

# PLANNING FOR EMERGENCIES

## *A Guide for People With Chronic Kidney Disease*



National  
Kidney  
Foundation™

[www.kidney.org](http://www.kidney.org)

## About the Information in this Booklet

Did you know that the National Kidney Foundation offers guidelines and commentaries that help your healthcare provider make decisions about your medical treatment? The information in this booklet is based on those recommended guidelines.

## Stages of Kidney Disease

There are five stages of kidney disease. They are shown in the table below. Your healthcare provider determines your stage of kidney disease based on the presence of kidney damage and your glomerular filtration rate (GFR), which is a measure of your kidney function. Your treatment is based on your stage of kidney disease. Speak to your healthcare provider if you have any questions about your stage of kidney disease or your treatment.

STAGES OF KIDNEY DISEASE		
Stage	Description	Glomerular Filtration Rate (GFR)*
1	Kidney damage (e.g., protein in the urine) with normal GFR	90 or above
2	Kidney damage with mild decrease in GFR	60 to 89
3	Moderate decrease in GFR	30 to 59
4	Severe reduction in GFR	15 to 29
5	Kidney failure	Less than 15

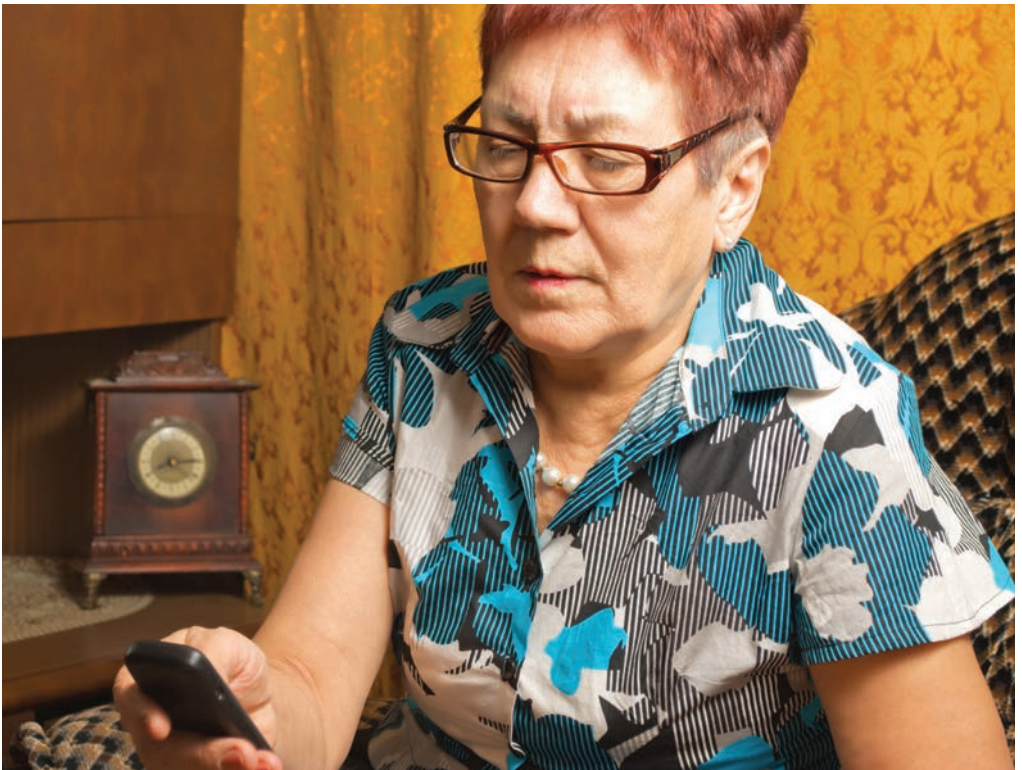
\*Your GFR number tells your doctor how much kidney function you have. As chronic kidney disease progresses, your GFR number decreases.

## TABLE OF CONTENTS

Planning for emergencies . . . . .	4
How can I plan ahead for an emergency? . . . . .	5
What should in-center hemodialysis patients do if a natural disaster occurs in their area? . . . . .	7
Will my dialysis change during an emergency? . . . . .	7
What if an emergency happens when I am dialyzing at the unit? . . .	7
Suppose no one is available to help me get off the machine? . . . .	8
What should home hemodialysis patients do to prepare for an emergency? . . . . .	8
What should patients who are on CAPD or CCPD do to prepare for an emergency? . . . . .	9
What should transplant recipients do to prepare for an emergency? . . . . .	10
What should people with diabetes do to prepare for an emergency? . . . . .	11
What kind of diet should dialysis patients follow in an emergency? . . .	11
Are there special considerations in different kinds of disasters? . . .	13
What if I have more questions? . . . . .	18
Helping others in a local or distant disaster . . . . .	18
Emergency meal planning for kidney patients . . . . .	19
What should I expect during an emergency situation? . . . . .	19
Will I need to change my diet if I am able to do PD? . . . . .	20
Is there anything else I should know about emergency meal planning? . . . . .	21
Three-day emergency grocery list for people on dialysis . . . . .	22
Three-day emergency meal plan for people on dialysis . . . . .	23
Three-day emergency grocery list for people with diabetes and CKD . . . . .	28
Three-day emergency meal plan for people with diabetes and CKD . . . . .	29
Emergency phone numbers . . . . .	34
Patient information form . . . . .	35
Treatment information form . . . . .	36
Peritoneal dialysis information . . . . .	37
Transplant information . . . . .	39
Emergency resources for people with CKD . . . . .	40

## Planning for emergencies

The delivery of healthcare 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 place where you can easily find it. Leave copies of the guide at your workplace and at home and take it with you when you travel. Tell your family members where it is.



## 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 22 and 28.) 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. The kidneys help keep potassium at a normal level in your body. If the kidneys are not working properly, potassium levels can be too high or too low and that can be dangerous.)
2. Ask a friend or relative in another area to be your contact person. In an emergency, you may not be able to make telephone calls in your 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 service 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 send a text message if your cell phone has this feature. Text messaging may work when audio is not working. 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 35–39 of this booklet.) Update the information often. If needed, ask your healthcare staff to help you complete these forms. Include insurance information among these necessary forms.

4. You should get and wear a medical emblem. This has vital information about your medical condition and treatment, and alerts medical staff to your special needs. If you need help in getting one, ask your social worker.
5. Keep the following emergency supplies in a safe 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 needs can be met by using kitty litter, fireplace ashes or sawdust.
  - An emergency phone list (see page 34).

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 read it carefully.

## 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 office 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 following an emergency diet. (See “Emergency meal planning for kidney patients” starting on page 19.)

## 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 best 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 staff. 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 healthcare 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, and 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 5–6), 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, so they will be aware of your need to get service restored as soon as possible.
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 other 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 (see #3 on the previous page).
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 below) 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 28 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 have diabetes, see page 28 for 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 also help.

5. Many of the ideas in this booklet can be adapted for you.
6. Ask your transplant healthcare team about precautions, additional medications, and preparations 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 people with diabetes 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 website 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 you are unable to receive dialysis. For more details, see “Emergency meal planning for kidney patients” starting on page 19.

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. If you store food and water to plan for a disaster, replace often 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 half a cup per day. Use dry milk solids, evaporated milk, ultraprocessed milk or powdered nondairy creamer mixed with water, if necessary, to equal half a cup. (Use the 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](http://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 using 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 lessen the need for washing dishes.
12. Store a hand-operated can opener with the canned goods.
13. Wrap food scraps securely for disposal to reduce 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 dialysis unit when the blizzard hits, stay there 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 a shelter, tell the person in charge about your special needs as someone with kidney disease, including your need for transportation to a dialysis center.

## 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. Find 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 have to leave 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 flashlight in a place where you can find it.
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 leave your home or the dialysis unit:
  - Stay out of already flooded areas and places 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 use peritoneal dialysis, be sure your access site stays clean 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 someone with kidney disease.
4. If you have kidney disease 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 leave your house 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. Find out about 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 someone with kidney disease.
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 someone with kidney disease.
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 announced.
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](http://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 receive in-center hemodialysis 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 someone with kidney disease.
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 healthcare team at your dialysis unit or transplant center. You can also get more information by contacting your local National Kidney Foundation. You may also find this free booklet, available from the Federal Emergency Management Agency (800.480.2520), helpful in your general disaster planning:

- *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. Refrain from traveling 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. Giving money is most effective when done through established relief agencies.
4. In the case of a local disaster, consult your dialysis unit or local National Kidney Foundation for suggestions about other ways to help.

5. Avoid using telephone systems unless absolutely necessary. Do not use the phone to find out 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 chronic kidney disease (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, phosphorus, 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 upon on a daily basis may not be available 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). Limit the times you open it 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 keep your current level of dialysis using your machine or manual exchanges:

1. Keep protein intake to 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 keep the phosphate-binder regimen.

If you cannot 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 foods that may spoil 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 (available at your local supermarket) 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 substitutes with your meals. Use salt-free foods, whenever 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)
<b>Bread/Cereal (use 6–8 servings per day)</b>	
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
<b>Fruits/Juices (limit to 2–4 servings per day)</b>	
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
<b>Fish/Meat (limit to 3 oz. per day; low sodium)</b>	
Tuna, salmon, meat, turkey, chicken, peanut butter (unsalted)	6 small cans, 1 jar
<b>Milk (limit to ½ cup per day)</b>	
Evaporated milk	3 small cans
Dry milk solids	2 packages
<b>Sweets (use as desired to increase calories)</b>	
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
<b>Fats (use 6 or more servings per day)</b>	
Salad or cooking oil	1 bottle
Mayonnaise (perishable after opening)	Individual packets or 3 small jars
Margarine	1 pound
<b>Other</b>	
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, 1,500 mg sodium, 1,500 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 personal 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 continues for more than three days, the meal plan can be repeated, beginning with Day 1.

## Chronic kidney disease 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

## Chronic kidney disease diet—Day 1 (cont'd)

### Lunch

2 slices white bread

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

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

½ cup pears (single serving)

Powdered drink mix with ½ cup distilled water

### 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 (single 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)

### 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 (single 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

## **CKD diet—Day 2** (cont'd)

### **Dinner**

2 slices white bread

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

2 tablespoons margarine or mayonnaise (single 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 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 pears (single serving)

### **Morning snack**

6 unsalted crackers

Honey or jelly as desired on crackers

10 large marshmallows

## CKD diet—Day 3 (cont'd)

### 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 crackers

Honey or jelly as desired on crackers

10 mints

### Dinner

2 slices white bread

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

2 tablespoons margarine or mayonnaise (single 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)
<b>Bread/Cereal (use 6–8 servings per day)</b>	
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
<b>Unsweetened Fruits/Juices (limit to 2–4 servings per day)</b>	
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
<b>Fish/Meat (limit to 3 oz. per day; low sodium)</b>	
Tuna, salmon, meat, turkey, chicken	6 small cans
peanut butter, unsalted	1 jar
<b>Milk (limit to ½ cup per day)</b>	
Evaporated milk	3 small cans
Dry milk solids	2 packages
<b>Artificial sweetener</b>	1 box of packets
<b>Sweets (use only to treat low blood sugar)</b>	
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
<b>Fats (use 6 or more servings per day)</b>	
Salad or cooking oil	1 bottle
Mayonnaise (perishable after opening)	Individual packets or 3 small jars
Margarine	1 pound
<b>Other</b>	
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 (single 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 (single packet or open new jar daily)
- ½ cup mandarin oranges in unsweetened juice (single serving)
- ½ cup sugar-free beverage or soda

### Afternoon snack

- 6 unsalted crackers
- 1 tablespoon margarine spread on crackers

## Diabetes/CKD diet—Day 2 (cont'd)

### Dinner

2 slices white bread

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

2 tablespoons margarine or mayonnaise (single 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 (single 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 (single 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 \_\_\_\_\_

Local NKF \_\_\_\_\_

### Medical numbers

Your doctor \_\_\_\_\_

Your dialysis unit \_\_\_\_\_

Back-up dialysis unit \_\_\_\_\_

Dialysis provider emergency # \_\_\_\_\_

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 (for some telephone companies)

## Patient information form

Complete the following information and keep this with you. If you need to go to another center, 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 kidney doctor: \_\_\_\_\_

Phone: \_\_\_\_\_

## Treatment Information Form

If you need to go to another center 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 (continued)

### CCPD

Type of cyclor: \_\_\_\_\_

Nighttime 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 doctor: \_\_\_\_\_

Transplant coordinator: \_\_\_\_\_

Pharmacist: \_\_\_\_\_

Insurance: \_\_\_\_\_

Contact United Network for Organ Sharing (UNOS) at 888.894.6361 or **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 National Forum of End Stage Renal Disease (ESRD) Networks: 715.354.3735; [www.esrdnetworks.org/resources/disaster-planning](http://www.esrdnetworks.org/resources/disaster-planning)

Nephron Information Center: [www.dialysisunits.com](http://www.dialysisunits.com)

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

National Kidney Foundation (NKF): 800.622.9010, [www.kidney.org](http://www.kidney.org), [www.kidney.org/help](http://www.kidney.org/help)

- *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](http://www.aakp.org)

- Emergency Guide
- Patient Emergency Information sheet

Centers for Medicare and Medicaid Services (CMS): 800.633.4227, [www.medicare.gov](http://www.medicare.gov)

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

The Nephron Information Center: [www.dialysisunits.com](http://www.dialysisunits.com)

- Meal plan for disasters and emergencies



## Helpful Organizations in an Emergency

American Red Cross: 202.303.4498; **[www.redcross.org](http://www.redcross.org)**

Federal Emergency Management Agency (FEMA):  
800.621.FEMA (3362), 800.462.7585 (TTY); **[www.fema.gov](http://www.fema.gov)**

Food and Drug Administration (FDA) U.S. hurricane site:  
888.INFO.FDA (888.463.6332); **[www.fda.gov/newsevents/  
publichealthfocus/ucm317232.htm](http://www.fda.gov/newsevents/publichealthfocus/ucm317232.htm)**

National Hurricane Center: **[www.nhc.noaa.gov](http://www.nhc.noaa.gov)**

National Weather Service: **[www.weather.gov](http://www.weather.gov)**

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

## Emergency Grant Information

National Kidney Foundation: 800.622.9010, 212.889.2210;  
**[www.kidney.org](http://www.kidney.org)**

American Kidney Fund: 800.638.8299, 301.881.3352,  
866.300.2900 (Español); **[www.akfinc.org](http://www.akfinc.org)**

AAKP: 800.749.2257, 813.636.8100; **[www.aakp.org](http://www.aakp.org)**

American Red Cross: 202.303.4498; **[www.redcross.org](http://www.redcross.org)**

FEMA: 800.621.FEMA (3362), 800.462.7585 (TTY);  
**[www.fema.gov](http://www.fema.gov)**

## Kidney Disease Organizations

NKF: 800.622.9010, 212.889.2210; **[www.kidney.org](http://www.kidney.org)**

AAKP: 800.749.2257, 813.636.8100; **[www.aakp.org](http://www.aakp.org)**

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

The National Forum of ESRD Networks: 715.354.3735;  
**www.esrdnetworks.org**

### Mental Health Resources

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

Anxiety and Depression Association of America:  
240.485.1001; **www.adaa.org**

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

Substance Abuse and Mental Health Services Administration  
(SAMHSA) 800.985.5590; **http://disasterdistress.samhsa.gov**

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

GriefNet.org: **www.griefnet.org**

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

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

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

Mental Health America: 800.969.6642;  
**www.mentalhealthamerica.net**

Post-Traumatic Stress Disorder Alliance:  
**[www.ptsdalliance.org](http://www.ptsdalliance.org)**

Stress Anxiety and Depression Resource Center:  
**[www.stress-anxiety-depression.org](http://www.stress-anxiety-depression.org)**

U.S. Department of Veterans' Affairs—National Center for  
Post-Traumatic Stress Disorder: **[www.ptsd.gov](http://www.ptsd.gov)**

The **National Kidney Foundation** is the leading organization in the U.S. dedicated to the awareness, prevention, and treatment of kidney disease for hundreds of thousands of healthcare professionals, millions of patients and their families, and tens of millions of Americans at risk.

Help fight kidney disease.

Learn more at **[www.kidney.org](http://www.kidney.org)**



National  
Kidney  
Foundation™

30 East 33rd Street  
New York, NY 10016  
800.622.9010

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Awareness. Prevention. Treatment.

