



**KEYS TO
A LONG LIFE**

Staff:
Initial and date
when information
is provided

Patient Interest Checklist #1

End-stage Renal Disease

Name _____ Date _____

I would like to know more about...

My medical condition:

- What do healthy kidneys do?
- How do kidneys control blood pressure?
- Why did *my* kidneys fail, and will they ever recover?
- What is *anemia*, and how can it be treated?
- What kinds of problems can my disease cause for me later on?
- What is *hemodialysis*, and can it work for me?
- What is *peritoneal dialysis*, and can it work for me?
- What is a *cycler*, and can it work for me?
- What is a *vascular access*, and why might I need one?
- How can I do dialysis at home?
- What is a *kidney transplant*, and can it work for me?
- What happens to me if I choose *no* treatment?
- Will I still be able to take my usual medicines and vitamins?
- Will I feel different after I start treatment?
- What can I do to stay as healthy as possible?
- How do I decide which treatment is right for me?

My relationships with family and friends:

- How can my family and I make it through this health change?
- Can kidney failure and treatment affect my sex life?
- Will I still be able to father/bear children?
- What should I tell my family and friends about my condition?

My work/school/insurance:

- How much will my treatment cost, and how will I pay for it?
- What is *Medicare*, and how can it help me?
- When I start treatment, will I be able to do my usual activities?
- Can dialysis be scheduled around my work/school hours?
- How might kidney disease affect my employment or schooling?
- Should I tell my employer about my kidney disease?
- Who can help me with insurance or work/school questions?

My eating:

- Can bad eating habits cause kidney failure? Did they cause mine?
- How can eating less of certain foods help me stay healthier?
- When will my appetite get better?
- Why does everything I eat taste strange to me?
- Who can help me with questions about what to eat or drink?



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My future:

- How can I still have a long life with kidney failure?
- What kinds of health changes can I expect in the future?
- What can I do to have a happy life?
- Should I change my long-term plans?

My feelings:

- Do most people with kidney failure feel the way I do?
- What can I do to help myself feel better and increase my energy?
- How will my body look different after I start treatment?
- Will I ever feel less _____ than I do now?
- Will I ever feel more _____ than I do now?
- Who can I talk to if I feel angry, sad, or depressed?

My responsibilities:

- What will be *my* role in my treatment?
- What will be *my* role in my blood pressure control?
- What will happen to my health if I drink or smoke?
- Why should I avoid drugs not prescribed for me?

My lifestyle and everyday activities:

- How can I find a safe/accessible place to live?
- How will I get to my treatments and back?
- Will I still be able to drive a car?
- What can I do to sleep better than I do now?
- Why is exercise important for me?
- What kinds of exercise can I do safely?

My relationships with staff:

- Who are the people who will help me with my treatments?
- Who is the best person to talk to about _____ ?

Other:

- Right now, I am *most* concerned about _____

