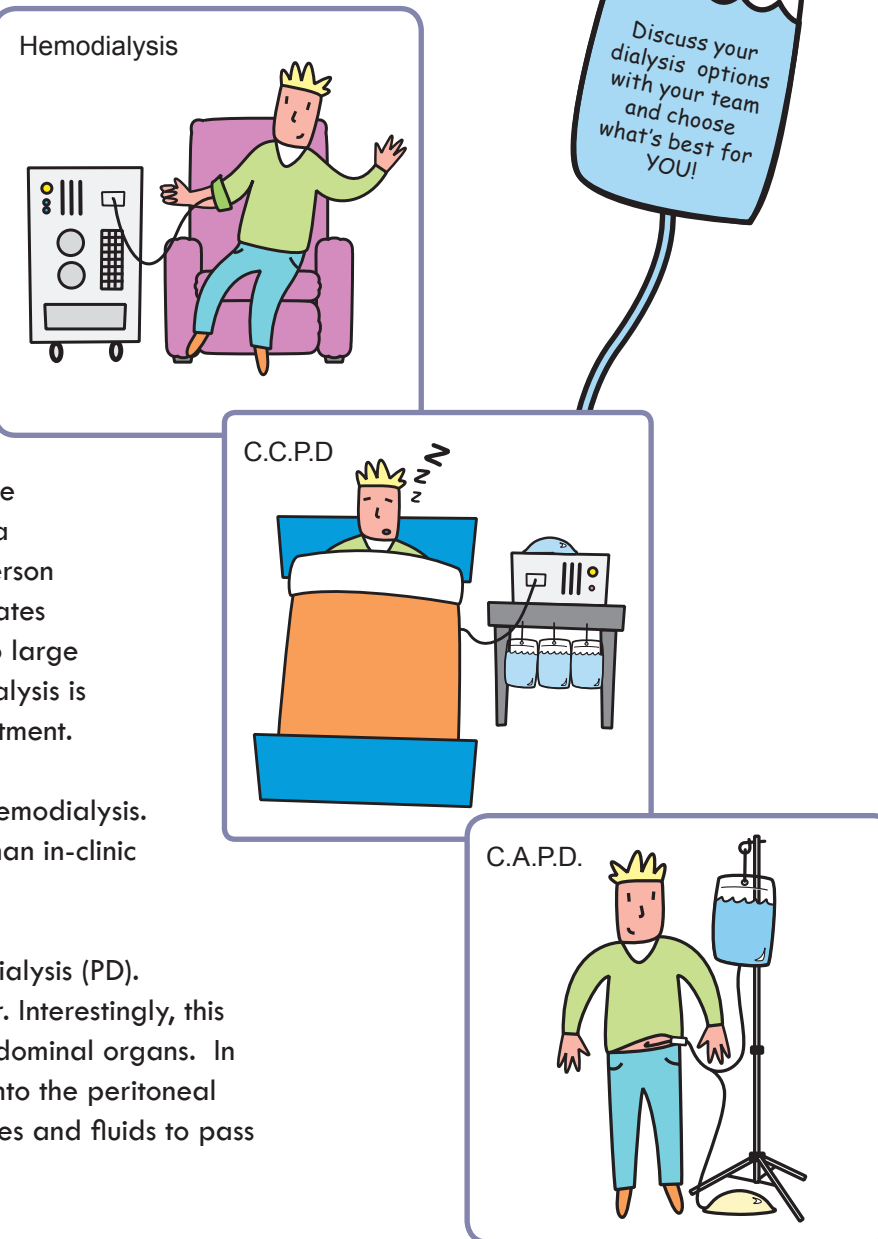
Each day, healthy kidneys process 50 gallons of blood through 140 miles of tubes, and millions of filters called “nephrons”.

Dialysis is a medical treatment which replaces some of the functions of a healthy kidney. There are two types of dialysis: hemodialysis and peritoneal dialysis.

Hemodialysis is a treatment option which is usually performed at a hospital or clinic by a machine which is operated and monitored by the staff. Blood is removed from the patient’s body and passed through a specialized filter which removes waste and excess water. Before a person becomes a regular hemodialysis patient, surgery is required. This creates an access that allows for adequate blood flow to the machine via two large needles in the arm, or specialized tubes in the neck or chest. Hemodialysis is usually performed three times a week for three to four hours per treatment.

Home hemodialysis is a relatively new and popular way to perform hemodialysis. More frequent dialysis at home makes for better health and vitality than in-clinic hemodialysis.

Unlike hemodialysis, blood never leaves the body during peritoneal dialysis (PD). Instead, PD makes use of the peritoneal membrane to act as the filter. Interestingly, this membrane’s designed function is simply to contain and protect the abdominal organs. In the early 1920s, researchers discovered that when fluid was infused into the peritoneal cavity, the specialized cells of the membrane selectively allowed wastes and fluids to pass naturally from the bloodstream into the fluid.



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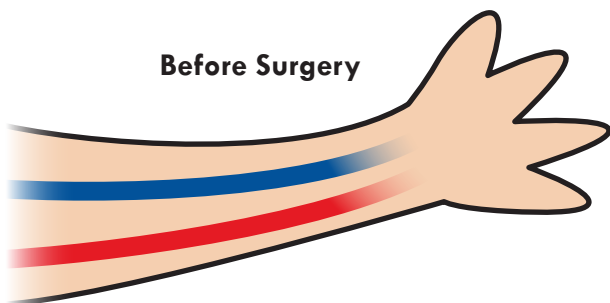
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Hemodialysis Basics

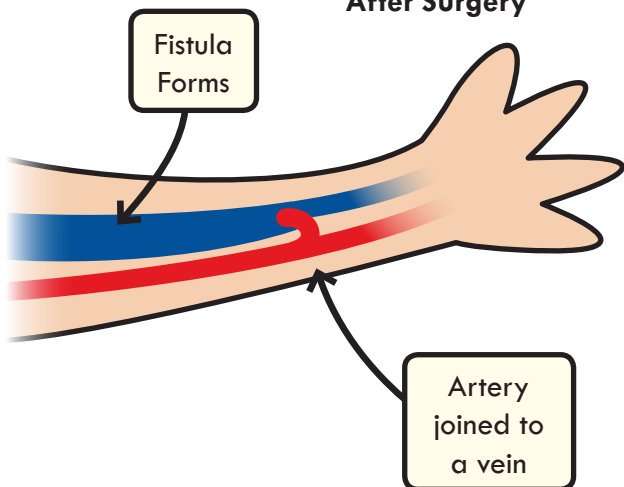
Access

Before you begin hemodialysis, doctors will likely create a fistula by joining a vein in your arm to a nearby artery, and allowing the sewn-in vein to enlarge and become thicker, like an artery. This is called a fistula, and will give you the access to high volumes and flow of blood required for hemodialysis, whether at home or in a dialysis clinic.

Before Surgery



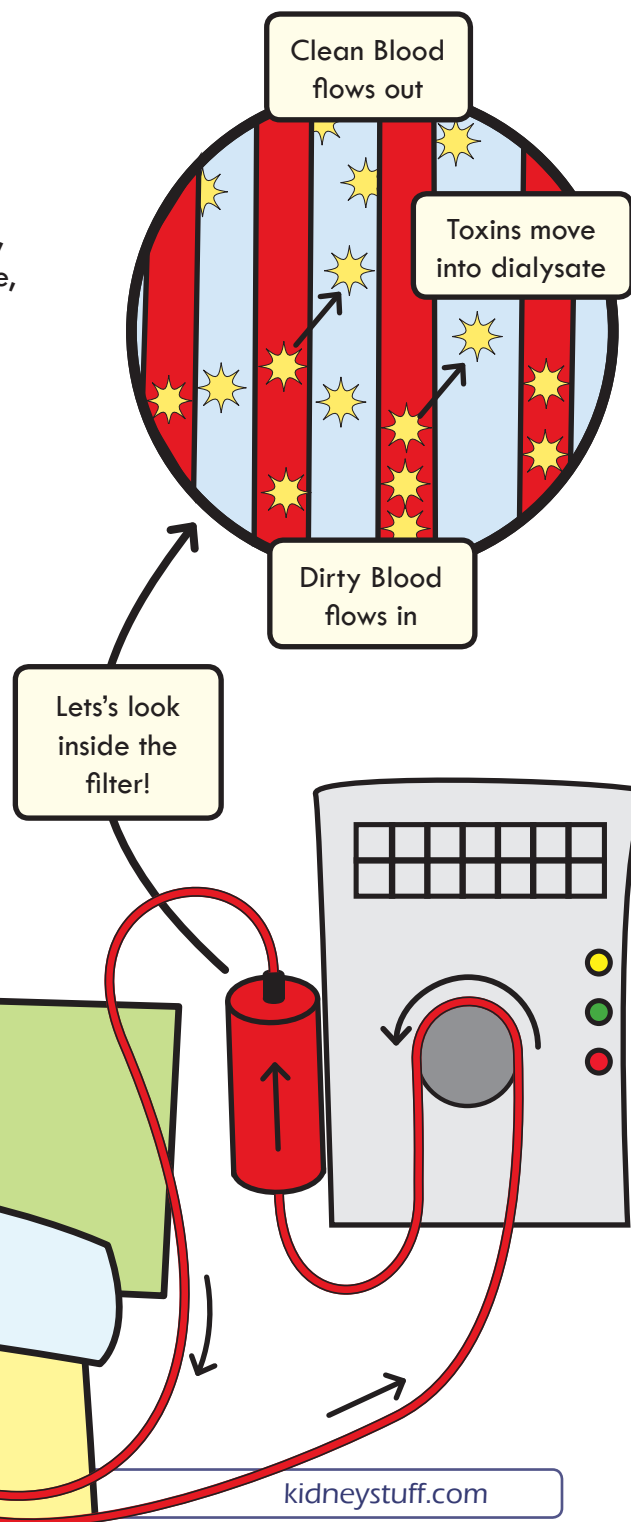
After Surgery



Your Machine

Once connected with your two needles, one going to and one from the machine, it will pump your blood through a filter. Within this filter, your blood will be “washed” as it passes through a series of tiny tubes surrounded by clean solution called dialysate. The blood never actually mixes with the dialysate.

The dialysis machine mixes and monitors the dialysate and monitors blood flow. It also helps get your electrolytes and minerals to their proper levels in your body.



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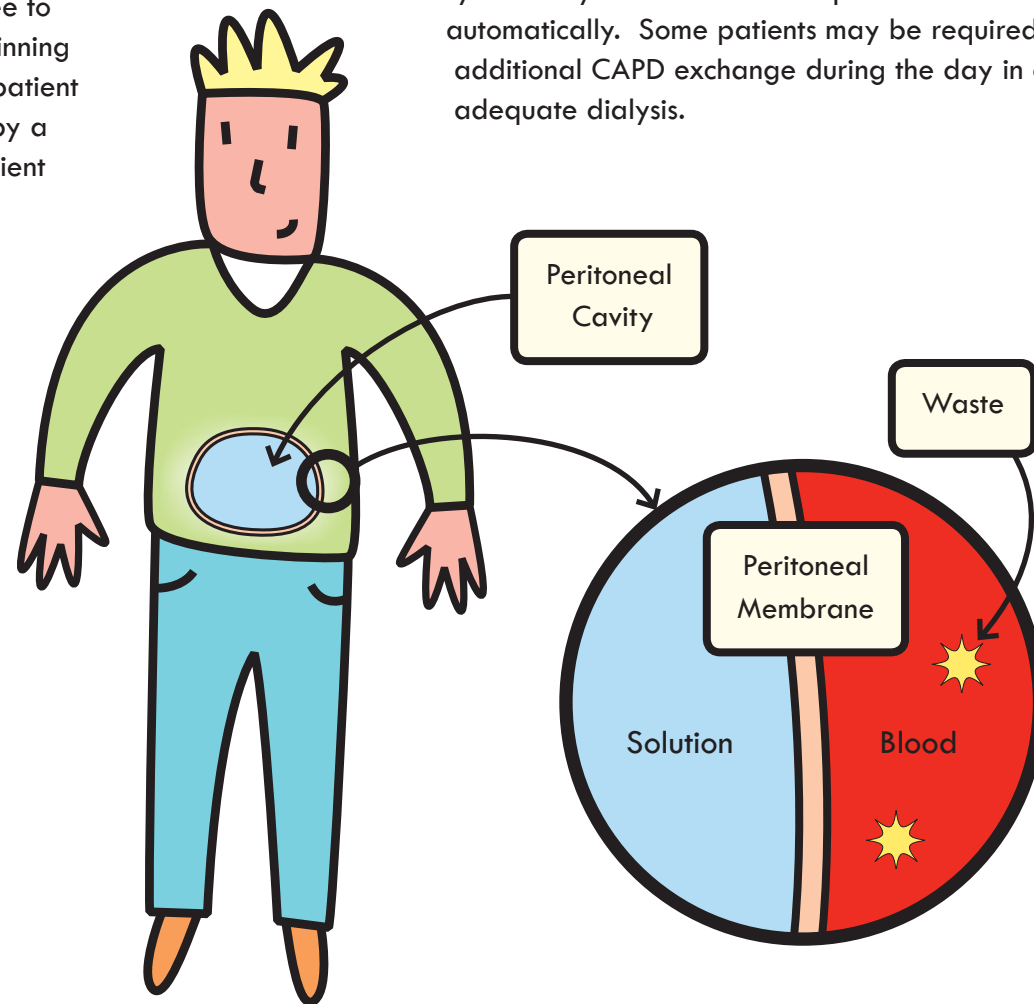
Peritoneal Dialysis Basics

PD Basics

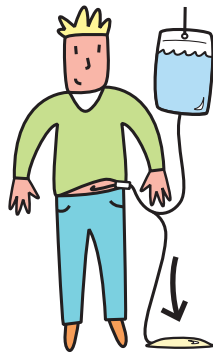
Before beginning PD, doctors must surgically place a soft flexible tube called a catheter into the peritoneal cavity. The place where the tube enters the skin is called the exit site, and is located a few inches from the belly button. The patient usually must wait about three to six weeks after this surgery before beginning PD. Once the exit site has healed, the patient will undergo a training program given by a nurse at a dialysis center. After the patient is trained, they are ready to do dialysis at home, on the road, or at work according to their own schedule.

CAPD (Continuous ambulatory peritoneal dialysis) is one of two types of PD in which a person generally completes four to six exchanges every day. An exchange is the procedure that replaces old fluid for clean, fresh fluid. Page 27 illustrates the basic steps involved in CAPD. We've also illustrated what happens at the membrane itself, showing waste particles and their movements.

CCPD (Continuous cycling peritoneal dialysis) uses a machine which the patient connects to during the night. Number of exchanges, dwell times and fill volumes are determined by the patient's doctor so that adequate dialysis is achieved. The machine is programmed by the dialysis center's staff to perform all of these exchanges automatically. Some patients may be required to do an additional CAPD exchange during the day in order to receive adequate dialysis.



Steps in CAPD



Drain

The patient connects the catheter to the double bag set and old fluid (effluent) flows into the drain bag by gravity.

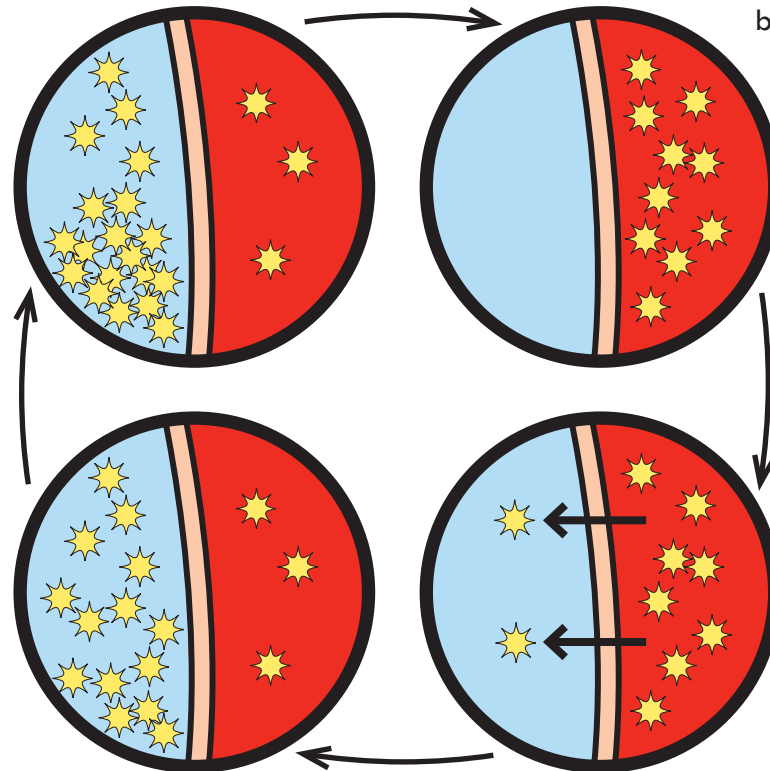
The waste products leave the person's body with the effluent. This step takes about 10 to 15 minutes.

Exchange Time

When the solution cannot absorb any more waste or water from the blood, it's time for an exchange.

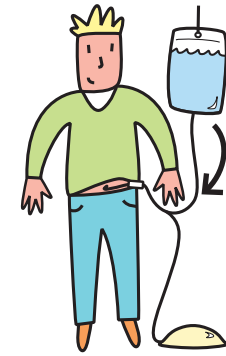


Sticking to your exchange time means you get optimal dialysis throughout the day and therefore better health!



Fill

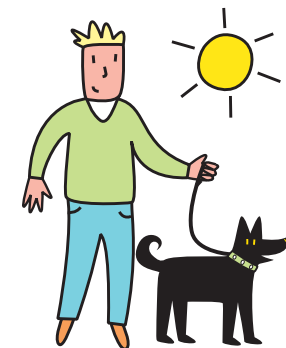
Fresh solution is allowed to flow into the peritoneum by snapping the safety seal in the tubing of the upper bag. It is very important to purge the air out of the fill line before allowing fluid to enter the peritoneum. Once the fill is completed, the patient disconnects from the double bag set and is free to carry on with his day. This step takes another 10 minutes.



Dwell

This is the time in between exchanges when the solution and peritoneal membrane do their work. Waste products pass from the bloodstream into the fluid.

This movement of particles is called diffusion. Excess water also passes through the membrane the same way, this is called osmosis. The dwell time depends on the number of exchanges the person does per day.



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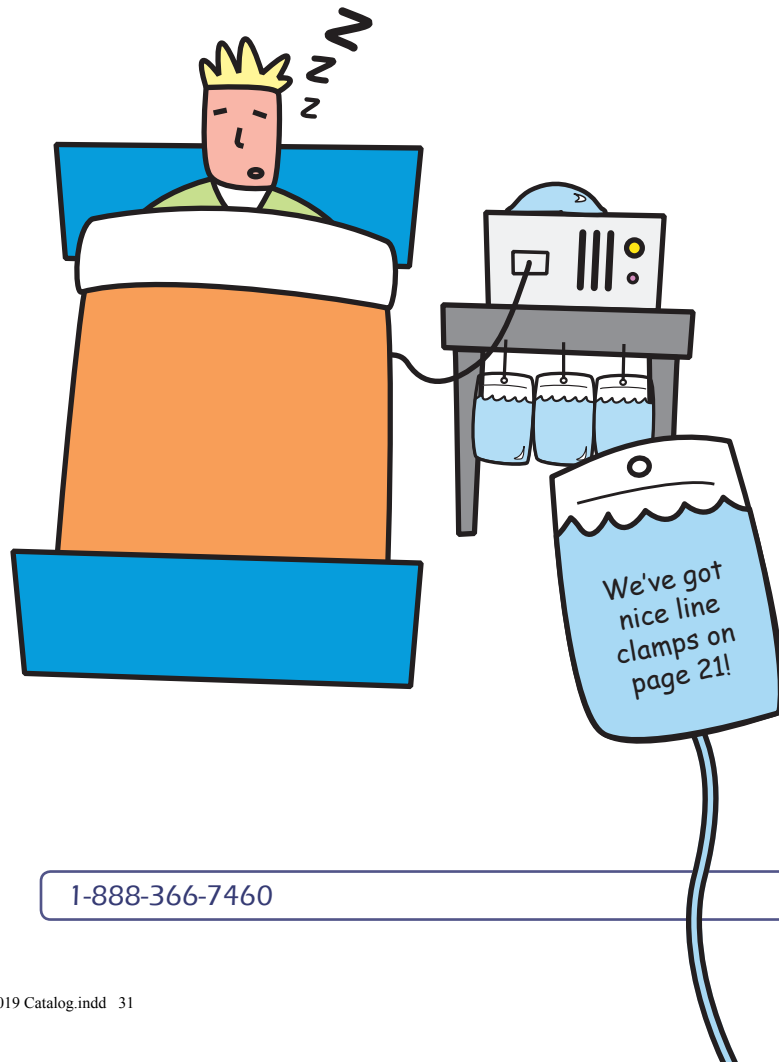
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CCPD

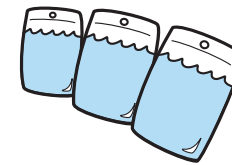
CCPD

CCPD stands for Continuous Cycling Peritoneal Dialysis. It is sometimes referred to as APD or Automated Peritoneal Dialysis.

The cycler machine is programmed to perform several exchanges while you sleep, replacing some or all of the daytime exchanges required in CAPD.



All About Bags



Size

The size of a bag of solution is indicated in millilitres (mL). The volume of fluid will be prescribed to the patient depending on body size. More fluid can fit inside a larger body. This is very convenient because a larger person also needs more dialysis because there is more blood to clean. CAPD bags generally come in sizes of 2000 mL, 2500 mL, and 3000 mL. There are also smaller sized for children and jumbo sized bags for CCPD. Each 1000 mL is equal to 1 litre, so for example, a 2000 mL bag is sometimes called a "two-litre bag". Oh, and one litre is just over a quart!

Concentration

Dialysis solutions come in different concentrations. These are indicated in percentages on the bags and boxes. The solutions are mostly water, but a certain percentage of it is glucose, dextrose, or other solute. These solutes draw water from the bloodstream into the solution

through the peritoneal membrane. The higher the solution's concentration, the more water it will remove with each exchange.

Why is water removal important? Well, remember that properly functioning kidneys would normally remove water from the blood, but now with little or no kidney function, the water would just keep building up in the blood. More water in the blood means more volume, which means more pressure – that's right, blood pressure – bad news for the heart as we all know! The last thing a kidney patient need is heart trouble!

So that's why nurses teach patients to watch their fluid intake, weight (which tells you how much extra water you're carrying), and blood pressure. Your dialysis training nurse will teach you how to determine which bags to use, and how to monitor your weight and blood pressure.

4 Elements in the Renal Diet...

Sodium

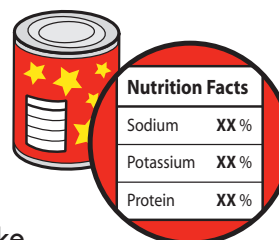
Sodium is the most talked about element in every kidney diet because it has the most effect on the kidney patient. It works as simply as this: salt makes you thirsty, and when you quench that thirst you add water to your body. This isn't a problem in a healthy person, but to a person with bad kidneys, that water has nowhere to go. As we mentioned earlier, the more water in your blood, the more volume and more pressure.



If you have too much salt in your diet, and then drink too much, that extra water will show up as swelling in the ankles, give you high blood pressure and headaches. Ignore these symptoms and you'll soon damage your heart and increase your chances of a heart attack or stroke.

As a dialysis patient, do your best to avoid salty foods, especially fast food and highly processed foods like jerky or ready-to-eat meals which use salt as a preservative. Avoid adding salt to your food. We're not going to lie to you, controlling salt and fluid intake is going to be the most difficult part of your diet, but it is also the most important part of making you feel better and helping you live longer.

The nutritional information labels on all store-bought foods have most of the information you need to help guide you when eating, shopping and cooking. Do your best to keep an eye on the elements important to the renal diet and take your phosphate binders with all meals. Phosphorus is not on these labels, but is in all food.



Potassium

Potassium is vital to control muscle contractions, and is commonly found in fruits and vegetables. In a person with healthy kidneys, excess potassium is passed in urine. In a kidney patient, it just builds up in the bloodstream.



The heart is a pretty important muscle, and needs to contract and relax constantly to keep you living, so needless to say, dialysis patients need to watch their potassium intake carefully. High potassium levels in your blood will have serious consequences which usually come without warning – we're talking about sudden heart attacks!



Be sure you understand where potassium is found in your diet, and do your best to control it.



...and How They Affect You!

Phosphorus



Phosphorus works to balance healthy calcium levels in your body. Optimum levels promote strong bones. In a kidney patient, elevated phosphorus levels cause calcium to be drawn out from your bones in your body's attempt to maintain this balance.

Losing control of your phosphorus and/or calcium levels will result in dry, itchy skin and eventually your bones will weaken, making them prone to breaks. The damage caused to bones by ignoring phosphorus levels is very difficult to reverse.

You may be instructed by your Nephro Team to take phosphate binders such as Tums, calcium carbonate pills, or prescription drugs such as Renagel. Phosphorus is in all foods, so they must be taken when you eat. This is vitally important because they work in your gut, bonding with the phosphorus in food and going right through you without being absorbed.

Protein



Protein is responsible for rebuilding muscle and tissue in your body and is most abundant in meats and fish.

Too much protein in the kidney patient shows up as elevated creatinine and urea levels, adding stress to your internal organs. This can make you tired and cloud your memory and thinking. In the long-term, elevated creatinine and urea levels can damage your internal organs. These levels are checked with your regular bloodwork during your visits to the clinic or hospital.

The exact amount of protein you need depends on your body size, your nutrition status and your kidney problem. Since too little protein can lead to malnutrition at any stage of kidney disease, ask your Kidney Doctor about meeting with a Registered Dietitian who specializes in kidney disease to find out how much protein is right for you.

We've deliberately avoided lists of foods here telling you what to eat and not to eat. It's up to you to make use of your dietician who will educate you more specifically on different food choices.



Try making a list of what you currently like to eat and how you like it prepared. Your dietician will help you make adjustments to your diet to make it more kidney-friendly while keeping you and your taste buds as happy as possible.



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Cleanliness & Infections in PD

Peritoneal Infections

A peritoneal infection, also known as peritonitis, is caused by a bacterial or fungal invasion of the peritoneal membrane. Peritonitis is a problem often identified with PD, but is very preventable and treatable.

Causes: Peritoneal infections are caused by germs entering the peritoneum. The most common cause of peritonitis in PD patients occurs when the uncapped catheter touches an unclean surface during the connection stage of the exchange. Peritonitis can also occur from an untreated exit site infection which has made its way into the peritoneum. A less common route of infection can occur from the bloodstream or intestines.

Symptoms: Some of the more obvious symptoms are abdominal pain, fever, cloudy effluent, nausea and vomiting.

Prevention: Learn to make your connections accurately and quickly to minimize the chance of a touch infection. Follow your nurse's instructions in the event of a suspected touch contamination before continuing with that exchange. Follow the guidelines from dialysis training regarding cleanliness and hygiene.

Treatment: The environment inside the peritoneal fluid is perfect for germs to grow and spread, so getting yourself treated immediately is vital. Antibiotics are usually administered right into the peritoneum with fresh solution, making them very effective in their counter attack against the germs right at the peritoneal membrane.

Remember: time is your best weapon against peritonitis, so get treated fast!

Exit Site Infections

An exit site infection is an inflammation of the tissue in the area where the catheter comes out from the skin. This is more common during the early stages of PD while the exit site is healing, but can also happen anytime while a patient is on PD.

Symptoms: The early symptoms include redness and swelling at the exit site followed by pain and discharge from around the tube.

Causes and Prevention: The number one cause of this type of infection is improper maintenance of the exit site. To help prevent exit site infection, wash and dry your exit site thoroughly on a daily basis as you were shown. Exit site infection can also be caused by damage to the surrounding tissue or displacement of the tube which results from tugging on the catheter with enough force. Always use care when handling the catheter to prevent this type of damage.

Treatment: Exit site infections are usually treated with daily dressing changes, antibiotic drugs and/ or creams. In the most severe cases, the catheter is removed, and positioned elsewhere.

Both types of infection should be taken very seriously, but they are preventable. They should not make you afraid of PD. Many patients go for years without any problems at all! Just follow your training for good exit site care and proper exchange technique to minimize your chances of any problems.



Everyone should strive to have a nice, clean exit site, so follow your nurse's daily maintenance instructions religiously!

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Your Nephro Team

Your Home Dialysis Pit Crew

When you begin either type of dialysis, you'll be taken care of by a team of highly specialized professionals, each one essential to your well-being, but only if you make use of them. Take their advice seriously, and don't ever be afraid to ask questions or for clarification on something you may not understand.



The **Nephrologist** is the doctor who specializes in kidneys. You will probably see him or her during your regular clinic visits. Your nephrologist will prescribe drugs and dialysate to you, monitor and interpret your blood test results, and if necessary, refer you to other specialists.



Your **Dialysis Nurse** is the person you'll spend the most time with, particularly during the early training part of starting dialysis. He or she coordinates most aspects of your care.



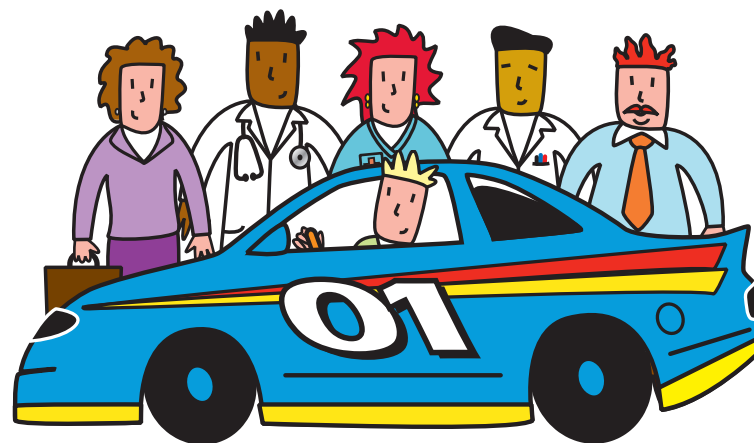
The **Pharmacist** is highly trained in the "chemistry" of the drugs you'll be taking and will guide you on how and when to take your medications. Many drugs interact with each other, so be sure to tell your pharmacist about all the other medications you take, including over-the-counter drugs, vitamins, supplements, and herbal remedies.



Eating the correct foods is as crucial as taking your medications and **Dieticians** are experts in food choices and preparation. They will help with meal planning, and they have helpful hints on making the right foods taste better.



Your **Social Worker** is often overlooked by patients, but offers a wealth of information and help with community resources, insurance, home health, travel needs, support groups, educational resources and just about any other personal needs.



You chose home dialysis and now you are the most important person in your health care. Use your Nephro Team to help guide you through dialysis,

diet, exercise, medication and hygiene like a race car driver uses his pit crew to keep him fueled up and running strong.

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Home Dialysis Glossary

Adequacy: A term that refers to how well your dialysis is working. To measure adequacy, tests are carried out to see if enough fluid and waste products are being removed from your blood.

Ambulatory: This is the “A” in CAPD. It means mobile!

Anemia: A condition that occurs when there are too few red blood cells in the blood. Red blood cells bring oxygen to cells in the body. A person who has anemia usually feels weak and tired all the time.

Blood Pressure: The pressure of the blood against the inner walls of the blood vessels. Blood pressure varies with health, age, and stress levels.

Buttonhole: a way to put needles into a fistula that can reduce needle pain and the chance of large bulges or bumps. Needles are placed into the exact same holes at the exact same angle for eight or so treatments in a row. Tunnel tracts form, like pierced earring holes.

Cannulation: inserting needles.

CAPD: Stands for “continuous ambulatory peritoneal dialysis”. Sometimes referred to as a manual exchange.

CCPD: Stands for “continuous cycling (cyclic) peritoneal dialysis.” A machine performs the peritoneal dialysis solution exchanges in regular cycles. Also known as Automated Peritoneal Dialysis (APD).

Catheter: A slender tube inserted into a body passage or blood vessel for passing or removing fluids.

Creatinine: Creatinine is a by-product of muscle activity. It is measured as part of a patient's lab work to determine the adequacy of dialysis or renal function.

Cycler: A machine that performs peritoneal dialysis solution exchanges in regular cycles in CCPD.

Diabetes: A chronic health condition where the body is unable to produce insulin and properly break down sugar in the blood.

Dialysate: Dialysis solution or fluid.

Dialysis: A way to partially replace the work of the kidneys. With dialysis, the blood is cleaned either by using a special solution and the tissues within the body (peritoneal dialysis) or with an artificial kidney machine (hemodialysis).

Dry Weight: A renal patient's ideal weight. It's used as a baseline to properly monitor and help control the amount of fluid a patient's body retains.

Dwell: The time that the fluid stays in the peritoneum between exchanges.

Fistula: (or AV fistula) A surgically connected artery and vein, usually in your arm. An artery is a blood vessel that carries blood away from your heart. A fistula is a blood vessel made wider and stronger by a surgeon to handle the needles that allow blood to flow out to and return from a hemodialysis machine.

Effluent: The drained waste fluid from a peritoneal dialysis exchange.

Hemodialysis: The word hemo means blood. During hemodialysis treatment blood is pumped

outside the body through a dialyzer that acts like an artificial kidney. This device removes the extra fluids and wastes and returns the clean blood to the body.

HDD: Stands for Home Hemodialysis

Hypertension: High blood pressure. Can be a major side effect in dialysis patients who don't control their fluid levels. Will lead to many serious complications including heart problems.

Hypotension: Low blood pressure. Can also be a major problem in dialysis patients who have too much fluid loss. Symptoms include dizziness and thirst.

Nephrons: The small unit in the kidney, made up of small blood vessels (glomeruli) and tubules which produce urine.

Peritoneal Cavity: The peritoneum is a membrane that lines the abdomen. The peritoneal cavity is the space contained by this membrane.

Peritoneal Membrane: The lining of the abdominal cavity.

Peritonitis: Inflammation of the peritoneal membrane, usually caused by infection, is bad news for PD patients.

Ultrafiltration: Extra fluid gets pulled through the peritoneal membrane by using a solution with a higher concentration.

Children's PD Storybook

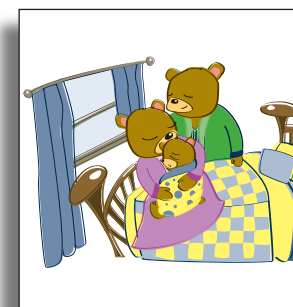
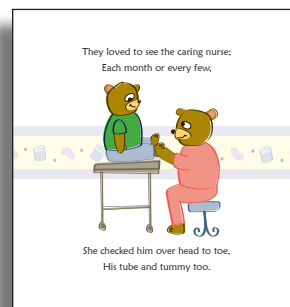
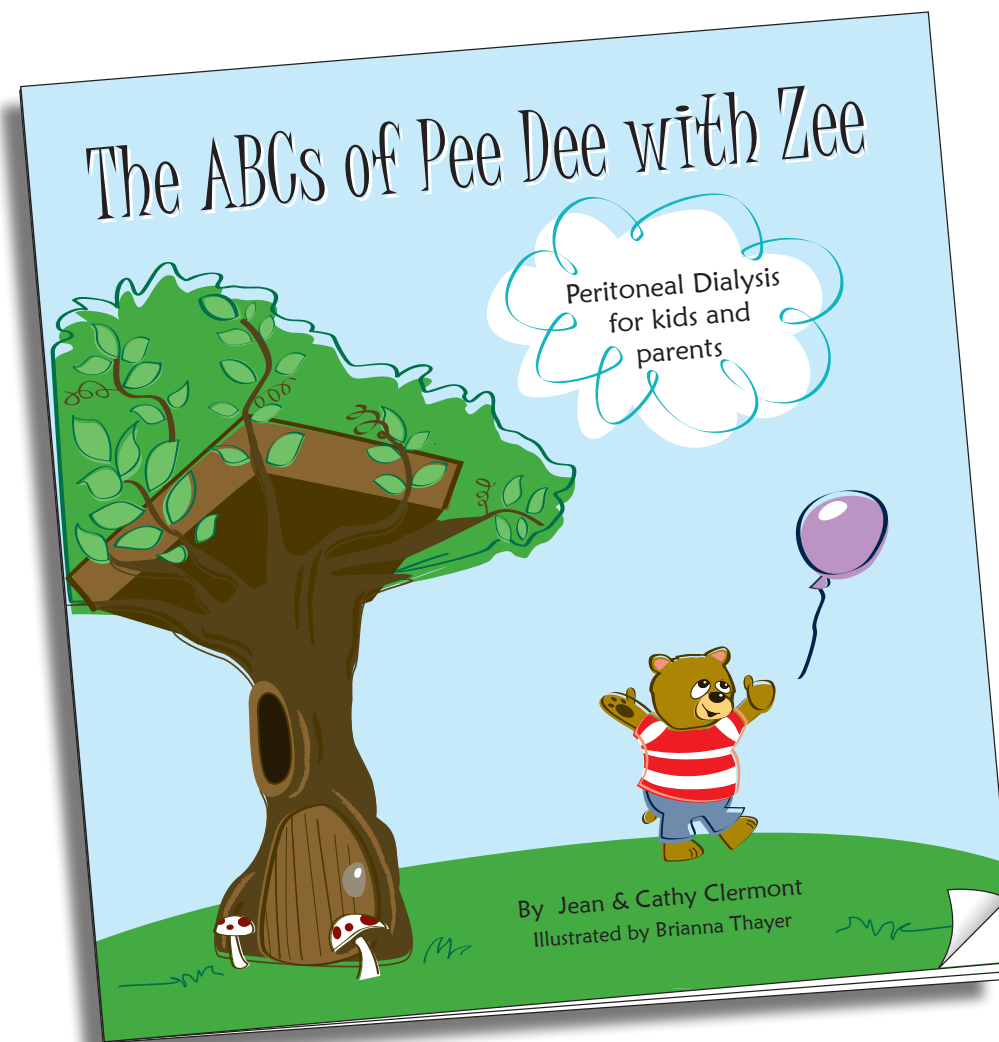
Peritoneal Dialysis for Kids and Parents

This heartwarming story of a youngster's journey through kidney failure, peritoneal dialysis (PD) and transplantation was written and illustrated to help kids understand kidney disease and this form of treatment.

An excellent resource for helping a child go through the process personally or understanding what another family member may be undergoing. Includes five activity pages with PD games and coloring.

Softcover, 38 pages
7.5" x 7.5"

us\$8.00



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34

Kidney Gifts

Kidney Hats

Share your kidney pride!

Various Colors and Styles

Embroidered in the USA



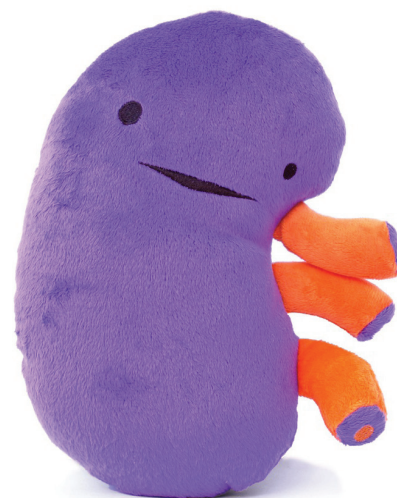
Please look online for the latest styles and prices

Plush Kidney

A perfect gift!

A cuddly gift for your nurses, your doctor, or for anyone in the kidney world. How about a congratulatory present for someone with a kidney transplant? Safe for all ages, this plush comes packed inside a biodegradable plastic sleeve.

Size: 8" x 9", made overseas



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Kidney Keychain

Let your kidney keep your keys together!

Enameled metal and totally cute!

Kidney part of keychain measures 2" x 1.5"



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Doesn't
your nurse
deserve a
little gift?

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Hello Kidney T-shirt

Cute or what?!

Quality printing on Jerzees Women's 50/50 T-shirt. Durable never looked so good! Finally, a 50/50 t-shirt that's designed just for ladies!

Sizing Tip: Style runs small, you may want to consider sizing up.

Women's Sizes S, M, L, XL
Printed in the USA



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Stickers

We're your one-stop-shop for kidney stickers, with new ones every few months!

Various Sizes and Styles



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Kidney Pin

Great gift for Doctors!

How great would this look on your nurse's scrubs, or your nephrologist's nerdy lab coat?

Measures 1.25" tall, made overseas

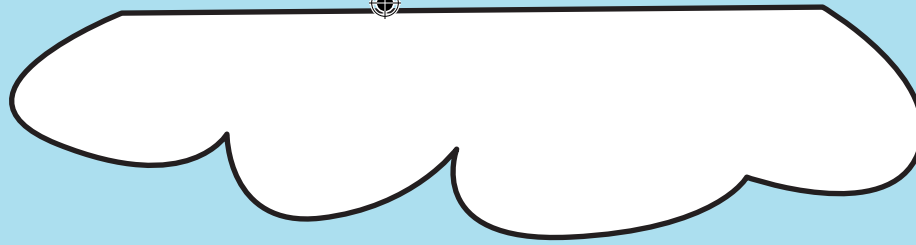
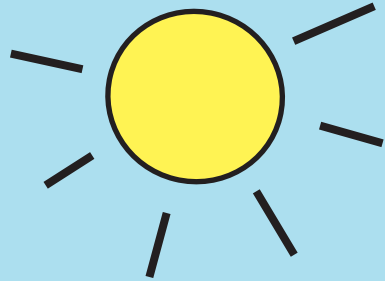


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