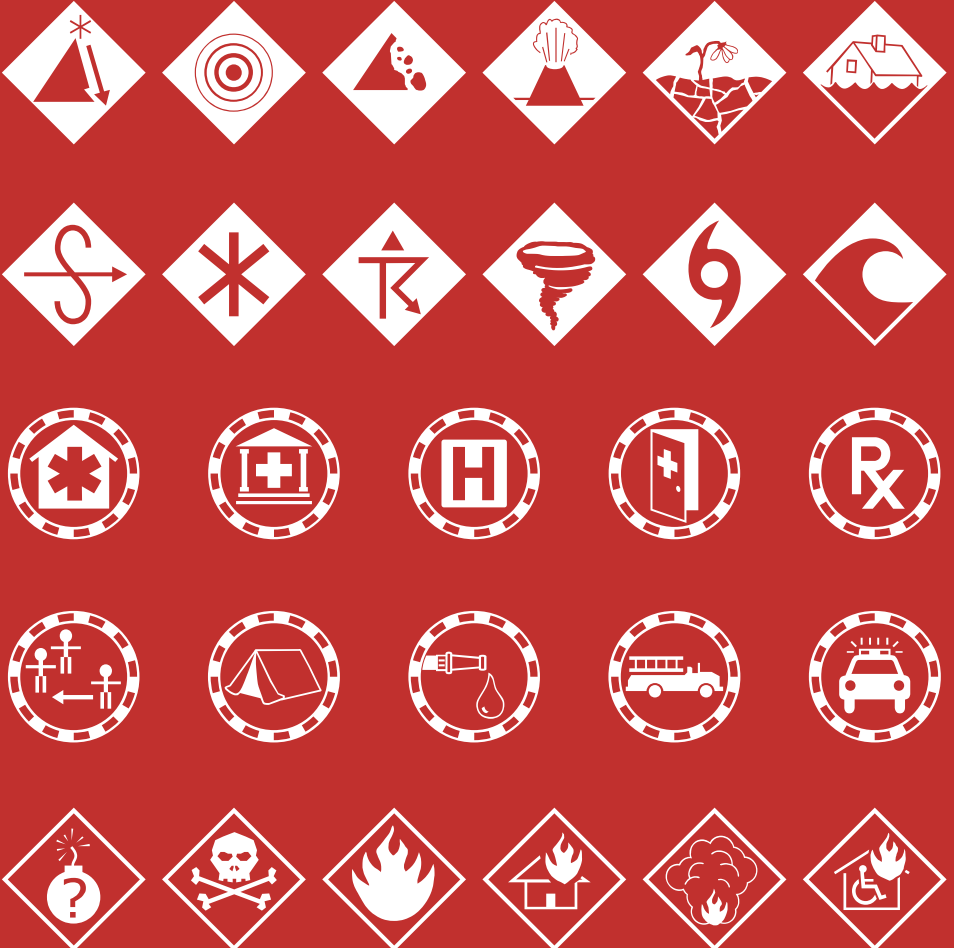


National Kidney
Foundation™

Planning for Emergencies

A Guide for People with Chronic Kidney Disease



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Planning for Emergencies

The delivery of health care services, such as dialysis treatment, can be disrupted by natural disasters (blizzards, earthquakes, floods, hurricanes, tornadoes, etc.) as well as by other types of emergency situations, such as electrical power blackouts. The aim of this booklet is to help you prepare for possible emergencies. Hopefully, you will never need to use these emergency measures. However, by knowing what to do and preparing ahead, you can feel secure if an emergency should occur. Study the information in this guide carefully and remember to keep it in a readily accessible place. Leave copies of the guide at your workplace and at home and take it with you when you travel.

How can I plan ahead for an emergency?

1. Keep a current list of your medicines and dosages and carry it with you. Also, keep a two-week supply of medicines and diet needs at home. (See grocery lists on pages 18 and 24.) Be sure to check periodically for expiration dates and replace items when needed. If you work outside the home, keep an extra supply of medicines at your job. Check with your doctor about having a special medicine on hand that helps to control the level of potassium in your blood by increasing its excretion in the stool.
2. Ask a friend or relative in another area to be your designated contact person. In an emergency, you may not be able to make telephone calls in your immediate area, but may still be able to place calls to another area. If you need to use a pay phone that has fallen off the hook and seems out of order, be aware that the reception may be restored if you place the receiver back in the cradle for a few minutes. Make sure you always have enough change with you to use a pay phone. Although cell phones will often lose their signal during

emergency situations, pay phones often still work, as do landline phones. Learn how to use text messaging if your cell phone has this feature. Text messaging may work when audio is unavailable. You should have a landline (non-portable) phone in your home.

3. Keep a copy of important medical information at your home and at your job if you work outside the home. (You may use the patient and treatment information forms on pages 31–35 of this booklet.) Update the information often. If needed, ask your health care staff to help you complete these forms. Include insurance information among these necessary documents.
4. You should obtain and wear a medical emblem. This contains vital information about your medical condition and treatment, and alerts medical personnel to your special needs. If you need help in getting one, ask your social worker or National Kidney Foundation Affiliate.
5. Keep the following emergency supplies in a secure place:
 - A battery-powered AM/FM radio and extra batteries. Find out what the emergency broadcast radio station is in your area. This will give you up-to-date information on current conditions and emergency information, even if you have no electricity or phone service.



- Flashlights with plenty of extra batteries or candles and matches. (Remember never to use matches until you have checked for gas leaks.)
- A first-aid kit.
- A fire extinguisher. Check regularly to make sure it is full.
- Prepare for loss of indoor plumbing. Basic sanitary requirements can be met by using kitty litter, fireplace ashes or sawdust.
- An emergency phone list (see page 30).

For a complete list of items needed, contact your local police or fire department.

6. Ask the staff in your unit for a copy of their disaster plan and familiarize yourself with it.

What should in-center hemodialysis patients do if a natural disaster occurs in their area?

If a natural disaster occurs in your area, stay indoors and listen to your emergency broadcast radio station for information about what to do. Your local National Kidney Foundation Affiliate may be able to help you find out if your regular unit is open. If your unit is not operating or if you are not able to reach the unit, you may be able to dialyze at a different unit. Make sure you have the names, locations and phone numbers of back-up dialysis units and hospitals in your area. Since regular community transportation services may not be working, be prepared to make other arrangements for getting to dialysis. Contact the police and Emergency Medical Services (EMS) to notify them of your need for assistance.

In a large-scale disaster, you may not be able to get to a dialysis unit for a period of time. You should be prepared to manage without dialysis for a few days by using an emergency diet. (See “Emergency Meal Planning for Kidney Patients” starting on page 16.)

Will my dialysis change during an emergency?

Possibly. In a severe disaster, dialysis staff may not be able to continue your individual schedule and orders. They may need to use emergency procedures, which may include a standard dialyzer and a shorter treatment time. Every attempt will be made to give you the most appropriate treatment possible.

What if an emergency happens when I am dialyzing at the unit?

Your dialysis unit has a procedure for emergency evacuation.



If you are dialyzing at your unit and a disaster occurs, the dialysis staff will direct you in an evacuation procedure. They will assist you in getting off the dialysis machine as quickly as possible. The dialysis lines will be clamped and disconnected from your needles. Your needles will be taped down and left in place until you are evaluated by medical personnel. The staff will direct

or assist you to a designated gathering place.

Suppose no one is available to help me get off the machine?

Your dialysis unit has an emergency procedure you can use to get off the dialysis machine safely if no one is available to help you. Speak to the health care team at your unit about their emergency procedure. Make sure the staff teaches you the steps for getting yourself off the dialysis machine in case a situation occurs where the staff cannot assist you.

What should home hemodialysis patients do to prepare for an emergency?

In addition to the general steps listed in “How can I plan ahead for an emergency?” (see pages 3–5), you should also do the following:

1. Keep a list of dialysis units in your area at home and at your workplace.
2. Keep a two-week stock of dialysis supplies at all times. Check expiration dates regularly and replace supplies when needed.
3. Register with your local water and power companies for priority restoration of service.
4. Learn to be comfortable taking yourself off the machine in an emergency.
5. During the emergency, if you lose power while dialyzing, follow the directions for discontinuing dialysis given to you by your home training staff.
6. If you are not able to continue your treatments at home during the emergency, contact the home training staff so alternate arrangements can be made.

What should patients who are on CAPD (continuous ambulatory peritoneal dialysis) or CCPD (continuous cycling peritoneal dialysis) do to prepare for an emergency?

1. Keep a two-week stock of peritoneal dialysis supplies. Check expiration dates regularly and replace supplies when needed. If you use an ultraviolet device, keep the battery charged.
2. Include in your emergency medication pack a five-day supply of the antibiotic that your doctor orders for peritonitis. If a disaster occurs, it may be difficult to maintain a clean environment and your risk of peritonitis may be higher.
3. Register with your local water and power companies for priority restoration of service.

4. If you do CCPD, you should also know how to do CAPD exchanges in case you are unable to use the cyclor.
5. If you are a CCPD patient and you lose power while dialyzing, follow the instructions given to you by the CCPD training staff for discontinuing dialysis in an emergency situation.



What should transplant recipients do to prepare for an emergency?

1. Know your medications and keep a two-week extra supply in their original containers if possible. If you need to evacuate, original bottles will provide necessary information when you arrive at your destination.
2. A backpack with a waterproof pouch packed with key items (listed in #3) should weigh about 10 pounds. Good shoes should enable you to carry this backpack, leaving your hands free if you should need to evacuate.
3. Pack key data in a waterproof bag; you can add to the key information outlined on page 30 as specific to your health. Pack several 8-ounce bottles of water, a hand-operated can opener, hand sanitizer, travel-size toiletries, disposable wipes, toilet paper, sunscreen, a miniature flashlight, a mask, gloves, a thermometer, batteries, matches and candles. Stock disposable eating utensils and canned and packaged rations of foods, such as peanut butter, saltines, tuna, juices—several days' worth if

possible. Include some dry clothes. If you are diabetic, see page 24 for some guidelines regarding food choices. Bring any supplies you might need to treat diabetes or other conditions.

4. If you are in a shelter or in contact with emergency personnel, let them know you are a transplant recipient, and need to take medications regularly and on-time. If at all possible, limit your exposure to infections. Sanitizers, gloves and a mask can help. Using common sense and remaining positive will help.
5. Many of the ideas in this booklet can be adapted for you.
6. Ask your transplant health care team about precautions, additional medications, and preparation that they recommend. You can find a list of transplant centers around the country from the United Network for Organ Sharing 888.894.6361.

What should diabetic patients do to prepare for an emergency?

1. Make sure you have extra insulin and syringes.
2. Keep a supply of sugar, honey, instant glucose or glucose tablets, low-potassium juices, sugared soda and hard candy in case of low blood sugar reactions.
3. Keep extra batteries so you can check your blood sugar if you have a monitoring system.
4. Request a copy of *Emergency Meal Planning for Diabetics* by calling the NKF at 800.622.9010, or visit the NKF Web site at www.kidney.org (see *A to Z Health Guide*).

What kind of diet should dialysis patients follow in an emergency?

Following are some general guidelines for use if a natural disaster occurs and dialysis becomes unavailable in the local area. For more detail see "Emergency Meal Planning for Kidney Patients" starting on page 16.

If you have to miss dialysis, your well-being may depend on your ability to stick to a very restricted diet until you can dialyze. If you need to eat in restaurants, remember that the cooks are not aware of your dietary needs. Learn how to make healthy choices when eating out. For suggestions on how to do this, see the National Kidney Foundation's brochure *Dining Out With Confidence: A Guide for Kidney Patients*.

It is best to eat refrigerator-stored foods first. Other food supplies may extend the time so that you can be self-sufficient. If you store food and water for disaster preparedness, replace regularly to guarantee freshness.

1. It is very important that you eat, but select foods wisely and limit fluid intake.
2. Limit protein to one-half your current intake. For example, if you eat two eggs for breakfast, decrease to one.
3. Keep five gallons of distilled water on hand.
4. Restrict fluid intake to two cups a day (including milk).
5. Limit milk to $\frac{1}{2}$ cup per day. Use dry milk solids, evaporated milk, ultraprocessed milk or powdered non-dairy creamer mixed with water, if necessary, to equal $\frac{1}{2}$ cup. (Use distilled water you will keep on hand.)
6. Use salt-free foods whenever possible.
7. Avoid all foods with high potassium content. Select only low-potassium fruits and vegetables. Remember that large portions of low-potassium food can turn into a high-potassium food. (For more information on high- and low-potassium foods, see the fact sheet *Potassium and Your CKD Diet* in NKF's *A to Z Health Guide* at www.kidney.org.)
8. People with diabetes should have foods available for low blood sugar reactions, such as sugar, honey, low-potassium juices, sugared soda, instant glucose or glucose tablets and hard candy.

9. Food preparation is difficult without power and water. Have ready-to-eat foods on hand. Remember that canned foods are often high in sodium. Check labels for sodium and potassium content.
10. Consider obtaining coolers, thermos containers or a propane stove or grill, to assist with food storage and preparation.
11. Have a supply of disposable dishes, utensils and paper napkins on hand to minimize the need for washing dishes.
12. Store a hand-operated can opener with the canned goods.
13. Wrap food scraps securely for disposal to minimize odor.
14. Check with your doctor about keeping a supply of laxatives on hand.
15. Include measuring cups and a scale in your supplies.
16. As an added precaution, keep an extra copy of your emergency diet with your food supplies.

Are there special considerations in different kinds of disasters?

Here are some things to think about in special situations.

Blizzards

1. Listen to the local emergency broadcast radio station for updates on the storm and instructions about what to do.
2. If you are at home, don't attempt to go out or to drive until the storm is over and the roads have been cleared.
3. If you are at the unit when the blizzard hits, stay until weather and road conditions have cleared.
4. If you are a dialysis patient and you have to miss dialysis, begin your emergency meal plan.
5. If you have to go to the shelter, tell the person in charge about your special needs as a kidney patient.



Earthquakes

1. Stay indoors; do not go outside unless collapse of the building seems likely.
2. Once the initial shaking has stopped, be aware that aftershocks may occur.
3. Stay away from tall objects that could fall over.
4. Listen to a battery-powered radio to keep up with what is going on in the area.
5. Turn off any lighting and electrical devices.
6. Do not use the telephone except in extreme emergencies.
7. Check your emergency supplies; remember to conserve supplies.
8. Know the location of the nearest dialysis unit in a safe area that has not been affected by the earthquake.
9. Do not light candles or matches until gas leaks have been assessed by emergency personnel and no gas leaks have been found.
10. If you evacuate your home, remember to take the phone number of your dialysis unit and other information as well as your medicines.
11. If you have to go to a shelter, tell the person in charge about your special needs as a kidney patient.
12. Make sure to wear shoes when walking after the earthquake, in case of broken glass.
13. Keep a secured flashlight in an easily accessible place.
14. If you live in an area where earthquakes occur, make sure your potted plants and wall clocks are secured in place.
15. If you are a dialysis patient and you have to miss dialysis, begin your emergency meal plan.

Floods

1. Listen to your local emergency broadcast radio station for information and instructions about what to do.
2. If you have to evacuate your home or the dialysis unit:
 - Stay out of already flooded areas and areas where floods are likely to occur, such as low-lying areas, canyons, washes, etc.
 - Move to high ground if you see or hear rapidly rising water.
 - Do not drive through flooded areas or cross water that may be more than knee-deep.
 - Be very careful at night when it is harder to spot flood dangers.
 - If you are a peritoneal dialysis patient, be sure your access site is not contaminated when trying to evacuate under flood conditions.
3. If you have to go to a shelter, tell the person in charge about your special needs as a kidney patient.
4. If you are a dialysis patient and you have to miss dialysis, begin your emergency meal plan.

Hurricanes

1. Listen to your local emergency broadcast radio station for news about the storm. You may have to evacuate if you live in a high risk area (on the coastline, on an offshore island, near a river, etc.) or in a mobile home.
2. Make your plans in advance so you will not waste time when the storm arrives.
3. Be familiar with safe routes inland.
4. Know where official shelters are located. If you have to go to a shelter, tell the person in charge about your special needs as a kidney patient.
5. If you are a dialysis patient and you have to miss dialysis, begin your emergency meal plan.

Tornadoes

1. Go to the designated shelter areas. If you have to go to a shelter outside your home, tell the person in charge about your special needs as a kidney patient.
2. Stay away from windows, doors and outside walls.
3. If in danger from objects flying around, lie face down and protect your head and your access arm.
4. Listen to your local emergency broadcast radio station for weather bulletins and instructions about what to do.
5. Do not leave the building or your shelter area until an “all clear” is advised.
6. If you are a dialysis patient and you have to miss dialysis, begin your emergency meal plan.

Terrorist Attack

The Department of Homeland Security (www.dhs.gov; 202.282.8001) has up-to-date information on preparedness for a terrorist attack.

Some Points For All Patients to Remember

1. Plan ahead. Have emergency supplies and extra supplies of your medicines and diet needs on hand.
2. Stay indoors and listen to your emergency broadcast radio station for instructions about what to do.
3. If you are an in-center hemodialysis patient and you are unable to get to your dialysis unit, contact police or Emergency Medical Services (EMS) to advise them of your need for assistance.
4. If you have to go to a shelter, tell the person in charge about your special needs as a kidney patient.
5. If you are a dialysis patient and you have to miss dialysis, begin your emergency meal plan.
6. If you eat out in restaurants, choose wisely and stay within your diet and fluid restrictions as much as possible. See the National Kidney Foundation’s brochure *Dining Out With Confidence: A Guide for Kidney Patients* for tips on how to make safe choices when eating out.

What if I have more questions?

If you have more questions, you should speak to the health care team at your dialysis unit or transplant center. You can also get more information by contacting your local National Kidney Foundation Affiliate. You may also find these free booklets, available from the Federal Emergency Management Agency (800.480.2520), helpful in your general disaster planning:

- *Your Family Disaster Plan*
- *Are You Ready?*

Helping Others in a Local or Distant Disaster

It is a natural human response to want to help others when a disaster strikes. Therefore, in addition to planning for your own needs as a patient following a disaster, you and your family and friends may want to know how you can help others left homeless or injured by the event. Following are some suggestions about how you can help, regardless of whether the disaster is local or in some distant place.

1. Do not attempt to send materials such as blankets, food, medicine, old clothes, etc.
2. Restrict travel to the disaster site. This clogs up the transportation system and interferes with organized relief activities, creating a kind of man-made second disaster.
3. Monetary donations are most effective when made through *established relief agencies*.
4. In the case of a local disaster, consult your dialysis unit or local National Kidney Foundation Affiliate for suggestions about other ways in which help can be provided.
5. Avoid using overburdened telephone communications systems unless absolutely necessary. Do not use the phone to inquire about the disaster or how you can help. Telephone communications are of crucial importance for those directly involved in the disaster relief effort. Listening to the radio can be one way to obtain helpful information.

Emergency Meal Planning For Kidney Patients

This meal plan is for you to use during an emergency or natural disaster when you may have to miss dialysis. It is important to follow a limited diet if dialysis has to be missed. A grocery list and three-day meal plan for emergency situations are included. [There are versions for people with CKD and people with both CKD and diabetes.] This diet is more restricted than your usual diet. The restricted plan is needed to control the buildup of things like potassium, phosphorous, urea and fluid, which can be life threatening if you miss several dialysis treatments due to the emergency.

What should I expect during an emergency situation?

Many things we depend on daily can be disrupted during an emergency situation. You may be without a telephone. Water and electricity may be cut off, preventing you from cooking your meals in the usual way. You may need to use cold or shelf-stable foods until the crisis is over. A full refrigerator will hold the temperature for about 48 hours (24 if it is half full). Open infrequently to preserve the cold temperature inside. Distilled water, disposable plates and utensils also should be kept on hand.

Will I need to change my diet if I am able to do peritoneal dialysis (PD)?

If you are able to maintain your current level of dialysis via machine or manual exchanges:

1. Maintain protein intake of 6 ounces or more each day.
2. You need not change the amount of potassium intake each day.
3. Continue to limit calcium and high-phosphorus products and maintain phosphate binder regimen.

If you are unable to perform as many exchanges as usual, then follow the basic guidelines as listed in this emergency guideline, including limiting fluid and potassium sources.



Is there anything else I should know about emergency meal planning?

1. It is **very important** to follow your diet according to the meal plan given.
2. Be careful when eating perishable foods to avoid food poisoning. If a jar or can is opened, do not keep it longer than four hours unless refrigerated.
3. Use disposable plates and utensils. Throw away after use.
4. Keep distilled water handy for mixing milk or juice. Mix small amounts of only four ounces at a time.
5. Limit intake of fluid to two cups or 16 ounces per day. Chew gum to help cope with thirst.
6. **Do not use** salt or salt substitute with your meals. Use salt-free foods when possible.
7. Avoid high-potassium foods. Limit the kinds and portion sizes of fruits and vegetables eaten to those listed in this booklet.
8. If you have diabetes, keep instant glucose tablets, sugar, hard candy, low-potassium fruit juices, or sugared soda pop on hand to treat low blood sugars. Avoid high-potassium fruit juices (orange juice).

Three-Day Emergency Grocery List for People on Dialysis

Item	Amount (per person)
Bread/Cereal (use 6–8 servings per day)	
White bread	1 loaf
Dry cereal, unsalted, sweetened or unsweetened puffed wheat or rice, shredded wheat	6 single-serve containers or 1 box
Vanilla wafers or graham crackers or unsalted crackers	1 box
Fruits/Juices (limit to 2–4 servings per day)	
Canned or sealed plastic container: applesauce, pears, peaches, pineapple, mandarin oranges, fruit cocktail	12 single-serve containers
Cranberry and apple juice or Juice boxes or pouches of premixed fruit punch or lemonade or Powdered drink mixes (fruit-flavored, fruit punch or lemonade)	2 single-serve containers or 2 packages or 1 canister
Fish/Meat (limit to 3 oz. per day; low sodium)	
Tuna, salmon, meat, turkey, chicken peanut butter, unsalted	6 small cans 1 jar
Milk (limit to ½ cup per day)	
Evaporated milk	3 small cans
Dry milk solids	2 packages
Sweets (use as desired to increase calories)	
Marshmallows	1 large bag
Jelly beans, sourballs, hard candies, clear mints	5 bags total
Honey	1 jar
White sugar	1 small bag
Jelly	1 jar
Fats (use 6 or more servings per day)	
Salad or cooking oil	1 bottle
Mayonnaise (perishable after opening)	Individual packets or 3 small jars
Margarine	1 pound
Other	
Distilled water	5 one-gallon jugs

Three-Day Emergency Meal Plan for People on Dialysis

The sample meal plans given provide about 40–50 grams of protein, 1500 mg sodium, 1500 mg potassium and less than 500 cc or 16 ounces of fluid for each of the three days. You may adjust selections to fit your individual taste. These meal plans are stricter than your normal kidney diet to keep waste products from building up in your blood during the emergency situation. Fluid is limited to less than 500 cc (2 cups or 16 ounces) each day to prevent you from swelling or having shortness of breath. If the disaster should continue for more than three days the meal plan can be repeated, beginning with Day 1.

CKD Diet—Day 1

Breakfast

½ cup milk prepared from dry milk and ½ cup distilled water, or ¼ cup evaporated milk with ¼ cup distilled water

1 single serving of cereal (½–¾ cup)

1 tablespoon sugar

½ cup pineapple (single serving)

Morning Snack

5 vanilla wafers

Honey or jelly as desired on wafers

10 sourballs

Lunch

2 slices white bread

¼ cup low-sodium tuna (open new can daily)

1 tablespoon margarine or mayonnaise (individual packet or open new jar daily)

½ cup pears (single serving)

Powdered drink mix with ½ cup distilled water

CKD Diet—Day 1 (cont'd)

Afternoon Snack

- 6 unsalted crackers
- Honey or jelly as desired on crackers
- 10 jelly beans

Dinner

- 2 slices white bread
- ½ cup (2 oz.) low-sodium chicken (open new can daily)
- 2 tablespoons margarine or mayonnaise (individual packet or open new jar daily)
- ½ cup peaches (single serving)
- ½ cup cranberry juice (from box or pouch)

Evening Snack

- 3 graham crackers
- Honey or jelly as desired on crackers
- 10 mints

CKD Diet—Day 2

Breakfast

- ½ cup milk prepared from dry milk and ½ cup distilled water, or mix ¼ cup evaporated milk with ¼ cup distilled water
- 1 single serving of cereal (½–¾ cup from box)
- 1 tablespoon sugar
- ½ cup mandarin oranges (single serving)

CKD Diet—Day 2 (cont'd)

Morning Snack

- 3 graham crackers
- Honey or jelly as desired on graham crackers
- 10 hard candies

Lunch

- 2 slices white bread
- ¼ cup low-sodium turkey (open new can daily)
- 1 tablespoon margarine or mayonnaise (individual packet or open new jar daily)
- ½ cup fruit cocktail (single serving)
- Powdered drink mix with ½ cup distilled water

Afternoon Snack

- 6 unsalted crackers
- Honey or jelly as desired on crackers
- 10 large marshmallows

Dinner

- 2 slices white bread
- ½ cup (2 oz.) low-sodium chicken (open new can daily)
- 2 tablespoons margarine or mayonnaise (individual packet or open new jar daily)
- ½ cup pineapple (single serving)
- ½ cup cranberry juice (from box or pouch)

Evening Snack

- 5 vanilla wafers
- Honey or jelly as desired (use on wafers)
- 10 sourballs

CKD Diet—Day 3

Breakfast

- ½ cup milk prepared from dry milk and ½ cup distilled water, or ¼ cup evaporated milk with ¼ cup distilled water
- 1 single serving of cereal (½–¾ cup from box)
- 1 tablespoon sugar
- ½ cup pears (single serving)

Morning Snack

- 6 unsalted crackers
- Honey or jelly as desired on crackers
- 10 large marshmallows

Lunch

- 2 slices white bread
- 2 tablespoons low-sodium peanut butter
- ½ cup peaches (single serving)
- Powdered drink mix with ½ cup distilled water

Afternoon Snack

- 3 graham cracker squares
- Honey or jelly as desired on crackers
- 10 mints

CKD Diet—Day 3 (cont'd)

Dinner

2 slices white bread

½ cup (2 oz.) low-sodium chicken (open new can daily)

2 tablespoons margarine or mayonnaise (individual packets or open new jar daily)

½ cup mandarin oranges (single serving)

½ cup cranberry juice (from box or pouch)

Evening Snack

5 vanilla wafers

Honey or jelly as desired (use on wafers)

10 sourballs



Three-Day Emergency Grocery List for People with Diabetes and CKD

Item	Amount (per person)
Bread/Cereal (use 6–8 servings per day)	
White bread	1 loaf
Dry cereal, unsalted, unsweetened puffed wheat or rice, shredded wheat	6 single-serve containers or 1 box
Vanilla wafers or graham crackers or unsalted crackers	1 box
Unsweetened Fruits/Juices (limit to 2–4 servings per day)	
Canned or sealed plastic container: applesauce, pears, peaches, pineapple, mandarin oranges, fruit cocktail	12 single-serve containers
Apple or cranberry juice	12 boxes or pouches
Sugar-free powdered drink mix (fruit-flavored, fruit punch or lemonade) or Sugar-free lemon lime or ginger ale soda	1 canister or 2 packages 6 cans
Fish/Meat (limit to 3 oz. per day; low sodium)	
Tuna, salmon, meat, turkey, chicken peanut butter, unsalted	6 small cans 1 jar
Milk (limit to ½ cup per day)	
Evaporated milk	3 small cans
Dry milk solids	2 packages
Artificial sweetener	
1 box of packets	
Sweets (use only to treat low blood sugar)	
Sour balls, hard candies	1 bag
Corn syrup	1 bottle
White sugar	1 small bag
Jelly	1 jar
Sugared lemon-lime or ginger ale soda. Limit use of soda to avoid fluid overload.	3 12-ounce cans
Fats (use 6 or more servings per day)	
Salad or cooking oil	1 bottle
Mayonnaise (perishable after opening)	Individual packets or 3 small jars
Margarine	1 pound
Other	
Distilled water	5 one-gallon jugs

Three-Day Emergency Meal Plan for People With Diabetes and CKD

The sample meal plans given provide about 40–50 grams of protein, 1,500 mg sodium, 1,500 mg potassium, 1,800 calories and less than 500 cc or 16 ounces of fluid for each of the three days. You may make changes within a diabetic exchange group to fit your individual taste. These meal plans are stricter than your normal renal and diabetic diet to keep waste products from building up in your blood during the emergency situation. Fluid is limited to less than 500 cc (two cups or 16 ounces) each day to prevent you from swelling or having shortness of breath. If the disaster should continue for more than three days the meal plan should be repeated.

Diabetes/CKD Diet—Day 1

Breakfast

½ cup milk prepared from dry milk and ½ cup distilled water, or mix ¼ cup evaporated milk with ¼ cup distilled water

1 single serving of cereal (½–¾ cup from box)

2 teaspoons artificial sweetener (optional)

½ cup pineapple (single serving)

Morning Snack

6 unsalted crackers

1 tablespoon margarine spread on crackers

Diabetes/CKD Diet—Day 1 (cont'd)

Lunch

2 slices white bread

¼ cup low-sodium tuna (open new can daily)

1 tablespoon margarine or mayonnaise
(individual packet or open new jar daily)

½ cup pears in unsweetened juice
(single serving)

½ cup sugar-free beverage

Afternoon Snack

5 vanilla wafers

Dinner

2 slices white bread

½ cup (2 oz.) low-sodium chicken (open new can daily)

2 tablespoons margarine or mayonnaise (individual packets
or open new jar daily)

½ cup peaches in unsweetened juice (single serving)

½ cup unsweetened apple juice (from box or pouch)

Evening Snack

3 graham cracker squares



Diabetes/CKD Diet—Day 2

Breakfast

½ cup milk prepared from dry milk and ½ cup distilled water, or mix ¼ cup evaporated milk with ¼ cup distilled water

1 single serving of cereal (½–¾ cup from box)

2 teaspoons artificial sweetener (optional)

½ cup unsweetened applesauce (single serving)

Morning Snack

5 vanilla wafers

Lunch

2 slices white bread

2 tablespoons low-sodium peanut butter

1 tablespoon margarine or mayonnaise (individual packet or open new jar daily)

½ cup mandarin oranges in unsweetened juice (single serving)

½ cup sugar-free beverage or soda

Diabetes/CKD Diet—Day 2 (cont'd)

Afternoon Snack

- 6 unsalted crackers
- 1 tablespoon margarine spread on crackers

Dinner

- 2 slices white bread
- ½ cup (2 oz.) low-sodium chicken (open new can daily)
- 2 tablespoons margarine or mayonnaise (individual packets or open new jar daily)
- ½ cup pineapple packed in unsweetened juice (single serving)
- ½ cup unsweetened apple juice (from box or pouch)

Evening Snack

- 3 graham cracker squares

Diabetes/CKD Diet—Day 3

Breakfast

- ½ cup milk prepared from dry milk and ½ cup distilled water, or ¼ cup evaporated milk with ¼ cup distilled water
- 1 single serving of cereal (½–¾ cup from box)
- 2 teaspoons artificial sweetener (optional)
- ½ cup pears packed in unsweetened juice (single serving)

Morning Snack

- 6 unsalted crackers
- 1 tablespoon margarine

Diabetes/CKD Diet—Day 3 (cont'd)

Lunch

2 slices white bread

¼ cup (2 oz.) low-sodium turkey (open new can daily)

1 tablespoon margarine or mayonnaise (individual packet or open new jar daily)

½ cup peaches in unsweetened juice (single serving)

½ cup sugar-free drink or soda

Afternoon Snack

5 vanilla crackers

Dinner

2 slices white bread

½ cup (2 oz.) low-sodium chicken (open new can daily)

2 tablespoons margarine or mayonnaise (individual packets or open new jar daily)

½ cup fruit cocktail (single serving)

½ cup cranberry juice (from box or pouch)

Evening Snack

3 graham crackers

Notes:

- Use 1 tablespoon peanut butter if you need a protein source at evening snack.
- Continue to monitor blood sugar.
- Follow your protocol for insulin reactions and be sure to keep enough supplies on hand. Best choices for treating low sugars are fluid-free items such as sugar, corn syrup, hard candy, instant glucose, and glucose tablets. Sugared soda and low-potassium juices may also be used, but must be counted as part of your 2-cup or 16-ounce daily limit.

Emergency Phone Numbers

Emergency Numbers

Fire	911
Police	911
Ambulance	911
Poison Control	_____
Red Cross	_____
Office of Emergency Services	_____
NKF Affiliate	_____

Medical Numbers

Your Doctor	_____
Your Dialysis Unit	_____
Back-Up Dialysis Unit	_____
Local Hospitals	_____
Insurance Carriers	_____

Pharmacy

Personal Contacts

Family Member/Friend	_____
Contact Person Outside Area	_____

Local Services

Plumber	_____
Electrician/Electric Co.	_____
Transportation Co.	_____
Telephone Repair	611

Patient Information Form

Complete the following information and keep this with you. If you need to go to another facility, you will need to have this information available. Also, make copies of your insurance ID cards and keep them with this booklet.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____

Emergency Contact

Name: _____

Relationship to You: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone _____

Your Medicare Number: _____

Other Insurance: _____

Policy Number: _____

Your Dialysis Center: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Head Nurse: _____

Your Nephrologist: _____

Phone: _____

Treatment Information Form

If you need to go to another facility or if your treatment information is destroyed or unavailable, this information will help your caregivers provide you with the appropriate treatment. Your nurse or doctor can help complete this form. It should be updated as changes occur.

Date Completed: _____

Primary ESRD Diagnosis: _____

Allergies: _____

Medications: _____

Pertinent Past Medical History: _____

Type of Treatment: Center Hemodialysis _____ CAPD _____

Home Hemodialysis _____ CCPD _____

Dialysis Prescription

Dialyzer: _____ Dialysate: _____

Hours per Run: _____ Times per Week: _____

Dry Weight: _____ Average Weight Gain: _____

Heparinization: _____

Access Site: _____ Needle Size: _____

Blood Flow Rate: _____

Re-Use: Yes _____ No _____ Lidocaine: Yes _____ No _____

HBsAg Status: _____ Blood Type: _____

Special Needs/Problems: _____

Peritoneal Dialysis Information

CAPD

System: _____

Number of Exchanges: _____ Fill Volume: _____

Estimated Dry Weight: _____

Exchange Information

Percentage of Dextrose (based on weight increase):

1–2 lbs. 1.5% _____ 3–5 lbs. 3.5% _____

2–3 lbs. 2.5% _____ 3–5 lbs. 4.25% _____

Low Calcium 3.5 mEq/L Dianeal: _____

Reg. Calcium 3.5 mEq/L Dianeal: _____

Dianeal PD 2 Magnesium 0.5: _____

Peritonitis

Is patient trained to do IP antibiotics? Yes _____ No _____

Does patient have antibiotic at home? Yes _____ No _____

Name of antibiotic: _____

Diabetic: Yes _____ No _____ Insulin: IP _____ SQ _____

Specify amount insulin used: SQ Dose _____

Evening Dose _____

Sliding scale for insulin (attach if available): _____

Usual dose of insulin per bag:

1.5% _____ 3.5% _____

2.5% _____ 4.25% _____

Peritoneal Dialysis Information

CCPD

Type of Cyclor: _____

Night Time Total Liters Delivered _____ Hours of Therapy: _____

Fill Volume per Cycle _____ Fill Time: _____

Dwell Time: _____ Drain Time: _____

Daytime Dwell: Yes _____ No _____ Daytime Volume: _____

Exchange Information

Percentage of Dextrose (based on weight increase):

1–2 lbs. 1.5% _____ 3–5 lbs. 3.5% _____

2–3 lbs. 2.5% _____ 3–5 lbs. 4.25% _____

Low Calcium 3.5 mEq/L Dianeal: _____

Reg. Calcium 3.5 mEq/L Dianeal: _____

Dianeal PD 2 Magnesium 0.5: _____

Peritonitis

Is patient trained to do IP antibiotics? Yes _____ No _____

Does patient have antibiotic at home? Yes _____ No _____

Name of antibiotic: _____

Diabetic: Yes _____ No _____ Insulin: IP _____ SQ _____

Specify amount insulin used: SQ Dose _____

Evening Dose _____

Sliding scale for insulin (attach if available): _____

Usual dose of insulin per bag:

1.5% _____ 3.5% _____

2.5% _____ 4.25% _____

Transplant Information

It's important to keep information about all your medications with you at all times. Fill in the following list and have extra copies at home, at work, in your car or anywhere else you might find helpful.

Transplant Medications List

Medication Name & Strength	Number of Times per Day	Quantity per Dose	When Taken	Special Instructions

Important Phone Numbers

Transplant Physician: _____

Transplant Coordinator: _____

Pharmacist: _____

Insurance: _____

United Network for Organ

Sharing (UNOS) 888.894.6361

www.unos.org for information if you are waiting for a transplant or need to obtain transplant care.

Emergency Resources for People with CKD

Help Getting Dialysis in an Emergency

The Forum of End Stage Renal Disease (ESRD) Networks: 804.794.2586 Nephron Information Center: www.dialysisunits.com

Planning for an Emergency: Brochures, Checklists, and Other Publications

National Kidney Foundation (NKF): 800.622.9010, www.kidney.org

- *Planning for Emergencies: A Guide for People With Chronic Kidney Disease*
- *Planning for Emergencies: A Guide for Dialysis Facilities*
- Fact Sheets: *Emergency Meal Planning, Emergency Meal Planning for Diabetics*

American Association of Kidney Patients (AAKP): 800.749.2257, www.aakp.org

- Emergency Guide
- Patient Emergency Information sheet

Centers for Medicare and Medicaid Services (CMS): 800.MEDICARE, www.medicare.gov

- *Preparing for Emergencies: A Guide for People on Dialysis*, Publication #CMS 10150 (available in Spanish)

Federal (Department of Health and Human Services) emergency checklist: www.pandemicflu.gov/planguide/emergencycontacts.pdf

The Nephron Information Center: www.dialysisunits.com

- Meal plan for disasters and emergencies

Helpful Organizations in an Emergency

American Red Cross: 202.303.4498; www.redcross.org/index.html

Federal Emergency Management Agency (FEMA): 800.621.FEMA (3362), 800.462.7585 (TTY); www.fema.gov

Food and Drug Administration (FDA) U.S. hurricane site: 888.INFO.FDA (888.463.6332); www.fda.gov/cdrh/emergency/hurricane.html

National Hurricane Center: www.nhc.noaa.gov

National Weather Service: www.weather.gov

U.S. Department of Housing and Urban Development: 202.708.1112, 202.708.1455 (TTY); www.hud.gov/katrina/index.cfm

Emergency Grant Information

American Kidney Fund: 800.638.8299, 301.881.3352, 866.300.2900 (Español); www.akfinc.org

AAKP: 800.749.2257, 813.636.8100; www.aakp.org

American Red Cross: 202.303.4498; www.redcross.org/index.html

Caregiver Emergency Respite Fund: 317.713.2979; www.caregiveremergencyrespitefund.org

FEMA: 800.621.FEMA (3362), 800.462.7585 (TTY); www.fema.gov

NKF: 800.622.9010, 212.889.2210; www.kidney.org

Kidney Disease Organizations

NKF: 800.622.9010, 212.889.2210; www.kidney.org

AAKP: 800.749.2257, 813.636.8100; www.aakp.org

American Kidney Fund: 800.638.8299, 301.881.3352; www.akfinc.org

The Forum of ESRD Networks: 804.794.2586; www.esrdnetworks.org

Mental Health Resources

American Association of Retired Persons (AARP):
888.687.2277; www.aarp.org/griefandloss

American Academy of Child and Adolescent Psychiatry:
202.966.7300; www.aacap.org

Anxiety Disorders Association of America: 301.231.9350;
www.adaa.org

Centers for Disease Control and Prevention (CDC):
800.CDC.INFO, 888.232.6348 (TTY); www.bt.cdc.gov/mentalhealth

Department of Health and Human Services:
800.789.2647; www.mentalhealth.samhsa.gov/disasterrelief

Depression and Bipolar Support Alliance: 800.826.3632;
www.dbsalliance.org

GriefNet.org: www.griefnet.org

Growth House: www.growthhouse.org

National Association of the Mentally Ill: 800.950.NAMI
(6264); www.NAMI.org

National Institute of Mental Health: 866.615.6464;
www.nimh.nih.gov

NKF's *Family Focus* Summer 2006 issue:
www.readfamilyfocus.org

National Mental Health Association: 800.969.NMHA
(6642); www.nmha.org

Post-Traumatic Stress Disorder Alliance:
www.ptsdalliance.org

Stress Anxiety and Depression Resource Center:
www.stress-anxiety-depression.org

U.S. Department of Health and Human Services:
www.hhs.gov/emergency/index.shtml or
www.mentalhealth.samhsa.gov/disasterrelief/psa.aspx

U.S. Department of Veterans' Affairs—National Center for
Post-Traumatic Stress Disorder: www.ncptsd.va.gov

Symbology Background

Federal, state and local agencies worked together under the support of the Federal Geographic Data Committee's (FGDC) Homeland Security Working Group to develop the symbology used on the cover of this guide. The FGDC has been tasked to develop a standard set of symbols at all levels of need (i.e., national, state, local and incident). Symbols and their definitions have been developed for Incidents, Natural Events, Operations and Infrastructures to provide immediate and general understanding of situations and to work across all disciplines and cultures. To further distinguish between the four categories, frame shapes or border patterns (diamonds, circles and rectangles) are used to visually classify the symbols into their respective groups (Incidents, Natural Events, Operations and Infrastructures). The symbols shown are a work-in-progress. The official symbol set will not be released until the standards process is complete.

Key to symbols on cover (l to r):

Row 1—avalanche; earthquake; landslide; volcanic eruption; drought; flood.

Row 2—sand dust storm; snow; thunderstorm; tornado; hurricane; tsunami.

Row 3—EMT station; health department facility; hospital; medical facilities, outpatient; pharmacies.

Row 4—emergency collection evaluation point; emergency shelters; other water supply location; fire station; police.

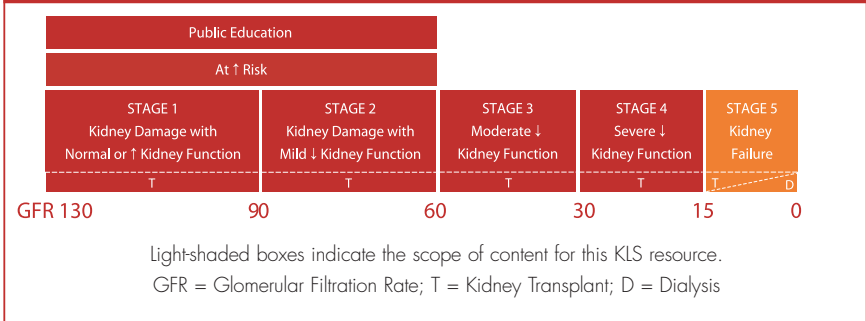
Row 5—bomb threat; poisoning; fire incident; residential fire; smoke; special needs fire.

**Diamond shapes represent incidents/natural events.
Circular shapes represent operations.**

More than 20 million Americans—one in nine adults—have chronic kidney disease, and most don't even know it. More than 20 million others are at increased risk. The National Kidney Foundation, a major voluntary health organization, seeks to prevent kidney and urinary tract diseases, improve the health and well-being of individuals and families affected by these diseases, and increase the availability of all organs for transplantation. Through its 47 affiliates nationwide, the foundation conducts programs in research, professional education, patient and community services, public education and organ donation. The work of the National Kidney Foundation is funded by public donations.

Kidney Learning Systems (KLS)[™]

A Curriculum for CKD Risk Reduction and Care



Made possible through an educational grant from **AMGEN**[®]



National Kidney Foundation
30 East 33rd Street
New York, NY 10016
800.622.9010

www.kidney.org