May 2026 DCL Newsletter

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THE MEDICARE IN-CENTER HEMODIALYSIS SURVEY WANTS TO HEAR FROM YOU!

NOW WITH A SHORTER SURVEY!

COMING IN MAY 2026

If you receive the survey by mail or phone, please take a few minutes to share your experience.

HIGHLIGHTS:

Fewer questions = Less time to complete!
Same important opportunity to share your experience!
Every response helps improve dialysis care for everyone!
Your participation is voluntary & your answers are private.

If you have questions about this survey, please call our survey vendor, at Press Ganey

Dialysis Center OF LINCOLN

(844) 273-3513

CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

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May is Nurses Month! Thank Your Dialysis Nurse's for all that they do for you!!

Things You Can Do For Your Nurse's...

- Give a High Five
- Bump Elbows
- Share your Favorite Recipe
- Write a Thank You Note

- Color a Picture
- Tell All Of Your Nurse's THANK YOU!

Have More Time to Plant Flowers... Try Dialysis At Home?

- Create Your Own Schedule
- Have More Time at Home and with Family
- Less Meds
- Less Dietary Restrictions
- No Need to Leave the House
- More Time for School and Work
- Feel Better
- More Comfortable

Talk to your Social Worker to get more information!

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10 Antioxidant Foods for the Kidney Diet

Fresh, colorful and kidney-friendly fruits and vegetables aren't just good; they're good for people with chronic kidney disease (CKD). Powerful compounds called antioxidants found in certain foods may help protect you against other diseases such as cancer, heart disease, Alzheimer's and Parkinson's disease.

Antioxidants neutralize harmful molecules in your body called free radicals, the normal yet damaging byproducts created when your body produces energy, fights infection or is exposed to toxins. Antioxidant vitamins A, C and E available in supplement form can be harmful to people on dialysis, though many take a renal vitamin supplement that contains 60-100 mg of vitamin C per day as recommended by their doctor.

One of the best ways to get antioxidants is through food, antioxidants, which include:

Red/Purple = Anthocyanins, polyphenols, resveratrol

Red = Lycopene

Orange = Beta-carotene

Orange/Yellow = Cryptoxanthin, flavonoids

Yellow/Green = Lutein, zeaxanthin

Green = Indoles, sulforaphanes, lutein

White/Green = Allyl sulphides, quercetin

Here are 10 colorful, high-antioxidant foods for the kidney diet.

1. Cranberries

Cranberries add a distinctive zing to sweet breads, muffins and other recipes like Easy Cranberry Salad. Enjoy dried cranberries sprinkled on a salad or on their own as a snack. You can also drink cranberry juice or cranberry juice cocktail.

2. Plums

Black plums are higher in antioxidants than red. Look for plums that have a fairly firm to slightly soft feel. Pit and freeze plums and add them to smoothies, puree them for Quick Fruit Sorbet or try Old-Fashioned Plum Cake.

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10 Antioxidant Foods for the Kidney Diet

3. Blueberries

Blueberries are classic additions to pancakes and blueberry muffins. Buy them frozen to use in smoothies or in a Blueberry Peach Crisp. When they're in season, enjoy a bowl of fresh blueberries.

4. Blackberries/Raspberries

Sprinkle fresh berries on your cereal or oatmeal, use frozen ones in smoothies or bake them into pies such as More Momma's Blackberry Mountain Pie. Use berries in unexpected ways to bring out the flavor of meats, including this recipe for Raspberry Wings.

5. Garlic

This tiny antioxidant powerhouse is available in fresh, bottled, minced or powdered form to use in Garlic Chicken with Balsamic Vinegar or another savory dish. Roasting a head of garlic mellows its flavor and makes a soft, delicious spread for bread.

6. Apples

Apples have more antioxidants with peel on, so just wash and enjoy the perfect snack, or chop and add to chicken or tuna salad. You can also bake them in a pie, cobbler or Apple Crisp.

7. Strawberries

Add fresh strawberries to cereal and salads or combine them with angel food cake and whipped topping for a summertime dessert. Fresh or frozen strawberries pump up antioxidant power in smoothies and desserts, from Strawberry Mousse to Red, White and Blue Salad.

8. Red Bell Peppers

Eat red bell peppers raw with dip as a snack or mix them into tuna or chicken salad and serve on crackers or bread. Roast peppers and use them as a topping on sandwiches, chop them for an omelet or add them to kabobs on the grill.

9. Red cabbage

Ounce for ounce, cooked cabbage contains more antioxidants than raw. Steam, boil or microwave red cabbage for a nutritious side dish. It's also good in main dishes like Cabbage Rolls with Turkey. Raw red cabbage can be used for coleslaw or Cabbage Salad.

10. Red leaf lettuce

The red or purple color that distinguishes red leaf lettuce from the ordinary kind contains small amounts of the powerful antioxidants beta-carotene and lutein.

Bonus: Adding spices such as cinnamon, curry powder, pepper, oregano and turmeric to food adds more than flavor; they are concentrated sources of antioxidants and can contribute to your intake, even when consumed in small amounts.

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We Celebrate You...

National Donate Life Month, observed each April, is dedicated to raising awareness about organ, eye, and tissue donation and honoring those who have given or received these life-changing gifts. For patients living with chronic kidney disease (CKD) and end-stage renal disease (ESRD), this month is a beacon of hope. The possibility of a transplant represents a chance for renewed health, independence, and a fuller life. As we reflect on National Donate Life Month, we recognize the powerful impact that donors have—not only extending lives, but also restoring dreams and possibilities for patients and their families. Increased organ donation means more hope, more second chances, and a reminder of the deep compassion that connects us all. While National Donate Life Month is formally observed in April, we honor and support donors and recipients each and every day, advocating for their needs and celebrating the gift of life throughout the year. Together, we help transform hope into reality.

Kidney Donation

Living donation happens when someone gives an organ or part of an organ to another person who needs it. In kidney transplantation, a kidney from a living or deceased donor is put into a patient whose kidneys do not work well anymore. People can donate a kidney and still stay healthy because you only need one working kidney. Living kidney donation gives more choices for people who need a transplant. It can also help them get a kidney faster and improve their health in the long run.

The Need

If patients have to wait a long time for organs from deceased donors, living donors are a good option. Family members, friends, loved ones, or even strangers can be living donors. People who need kidney or liver transplants and are able to get a living donor may receive strong, healthy organs much sooner—sometimes within a year.

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Kidney Donation & Transplant: Fast Facts

Waiting List **90,000+** Americans waiting for a kidney transplant **86%** of transplant patients need a kidney **Every 8 min** a new person is added to the list	**Wait Time** **3–5 Years** is the typical wait for a deceased donor kidney	**Living Donation** **Shorter Wait** Living donation can reduce wait to under 1 year	**Who Can Donate?** Family, friends, or any healthy adult (18+) after medical screening

When is a kidney donation needed?

A kidney transplant is a well-known treatment for people whose kidneys have stopped working (called end-stage renal disease, or ESRD). When someone's kidneys only work a little, they need either dialysis or a new kidney to stay alive.
Kidney failure can happen because of diseases like diabetes, polycystic kidney disease (PKD), high blood pressure that isn't controlled, or chronic glomerulonephritis. This last condition causes the tiny filters in your kidneys, called glomeruli, to become scarred.

How does living donation work?

People can live with just one kidney, so someone can donate a kidney to another person. Most people wait three to five years for a kidney from someone who has died. Getting a kidney from a living person means you might not have to wait as long or spend as much time on dialysis—sometimes less than a year. After donating, the person's remaining kidney gets bigger and works harder to make up for the missing one, doing the job of two healthy kidneys.

Who can be a living donor?

Family members are often a good match for living kidney donation, but people who aren't related can also be great donors. If someone wants to donate a kidney, they need a full medical check-up, must be at least 18 years old, and should be in good physical and mental health. The rules about who can donate may be different at each hospital. The Kidney Transplant Learning Center has helpful resources for anyone wanting to ask for a living donor or help a loved one become a living donor champion.

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Donate Life Living Donor Pathway

In Fall 2025, Donate Life America (DLA) started a two-year national test program with the National Kidney Registry (NKR) to help more people donate living kidneys. This builds on DLA's National Donate Life Registry, which has helped millions sign up to give organ, eye, and tissue donations.
Kidney disease affects over 37 million Americans, and more than 100,000 are currently waiting for transplants—most need a kidney.
The new Donate Life Living Donor Pathway aims to create a trusted system for people who want to donate a kidney while they are alive. It offers easy access to information, connects donors to transplant centers, and gives mentorship support during the process.
Anyone aged 18-80 who already signed up as a deceased donor can also choose to become a living kidney donor through this pathway. Living kidney donation saves lives, helps patients get kidneys faster, and leads to better results for those who receive them. This program moves the country closer to having more donors and makes sure people who want to help have the support and facts they need.

How can my donor kidney help?

Every eight minutes, someone is added to the national transplant waiting list, and about 86% of these people need a kidney. Kidneys from living donors usually work for 12 to 20 years, while kidneys from deceased donors last about 8 to 12 years. People who get a kidney transplant before starting dialysis—especially kids and teenagers with severe kidney disease—have many benefits.
The Mayo Clinic says early transplants can help patients avoid kidney rejection, live longer, enjoy better quality of life, pay less for treatment, and skip the problems that come with dialysis.
After getting a kidney transplant, most people stay in the hospital for a few days up to a week. To prevent problems, they have to take medicine for the rest of their lives.

For More Information

For further information regarding living donation types, kidney paired donation, donor eligibility, associated risks, statistics, frequently asked questions, organ, eye, and tissue donor registration, deceased donation procedures, or ways to support transplantation initiatives, please visit the website or consult the Help Center at **https://donatelife.net/about/help-center/.**

For any questions about transplants or donor options, contact your nephrologist or dialysis team—they can provide information and support as needed.

References: TransplantLiving.org, UNOS.org, OPTN.transplant.HRSA.gov, and Kidney.org.

DONATE LIFE® America

Donate Life America educates, inspires and activates the public to say yes to registering their decision to be an organ, eye and tissue donor.

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Understanding Phosphorus and Potassium in Kidney Disease

Each spring, the American Association of Kidney Patients (AAKP) highlights the importance of understanding phosphorus and potassium levels in kidney disease. For example, April 5th (or 4/5) of each year is known as National Phosphorus Awareness Day. This is to highlight the importance of keeping the phosphorus level less than 4.5 mg/dL. Avoiding hyperphosphatemia (or high levels of phosphorus) in kidney disease is important! The normal blood phosphorus range is 2.5 – 4.5 mg/dL.

Similarly, May 1st (or 5/1) of each year is known as National High Potassium Awareness Day. According to AAKP, the normal blood potassium range is 3.5 – 5.0 mEq/L. People will be notified by the healthcare provider who ordered the blood work if their potassium level is not within the normal blood potassium range. As with phosphorus, it is important to avoid high levels of potassium, known as hyperkalemia. Potassium is an important mineral for heart function and therefore it is just as important to avoid low levels of potassium as well.

Phosphorus

Phosphorus is a natural occurring mineral that is essential for life. Phosphorus works with calcium to build strong bones and teeth. Phosphorus is also important for heart health, energy production, and helps nerves and muscles to work properly.

The kidneys help to control phosphorus (and calcium) levels and keep both levels in healthy ranges. Hyperphosphatemia is the medical term used when the blood phosphorus level gets too high or above 4.5 mg/dL (hyper = high, phosphat = phosphorus & emia = blood). Hyperphosphatemia can happen when the kidneys are not filtering (or working) properly with acute kidney injury, chronic kidney disease, or kidney failure. Usually there are no symptoms associated with hyperphosphatemia. Instead, someone might learn they have hyperphosphatemia from their lab results.

Hyperphosphatemia can cause low calcium levels in the blood and bones. The medical term for low calcium levels in the blood is hypocalcemia (hypo = low, calc = calcium & emia = blood). Low levels of calcium in the bones is a risk factor for mineral bone disorder, which can be a complication of kidney disease. Mineral bone disorder can cause bones to become weakened or brittle and calcium deposits to accumulate in body tissues and blood vessels. Signs and symptoms of mineral bone disorder mimic hypocalcemia and include feeling irritable, having memory problems, sensations of numbness and tingling, muscle cramps, having an abnormal heart rhythm, dry skin, brittle nails, and dry, coarse hair.

It is important to work with your DCL dietitian to learn more about the foods to eat and avoid in order to manage your phosphorus (and calcium) levels. Talk with your DCL team if you have questions about phosphorus or calcium.

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Understanding Phosphorus and Potassium in Kidney Disease

Potassium

Potassium, like phosphorus, is an important natural occurring mineral that is essential for life. Sometimes potassium is referred to as an electrolyte, either term, mineral or electrolyte, is appropriate to use. Potassium plays a vital role in controlling how well the nerves and muscles are working. The heart is a muscle; therefore, monitoring potassium levels, both high and low, are important for heart health. Potassium is also important in helping to control blood pressure, normal cell function, and balance the amount of fluids inside and outside of our cells. Much like phosphorus, potassium is found in many of the foods we eat, including fruits and vegetables.

Potassium levels, both high and low, can be affected by some medications. For example, when taking the "water pill" spironolactone (Aldactone), potassium may stay in the body instead of losing some potassium in the urine leading to high blood levels of potassium known as hyperkalemia (hyper = high, kal = potassium & emia = blood). When taking the "water pill" furosemide (Lasix), some amount of potassium may go out in the urine leading to low levels of potassium known as hypokalemia (hypo = low, kal = potassium & emia = blood). The kidneys help to control the potassium level and keep potassium within the healthy range. Hyperkalemia can happen when the kidneys are not filtering (or working) properly with acute kidney injury, chronic kidney disease, or kidney failure. If the kidneys cannot properly filter the potassium and remove excess amounts from the body into the urine, then the potassium level will rise. In this case, individuals may need to take a medication known as a potassium binder, like sodium zirconium cyclosilicate (Lokelma) or patiromer (Veltassa).

It is important to work with your DCL dietitian to learn more about the foods to eat and the foods to avoid in order to help keep your potassium level in the normal range. Talk with your DCL team if you have questions about having a high or low potassium level.

References:

AAKP (n.d.). National Phosphorus Awareness Day Fact Sheet: https://aakp.org/wp-content/uploads/2026/01/Phosphorus-Fact-Sheet.pdf

AAKP (n.d.). National Phosphorus Awareness Day Questions for Your Doctor: https://aakp.org/wp-content/uploads/2026/01/Phosphorus-Infographic.pdf

AAKP (n.d.). Are You O-K? National High Potassium Awareness Day 5.1 Fact Sheet: https://aakp.org/wp-content/uploads/2026/02/2026-Are-You-OK-Fact-Sheet.pdf

AAKP (n.d.). Are You O-K? National High Potassium Awareness Day 5.1 Questions for Your Doctor: https://aakp.org/wp-content/uploads/2026/02/OK_Infographic_2026.pdf

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Build a Kidney Friendly Garden with these yummy veggies!

Carrots

Peppers

Broccoli and Cauliflower

Okra

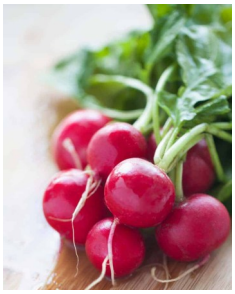
Cucumber

Lettuce

Snow Peas

Onions

Green Beans



Radishes