Texas ESRD Emergency Coalition Presents:

Are You Ready for a disaster? Like a Hurricane or other Emergency Situation?

David Ramirez
TEECE Chair

Anna Ramirez, MPH, CPH
ESRD Network Outreach Coordinator
Objectives

1. Texas ESRD Emergency Coalition (TEEC)

2. Recognize your role in helping ensure patients receive safe, timely and effective care when they evacuate

3. Importance of disaster drills for patients and providers
   a. How to plan and develop a disaster drill

4. TEEC Policy & Procedure Manual

5. Kidney Community Emergency Response (KCER) Coalition
4. EM Systems
   a. Features
   b. Importance

5. Know and understand the Federal and State rules for emergency preparedness

6. Developing a facility specific disaster plan
   a. Components
   b. NW resources
What is TEEC
Texas ESRD Emergency Coalition?

The mission of TEEC is to ensure a coordinated preparedness, plan, response and recovery to emergency events affecting the Texas ESRD community.
WHO IS TEEC?

- TEEC is a voluntary group of ESRD providers, professionals, patients and other state, regional and local agencies that have an interest in providing the best solutions for continuity of care for ESRD patients during an emergency or disaster situation.
• TEEC has established a toll free number for ESRD patients that will be used during emergencies.

• The command center will be staffed by representatives from the Network, LDO’s, nurses, physicians, social workers and dietitians.

• Command center is the ESRD community's voice to state officials during a time of need.
How Does the Facility Begin To Prepare:

• Update Facility Emergency Manual
• Educate staff
• Educate patients
  – At least annually for all
• Practice Drills
Educating Patients

“Are You R.E.A.D.Y.?”
Water Proof Bag

Dialysis patients especially in the Coastal area should have a water proof bag to use during an emergency evacuation to keep:

✓ their 7 day supply of medications
✓ medical records
✓ other important documents
  ✓ Treatment flow sheets
  ✓ Emergency phone numbers
    ✓ TEEC
    ✓ Backup dialysis facility

Disaster bags are now available free from DSHS.
Ordering information is available at:
http://www.texasteec.org/tools/disaster_bag.asp
Identifying Patients

• The wristband project
  – Identified by all state and health agencies as dialysis patients.

For information on ordering wrist bands visit: http://www.texasteec.org/tools/wristband.asp
If they come...WE WILL BE READY

Your dialysis unit will give you a purple wrist band to wear in case you have to evacuate from your home during a disaster. This band will help other healthcare professionals to identify you as someone needing dialysis care.

Facility should have wrist bands prepped for all patients.

Facility gives out prior to evacuation.

Get Pt ID number from CROWNWeb.

Don't leave home without it!

Get BANDED!

A project by the Texas ESRD Emergency Coalition in collaboration with the ESRD NW # 14 and dialysis professionals in the Gulf Coast area.
Registering Patients for State Assistance

**TAR**
- Transportation Assistance Registry
- Call 2-1-1 to register
- Fax back form
- If patient’s have already registered with the TAR, there information will be saved until after hurricane season

**STEAR**
- State of Texas Emergency Assistance Registry
- Call 2-1-1 to register
- Must register each year
- More comprehensive program, not just transportation
- Fax back form & on-line registration (August 2013)
Disaster plan for patients

Telling patients to go to the hospital Emergency Room IS NOT A DISASTER PLAN
Ways to stay Prepared....

Drills

Should be conducted on a regular basis

BE PREPARED...
PREPARE YOUR STAFF AND PATIENTS!
Hurricane / Emergency Preparedness Drill

Patients, it is time to prepare for hurricane season! We want to remind you to check the information the clinic has for you for: emergency contacts, home phone, cell phone, medications, and possible locations of evacuation. Please review this checklist with your family and update us as soon as possible. Remember that the clinic will provide you with an educational handout for getting ready for hurricanes, current treatment sheets, labs, updated medication list, routes of evacuation, as well as clinics and any shelters in the area you plan to evacuate to.

The clinic will perform a hurricane drill. We want to ensure that you as well as the staff are ready in an emergency situation.

Please update this checklist and return it to your clinic Social Worker:

Current phone and address: ____________________________________________________________

Cell phone: _______________________________________________________________________

Possible locations of evacuation: _____________________________________________________

Phone number of location evacuating to: ________________________________________________

If you do not plan to evacuate or cannot evacuate please list a name and number of a family member or friend to contact: ________________________________________________

We will also be providing you with an “800” number to contact staff with the company you dialyze with in the event that the clinic phone number is not working. That number is: ______________________

Participate in all EMSSystems Drills and Have a Drills of your own......document them.
Policy Manual for your use as you see fit. You can make this facility specific.

All of the work has already been completed.

Just fill in the blanks.

Manual Update

- Generator Tips
- Fuel Information
- Securing the building
- Backup water supplies

**GENERATOR TIPS**

1. Has generator training been provided to a staff member?
2. Does a staff member know how to test the generator?
3. Do you know what size generator the facility needs or uses?
4. Has facility electrical capacity been evaluated?
5. Is the facility able to safely use the generator?
6. Does the facility have any information for trouble shooting?
7. If you have a portable generator, have you addressed security for the generator?

**FUEL**

1. Do you have an alternate fuel source or backup fuel source for the generator?

*Note: In the event of a wide power outage fuel will be needed for generators and for employees to get back and forth to work.*

**SECURING THE BUILDING**

- Ensure power is turned off.
- Ensure that medications that must be refrigerated are kept cold.
  - Set up a backup agreement with a pharmacy to keep medications cold.
  - Keep ice packs in your refrigerator (should hold temperature for approximately 24 hours).
- Turn water main off.
- Turn Natural Gas off.
- Board up windows.

**BACK UP WATER SUPPLIES**

1. Do you have a backup agreement with a water vendor?
2. Does your unit have an interior or exterior water connection? If no, a connection would need to be created.
3. Are there extra pre-filters available at the facility?
4. Are the necessary connectors available and accessible?
5. Have technical staff and any other appropriate staff members been trained on properly connecting the out sourced water supply?
Kidney Community Emergency Response (KCER) Coalition

- **Mission**: Collaboratively develop, disseminate, implement & maintain a coordinated preparedness & response framework for the kidney community in the event of any type of emergency or disaster.

- **Vision**: KCER is the leading authority on emergency preparedness & response for the kidney community by providing organization & guidance that seamlessly bridges emergency management stakeholders & the ESRD community nationwide.
KCER Tools & Resources

- www.kcercoalition.com
- Response Team Pages
  - Information & education
- Drills & education
- Helpful links
  - ESRD & disaster-related information
  - www.kidney.org/help
HELPFUL CONTACT INFORMATION

www.texasteec.org

1-866-407-3773
TEEC is here to help!

• No matter what the emergency...
EM Systems

• Real-time data source
• Communication between health care providers
• Alerts
• Evacuation planning
  – Mapping
  – Resource availability
• https://emresource.emsystem.com/EMSystem
Texas Trauma Service Areas

- There are 22 TSA’s or trauma service areas, and each facility is grouped into RAC’s based on TSA location.
- All health related facilities in Texas have been categorized into these three regions known as Regional Advisory Council’s.
- The RAC labels are A-I, J-P and Q-V.
The Basics

• You can access the system two ways
  – www.emsystems.com
  – www.texasteec.org

• Locate user login tab: click Emresource

• Login: information is case sensitive

• Proceed to update all information
<table>
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<th>Resource Name</th>
<th>Status</th>
<th>Status Type</th>
<th>QOL</th>
<th># Dialysis Patients</th>
<th># Dialysis</th>
<th>Notes</th>
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<td></td>
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<td>1</td>
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<td>Dialysis</td>
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<td></td>
<td>1</td>
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<td>452834</td>
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<td>Open</td>
<td>Dialysis</td>
<td></td>
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<td>1</td>
<td></td>
</tr>
</tbody>
</table>

Individual Resource:

[EMResource Screenshot with map and details for 450369 Childress Regional Medical Center]
Map Feature
When to Update

Always between the 1<sup>st</sup> and 8<sup>th</sup> of each month

452513 Amarillo High Plains Dialysis
Select the statuses to update (unchecked ones will not be changed):

- **6. Dialysis**: Dialysis Status
- **2. # Dialysis Patients**: Hemo Dialysis Patients
  - 109
  - Comment:
- **5. # Isolation Patients**: # Isolation Patients
- **3. # PD**: # PD Patients
  - 7
  - Comment:
- **4. # Home Hemo**: # Home Hemo patients
- **1. Patient Capacity**: The patient capacity at your facility

Show All Statuses

[Save] [Cancel]
What do the Status’s Mean

- **Open** - the facility is operating normally in terms of shifts and hours.

- **Closed** - the unit is not operational and is not dialyzing any patients.

- **Divert** - the facility cannot accept patients in an emergency because it is full, dialyzing your own patients in preparation for a disaster or already has accepted as many patients as can be safely dialyze.

- **Evacuating** - means that the unit is in the process of closing for evacuation.
When you don’t update

Correctly or on time

From the Network

• Warning fax
• Reported to The Department of State Health Services
• Review of facility specific disaster plan

From the State

• Non-compliance letter
• Possible survey Documented on annual surveys
Why is updating so important

- EM System is used to track facility statuses during emergencies.
- From the TEEC Command Center, NW will be using EM Systems to
  - Find open dialysis units for displaced patients
  - Route evacuating dialysis patients to open units
EMSystems May Compliance

- compliant, 464, 93.4%
- non-compliant, 33, 6.6%
EMSystems in Use

• Wednesday May 15, 2013 – severe thunderstorms and tornados in the DFW area.
• EF4 Tornado which brought winds of up to 200 miles per hour raged through at least 4 North Texas counties.
• EMSystems alert was issued on the morning of May 16 in RAC E to assess if any facilities were damaged or needed assistance.
Helpful Information

• Did you know there is a view only mode of Emsystems?
  – [https://emresource.emsystem.com/login.jsp](https://emresource.emsystem.com/login.jsp)
  – User id: txdialview
  – Password: TEEC10

• Other staff can use this feature

• Anyone can use this feature

• All alerts will be sent out by email and are located in the banner at the top of the screen
Resources

• Contact the Network if you need login information or have updating questions
  – Anna Koenig aramirez@nw14.esrd.net or 469-916-3800

• Contact the help desk for technical issues
  – 1-888-367-9783

• EMsystems user manual is on TEEC website at
Developing Facility Specific Disaster Plan
Where are the Conditions for Coverage regarding Emergency and disaster?

Outlined in 494.60 Condition: Physical environment

V408

(d) Standard: Emergency preparedness. The dialysis facility must implement processes and procedures to manage medical and non medical emergencies that are likely to threaten the health or safety of the patients, the staff, or the public. These emergencies include, but are not limited to, fire, equipment or power failures, care-related emergencies, water supply interruption, and natural disasters likely to occur in the facility’s geographic area.
(d) **Standard: Emergency preparedness.** The dialysis facility must:

- Implement processes and procedures to manage medical and nonmedical emergencies that are likely to threaten the health or safety of the patients, the staff, or the public.

- These emergencies include, but are not limited to:
  - fire
  - equipment or power failures
  - care-related emergencies
  - water supply interruption
  - natural disasters likely to occur facility’s geographic area.
Emergency Preparedness of Staff

- Provide appropriate training and orientation in emergency preparedness to the staff.
- Staff training must be provided and evaluated at least annually and include the following:
  - Ensuring that staff can demonstrate a knowledge of emergency procedures, including informing patients of

Patient Training

- Appropriate orientation and training to patients, including
  (A) What to do;
  (B) Where to go, including instructions for occasions when the geographic area of the dialysis facility must be evacuated;
C) Whom to contact if an emergency occurs while the patient is not in the dialysis facility.

- Must include an alternate emergency phone number for the facility for instances when the dialysis facility is unable to receive phone calls due to an emergency situation

- Unless the facility has the ability to forward calls to a working phone number under such emergency conditions and

(D) How to disconnect themselves from the dialysis machine if an emergency occurs.
(4) The facility must--

(i) Have a plan to obtain emergency medical system assistance when needed;

(ii) Evaluate at least annually the effectiveness of emergency and disaster plans and update them as necessary; and

(iii) Contact its local disaster management agency at least annually to ensure that such agency is aware of dialysis facility needs in the event of an emergency.
November 19, 2007

Dear County Office of Emergency Services,

This is a letter of introduction regarding our dialysis centers.

Dialysis is a life-sustaining medical procedure. Our facilities listed below include number of stations, number of patients, number of staff and operation times:

<table>
<thead>
<tr>
<th>Facility Name</th>
<th># of stations</th>
<th># of patients</th>
<th>Open days</th>
<th>Open hours</th>
<th># of Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Name</td>
<td>20</td>
<td>81</td>
<td>Monday-Saturday</td>
<td>4:30am – 4:30pm</td>
<td>16</td>
</tr>
<tr>
<td>Facility Name</td>
<td>33</td>
<td>271</td>
<td>Monday-Saturday</td>
<td>5:00am – 9:30pm</td>
<td>54</td>
</tr>
<tr>
<td>Facility Name</td>
<td>16</td>
<td>38</td>
<td>M – W – F</td>
<td>5:00am – 9:30pm</td>
<td>14</td>
</tr>
<tr>
<td>Facility Name</td>
<td>12</td>
<td>60</td>
<td>Monday - Saturday</td>
<td>5:00am – 9:30am</td>
<td>14</td>
</tr>
<tr>
<td>Facility Name</td>
<td>12</td>
<td>78</td>
<td>Monday – Sunday</td>
<td>5:00am – 7:00am</td>
<td>15</td>
</tr>
<tr>
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<td>187</td>
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<td>5:00am – 9:30pm</td>
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<td>Facility Name</td>
<td>16</td>
<td>81</td>
<td>Monday – Saturday</td>
<td>5:00am – 9:30pm</td>
<td>22</td>
</tr>
<tr>
<td>Facility Name</td>
<td>17</td>
<td>90</td>
<td>Monday – Saturday</td>
<td>5:00am – 9:30pm</td>
<td>22</td>
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<tr>
<td>Facility Name</td>
<td>12</td>
<td>21</td>
<td>M – W – F</td>
<td>5:00am – 9:30pm</td>
<td>8</td>
</tr>
<tr>
<td>Facility Name</td>
<td>20</td>
<td>1</td>
<td>M – W - F</td>
<td>5:00am – 9:30pm</td>
<td>8</td>
</tr>
</tbody>
</table>

Dialysis requires electrical power and water. We have identified our minimal electrical needs as 480. We use on an average of 7200 gallons of water daily continuously running. We have contacted the City of XX Utilities, City of XX Utilities and TXU Energy as to our needs and requirements.

I would like the opportunity to speak with you regarding our emergency plan and determine how we may fit into the county’s plan during any major event.

I look forward to meeting and working with you in the future. My contact number is XXX-XXX-XXXX

Sincerely,

Contact name and title
Emergency Coverage
Federal Facility Disaster Guidelines 2010

- V768: Written instructions to patients & staff for obtaining emergency medical care
- V769: Roster of physicians
- V770: Agreement with a hospital that provides inpatient dialysis (Separate certification for “ESRD” for the hospital is NOT required)
Developing a Facility Specific Disaster Plan

- Follow:
  - ESRD Federal Facility Disaster Guidelines 2010
  - Texas ESRD Licensure Rules – Emergency Preparedness Section

- Use the disaster plan checklist created by the NW and TEEC

If your plan contains all of these components then you have an adequate plan in place!
SUBCHAPTER D. MINIMUM STANDARDS FOR PATIENT CARE AND TREATMENT. §117.41. Governing Body.

(i) The governing body shall develop, implement, and enforce policies and procedures relating to the facility’s disaster preparedness plan, to meet the requirements of §117.45(b)(5) of this title (relating to Provision and Coordination of Treatment and Services). The plan shall address the continuity of essential building systems including emergency power and water, or a contract with another licensed ESRD facility to provide emergency contingency care to patients to meet the requirements of §117.91(h) of this title (relating to Fire Prevention, Protection, and Emergency Contingency Plan).

§117.45. Provision and Coordination of Treatment and Services.

(b) Emergency preparedness.

(1) A facility shall implement written procedures which describe staff and patient actions to manage potential medical and nonmedical emergencies, including but not limited to fire, equipment failure, power outages, medical emergencies, and natural or other disasters which are likely to threaten the health, welfare, or safety of facility patients, the staff, or the public.

(2) A facility shall have a functional plan to access the community emergency medical services.

(3) A facility shall have personnel qualified to operate emergency equipment and to provide emergency care to patients on site and available during all treatment times. A charge nurse qualified to provide basic cardiopulmonary life support (BCLS) shall be on site and available to the treatment area whenever patients are present. All direct care staff members shall maintain current certification and competency in BCLS.

(4) A facility shall have a transfer agreement with one or more hospitals which provide acute dialysis service for the provision of inpatient care and other hospital services to the facility’s patients. The facility shall have documentation from the hospital to the effect that patients from the facility shall be accepted and treated in emergencies. There shall be reasonable assurances that:

(A) The transfer or referral of patients will be effected between the hospital and the facility whenever such transfer or referral is determined as medically appropriate by the attending physician, with timely acceptance and admission;

(B) The interchange of medical and other information necessary or useful in the care and treatment of the patient transferred shall occur within one working day; and

(C) Security and accountability shall be assured for the transferred patient’s personal effects.

(5) A written disaster preparedness plan for natural and other disasters specific to each facility shall be developed and in place. The plan shall be based on an assessment of the probability and type of disaster in each region and the local resources available to the facility.

ESRD Federal Facility Disaster Guidelines 2010

V408

(d) Standard: Emergency preparedness. The dialysis facility must implement processes and procedures to manage medical and non medical emergencies that are likely to threaten the health or safety of the patients, the staff, or the public. These emergencies include, but are not limited to, fire, equipment or power failures, care-related emergencies, water supply interruption, and natural disasters likely to occur in the facility’s geographic area.

V409

(1) Emergency preparedness of staff. The dialysis facility must provide appropriate training and orientation in emergency preparedness to the staff. Staff training must be provided and evaluated at least annually and include the following:

(i) Ensuring that staff can demonstrate a knowledge of emergency procedures, including informing patients of:

(A) What to do;

(B) Where to go, including instructions for occasions when the geographic area of the dialysis facility must be evacuated;

(C) Whom to contact when an emergency occurs while the patient is not in the dialysis facility. This contact information must include an alternate emergency phone number for the facility for instances when the dialysis facility is unable to receive phone calls due to an emergency situation (unless the facility has the ability to forward calls to a working phone number under such emergency conditions); and

(D) How to disconnect themselves from the dialysis machine if an emergency occurs.

V411

(i) Ensuring that nursing staff are properly trained in the use of emergency equipment and emergency drugs.

- The “emergency equipment” that is required at a minimum, is defined in V13.
- The “emergency drugs” to be kept onsite may be determined by the medical director and defined by facility policy.

V412

(2) Emergency preparedness patient training. The facility must provide appropriate orientation and training to patients.

V13

(3) Emergency equipment

Emergency equipment, including, but not limited to, oxygen, airways, suction, defibrillator or automated external defibrillator, artificial resuscitator, and emergency drugs, must be on the premises at all times and immediately available.
Disaster Plan Checklist

All resources can be found on the TEEC website at www.texasteec.org under the tools and resources tab.

Please use this as a guide when reviewing or developing your facility specific disaster plan.

☐ There is a facility specific disaster plan in place for both medical and non-medical emergencies. These events include but are not limited to fires, power failures, water supply interruption, natural disasters and care-related emergencies.

☐ Staff has been oriented and trained on all of the disaster plans annually. There are written procedures in place for each disaster situation for staff to follow.

☐ Staff should be able to demonstrate emergency equipment usage and the ability to obtain emergency medical assistance.

☐ The facility has written disaster instructions provided to and available for all patients, and they are trained on emergency procedures annually. The facility also has written instructions for patients to obtain emergency medical care. This could include the phone number to another treatment facility so dialysis can be continued if facility is non-operational.

☐ The facility will have transfer agreements with another dialysis facility and one or more local hospitals.

☐ Facility must contact its local disaster agency at least annually, to ensure such agency is aware of the facilities needs.

☐ The facility conducted periodic mock drills to ensure the educational level and needs of its staff and patients.

☐ The facility must have available a roster with all staff names and physicians to be called in case of an emergency. This is located at both the facility and at the administrator’s home.

* Info@nev@14.esrd.net * www.esrdnetwork.org * www.texasteec.org
Tools & Resources

- Facility Disaster Planning
  - Facility disaster plan checklist
  - Federal disaster regulations
  - Texas ESRD emergency preparedness rules
  - Planning for Water Supply Interruptions - PDF Link
  - TEEC Policies & Procedures Manual - Updated May 2013
  - Preparedness Communication Tool

- Facility tools to Prepare Patients
  - Patient Wristband Identification
  - Disaster Bag Information
  - Disaster Ready! Patient Flyer
  - Are You READY? (English and Spanish versions)

- TAR Information - Note: TAR has changed to STEAR, patients can still be registered by calling 2-1-1, update will be provided once received from the State
  - 211 Transportation registry information
  - 211 Transportation registry form

- Disaster Webinar Recordings
  - 2012 - Requires Windows Media Player
  - 2011 - Requires Windows Media Player

- The Kidney Community Emergency Response (KCER) Coalition: Information for the Healthcare Provider

- RAC ESRD REPs
- SOP command center
TEEC Updates and Recap

• Read alerts sent via EMSystems
• ESRD Network will also fax blast alerts
• Check the TEEC website for updates and meeting dates
• You can always call a member of the TEEC leadership
• Attend TEEC meetings
• Get involved with TEEC
How can TEEC help you prepare?

- Look for information in the monthly NetLink newsletter from Network 14
- Look for disaster newsletters via EM Systems
- Patient disaster video and education packet – Are You Ready?
- Participating in Drills
- Mentoring (always available)
Save the Dates!

• **TEEC meeting** – June 25, 2013 in Houston, TX; location TBD.


• **ESRD Network Annual Meeting** – October 25 – 26, 2013 at the Omni Mandalay in Las Colinas, TX. For more information visit: [http://www.esrdnetwork.org/network/annual-meeting.asp](http://www.esrdnetwork.org/network/annual-meeting.asp)
Why plan?

• We must be Proactive not Reactive
• We should plan and prepare for the NEXT disaster not the LAST disaster
• If we do not upgrade & re-evaluate disaster plans than we might as well not have one
  – Review annually
  – Use resources to check all components of plan
  – Have drills
• Evaluate plan after a disaster occurs
  • Make necessary changes in plan
Questions?

Contact Information

David Ramirez – VP of Operations – Dialyspa
TEECC Chairperson
david.ramirez@dialyspa.com – 713-218-6500

Anna Ramirez – Outreach Coordinator – ESRD Network of Texas
aramirez@nw14.esrd.net - 469-916-3800
Please Complete the Evaluation

http://www.surveymonkey.com/s/W5N2XPC

Or

Visit http://www.texasteec.org/who-we-are/index.asp

Please complete by June 4, 2013.