Kidney Health Analytics and
Responsive Emergency Support

CMS KHARES Community Of Practice Call

Bringing together the kidney community to share knowledge, innovation, and best practices.

July 23, 2026

Hosted by Kidney Health Analytics and Responsive Emergency Support (KHARES)

Who is KHARES?

Kidney Health Analytics and Responsive Emergency Support

Kidney Health Analytics and Responsive Emergency Support (KHARES)

IPRO is the KHARES national CMS-funded contract dedicated to supporting the kidney community through:

- 🤝 Community Engagement and Partnerships
- 🛡️ Emergency Preparedness and Response
- 📊 Data Analytics and Reporting
- 👨‍👩‍👧‍👦 Patient and Family Engagement
- 📚 Technical Assistance and Information Sharing

Our Goal:

Strengthen the kidney community through collaboration, data-driven solutions, education, technical assistance, community partnerships, and emergency preparedness—helping ensure high-quality care, informed decision-making, and resilience before, during, and after emergencies.

Meet the KHARES Team

Kidney Health Analytics and Responsive Emergency Support

KEY STAFF



Sue Caponi
Project Director



Tom Bradsell
Emergency Lead



Beth Stevens
Data Lead



Agata Roszkowski
EPP/PFR Lead

Leadership



Vicky Cash
Community Engagement



Kim Irby
Project Director



Svetlana Lyulkin
ESRD Systems SME



Laura Mankin
Community Engagement

Team



Lindsay Kaatz
Project Manager/ Environmental Scan



Jenny Rockell
Analyst/Interoperability



Lijing Zhang
Analyst/Dashboards



Stephanie Hull
Community Engagement & Partnership



Matthew Lafergola
PMP



Theresa Jacobellis
Communications



Laura Edwards
Contract Manager

Why a Community of Practice Call?

Kidney Health Analytics and Responsive Emergency Support

Connect

Bring together ESRD Networks, providers, emergency management partners, and stakeholders.



Learn

Share emerging practices, innovations, lessons learned, and educational resources.



Collaborate

Foster partnerships and peer-to-peer problem solving across the kidney community.



Share Information

Promote timely communication and dissemination of tools, resources, and best practices.



Strengthen Preparedness

Support emergency readiness, resilience, and continuity of care.



Support Better Outcomes

Advance patient-centered care and improve outcomes for people living with kidney disease.



Meeting Guidelines

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- Please keep your microphone **muted** when not speaking.
- Use the **Chat** feature to submit questions throughout the presentation.
- Questions will be addressed during the **Q&A** portion as time permits.
- This session is being **recorded**.
- Presentation **materials** may be shared following the webinar.
- If you experience **technical issues**, please use the **Chat** feature for assistance.



Polling Question

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How familiar are you with immediate-start peritoneal dialysis (ISPD)?

- Somewhat familiar
- Heard of it, but not familiar
- Not familiar at all

Today's Presentation

Kidney Health Analytics and Responsive Emergency Support

Immediate Use Peritoneal Dialysis - The Seamless Technique

Michael Gallichio, MD

Immediate Use Technique

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Seamless PD
home peritoneal dialysis reinvented









Patient Selection

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- The surgery can be performed on any patient with reasonable expectation of a free access to the pelvis. Laparoscopic assistance can be employed before insertion and during insertion if necessary.
- This can be done as an outpatient.
- General anesthesia is used (which must be used for laparoscopy) but MAC can be employed judiciously with the Seamless technique.
- Chronic oral anticoagulation is never discontinued.

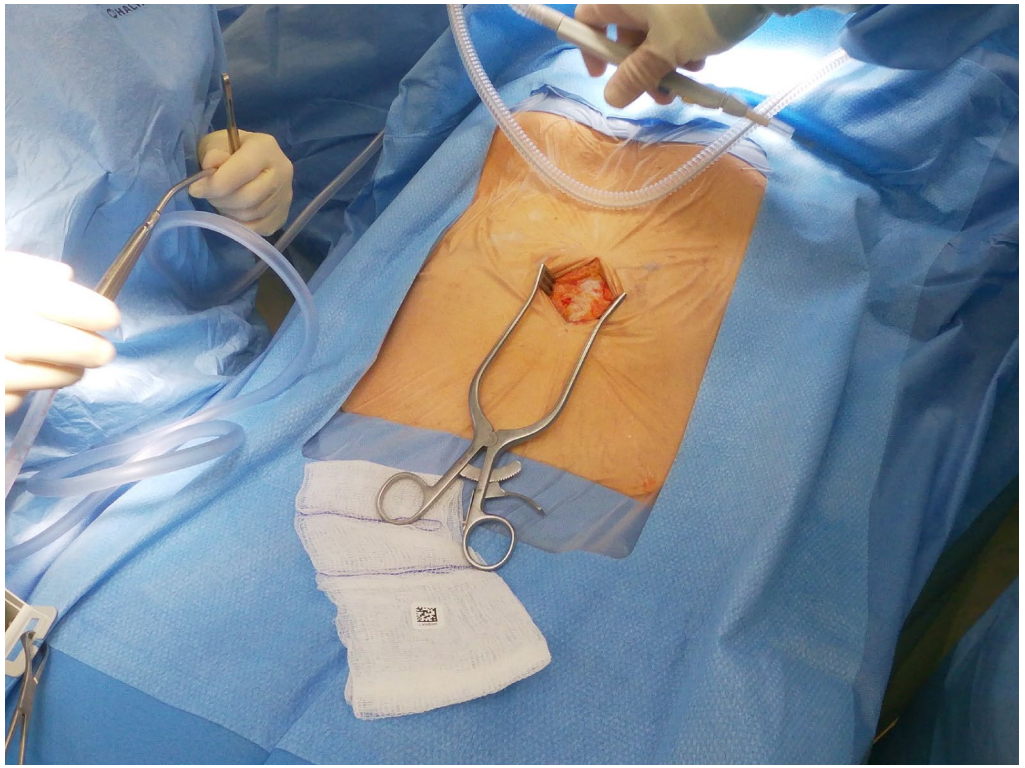


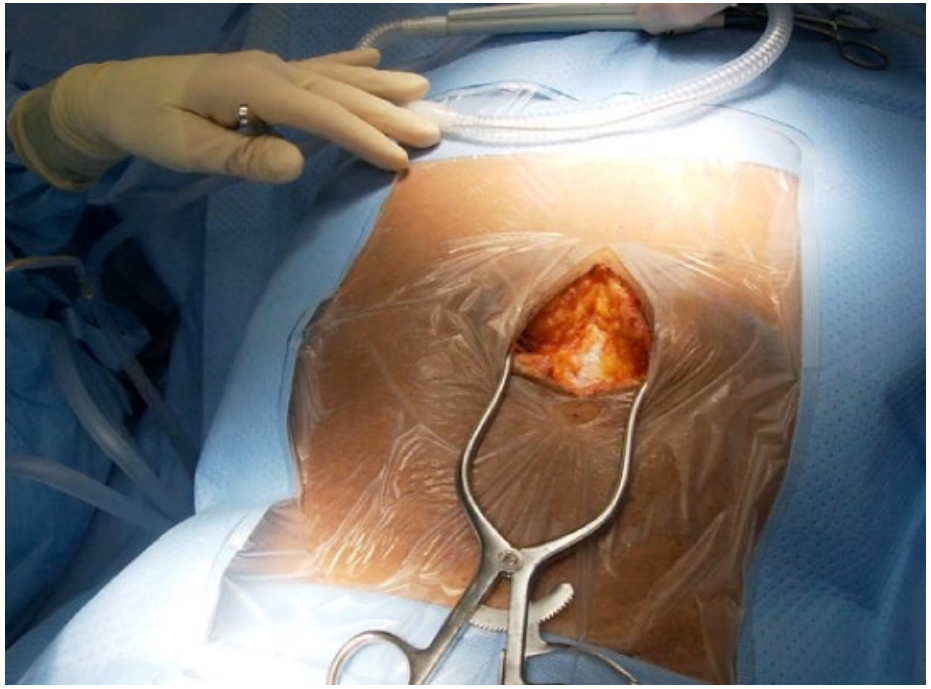


The Incision and Insertion Location

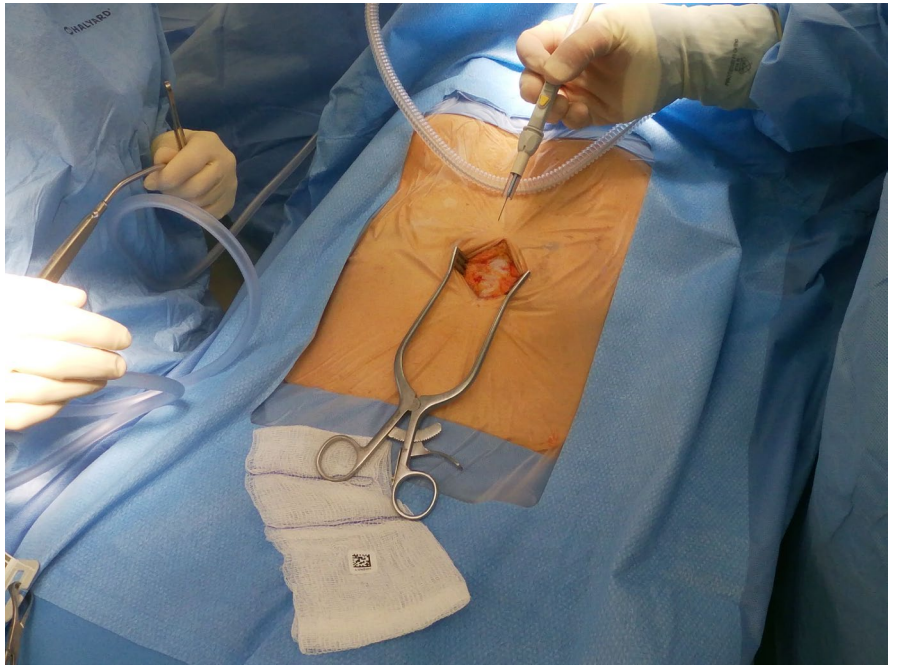
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- A paramedian peri-umbilical extending infra-umbilically predominantly incision is used.
- The splitting of the rectus muscle is important but not mandatory.
- The incision helps avoid the increased preperitoneal tissue in the midline.
- The posterior sheath fascia above the linea semilunaris tends to be sturdy and intact in even the extreme of age or the significantly obese.



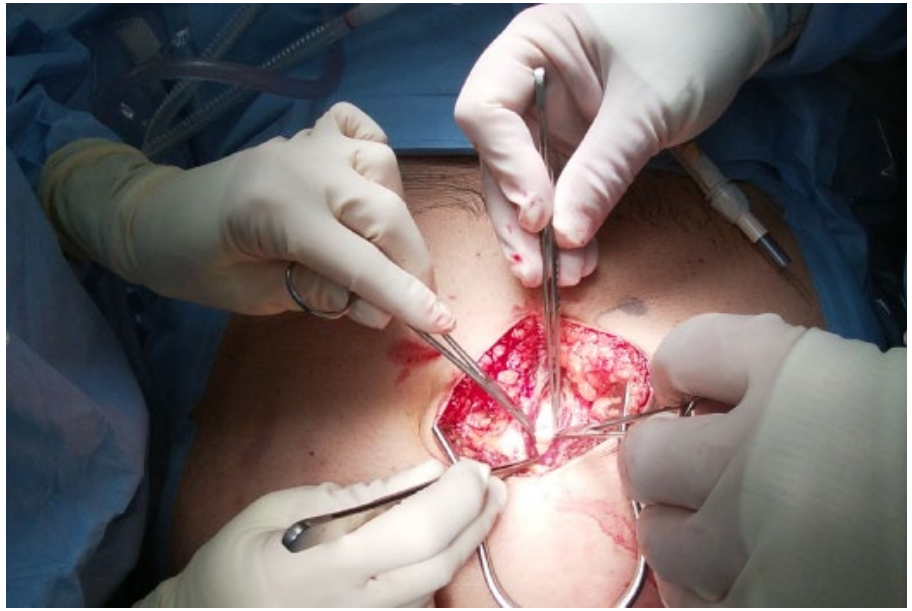


Split the Anterior Rectus Muscle





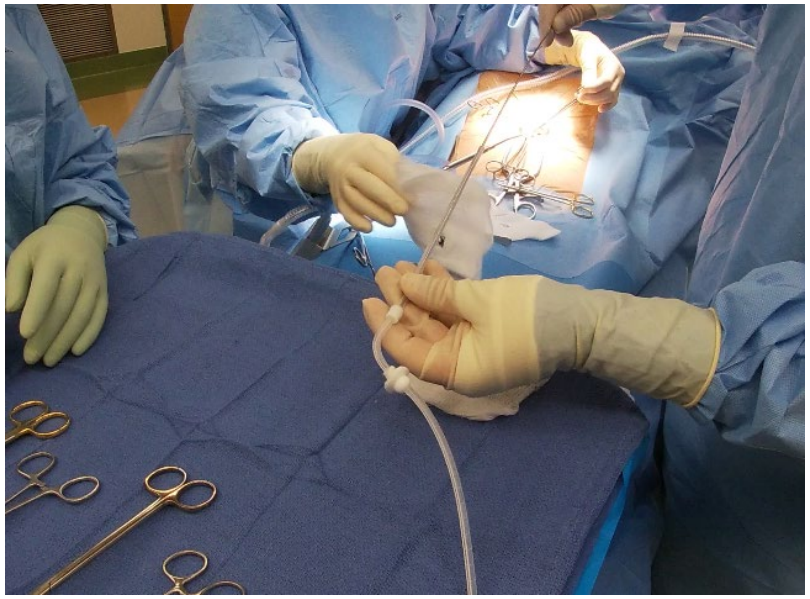
Fascia Opened At Bottom Of Incision



The Catheter Used - Missouri Catheter

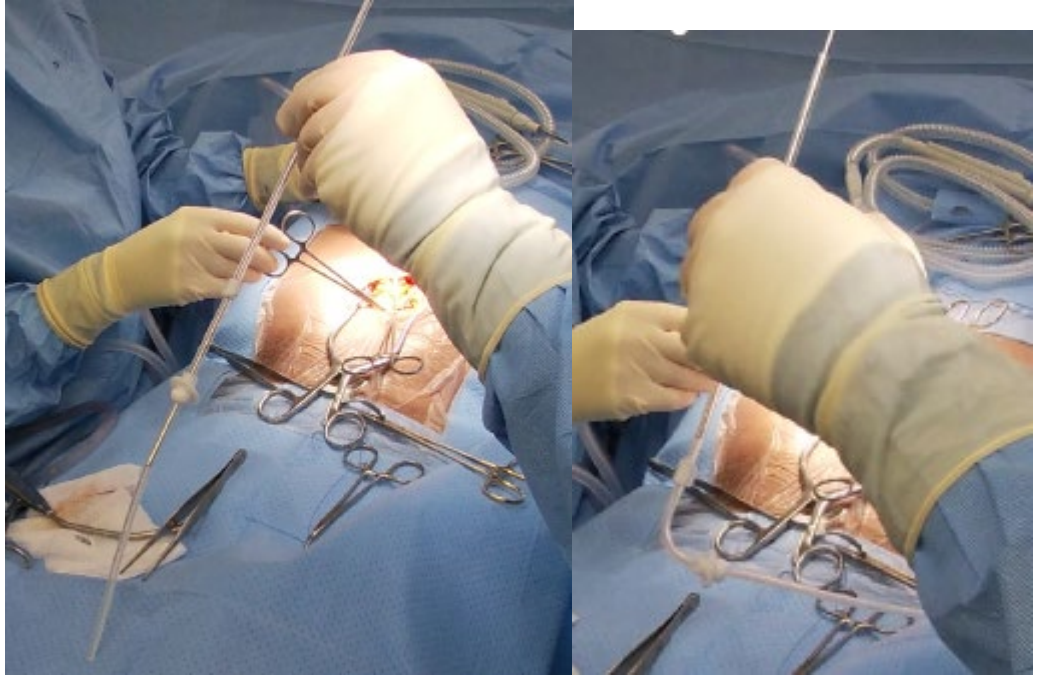
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- Commercially available catheter made by Covidien for many years.
- I have overcome the engineering failures of the design to use them to an advantage in placement and use.
- The ball and flange does provide a better seal to the tissue it is attached as compared to the standard cuffs of a Tenkhoff. However, even a perfect seal will not guarantee water-tightness without the enhanced intramuscular tunneling.
- The forced angulation of the flange and the pre-curve of the catheter make this catheter less desirable to use unless the insertion technique of Seamless are employed.



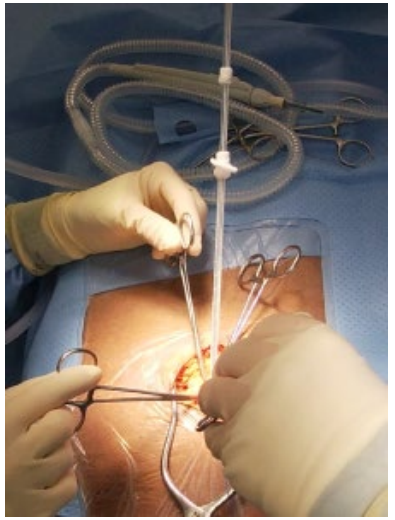
Stringing the Catheter for insertion

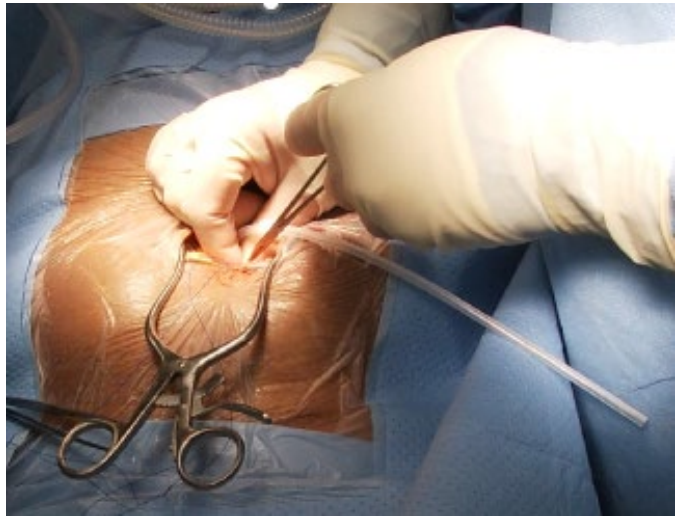
Properly Orient and Insert

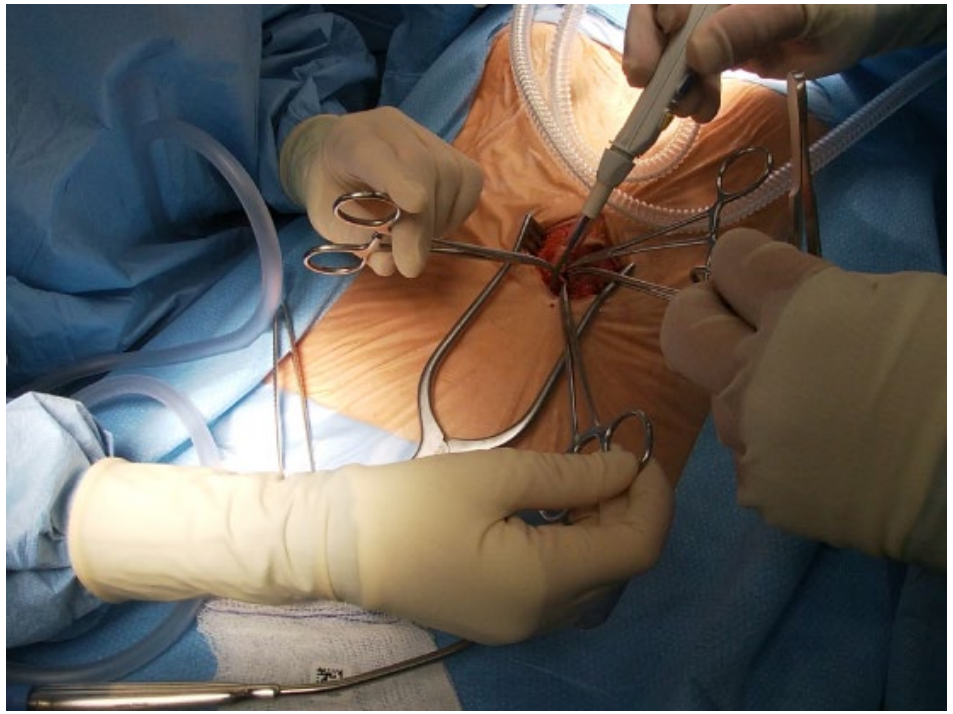




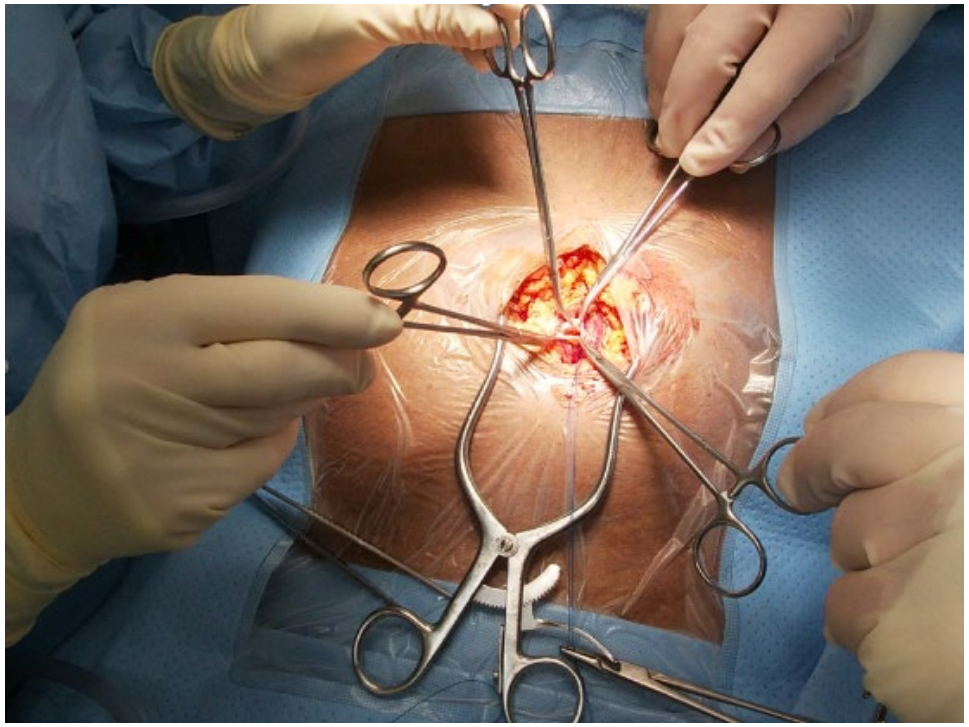
Catheter Into Pelvis

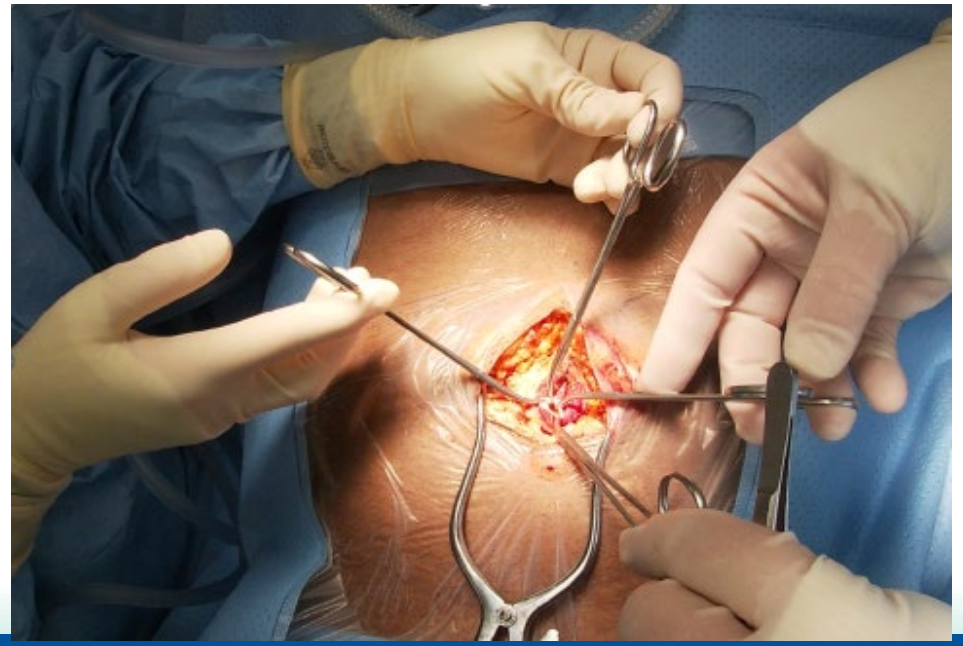






Open the Posterior Sheath



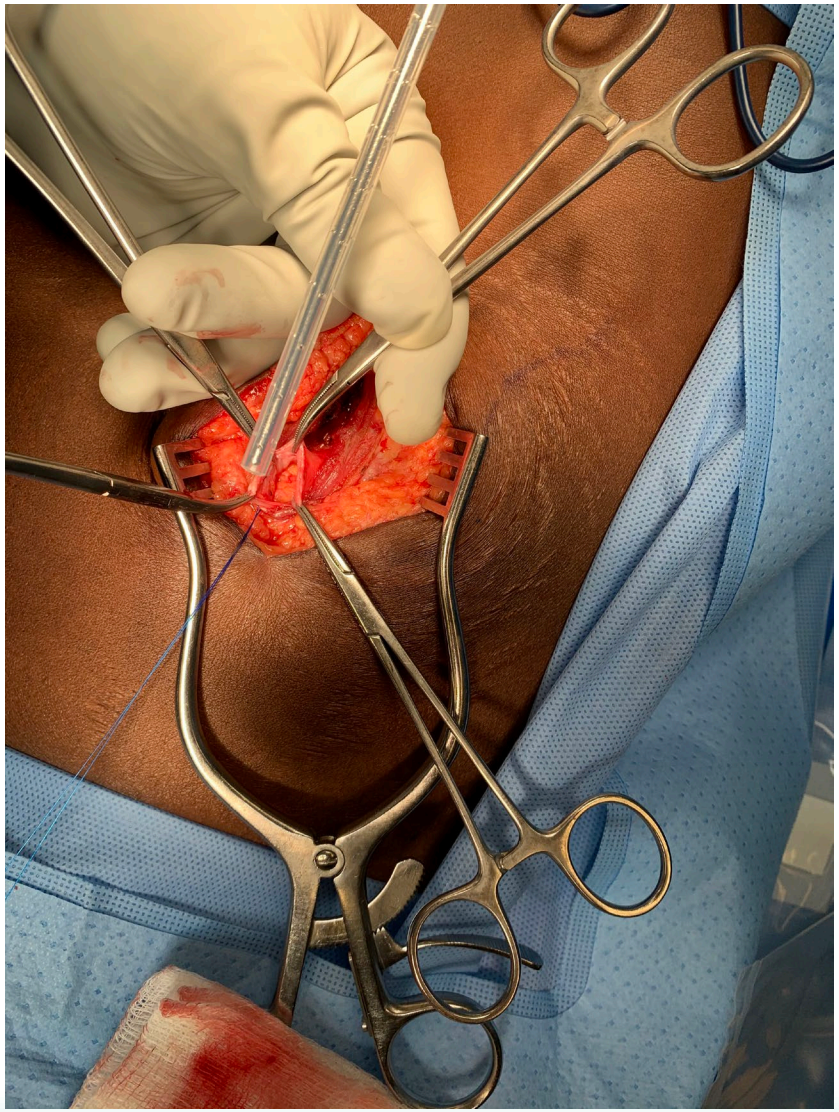


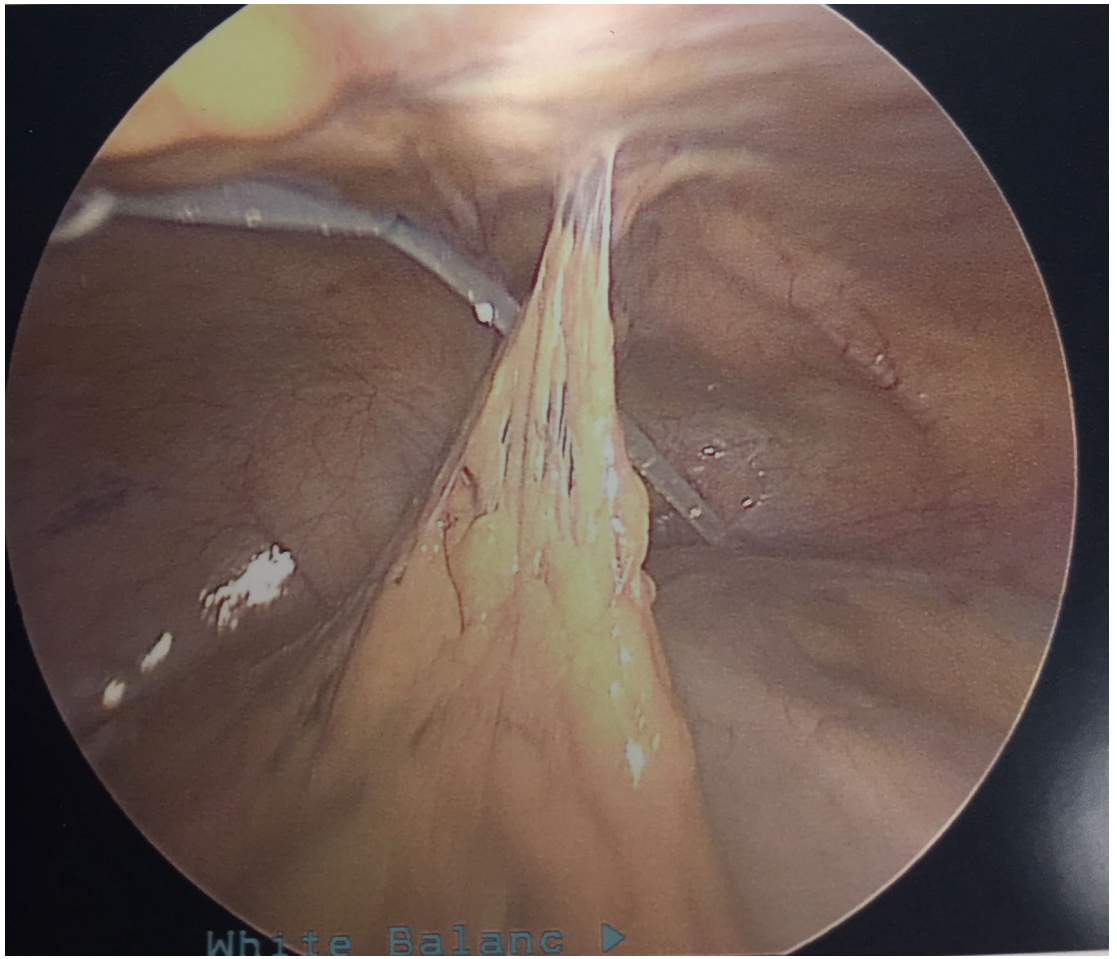
Place the Pursestring



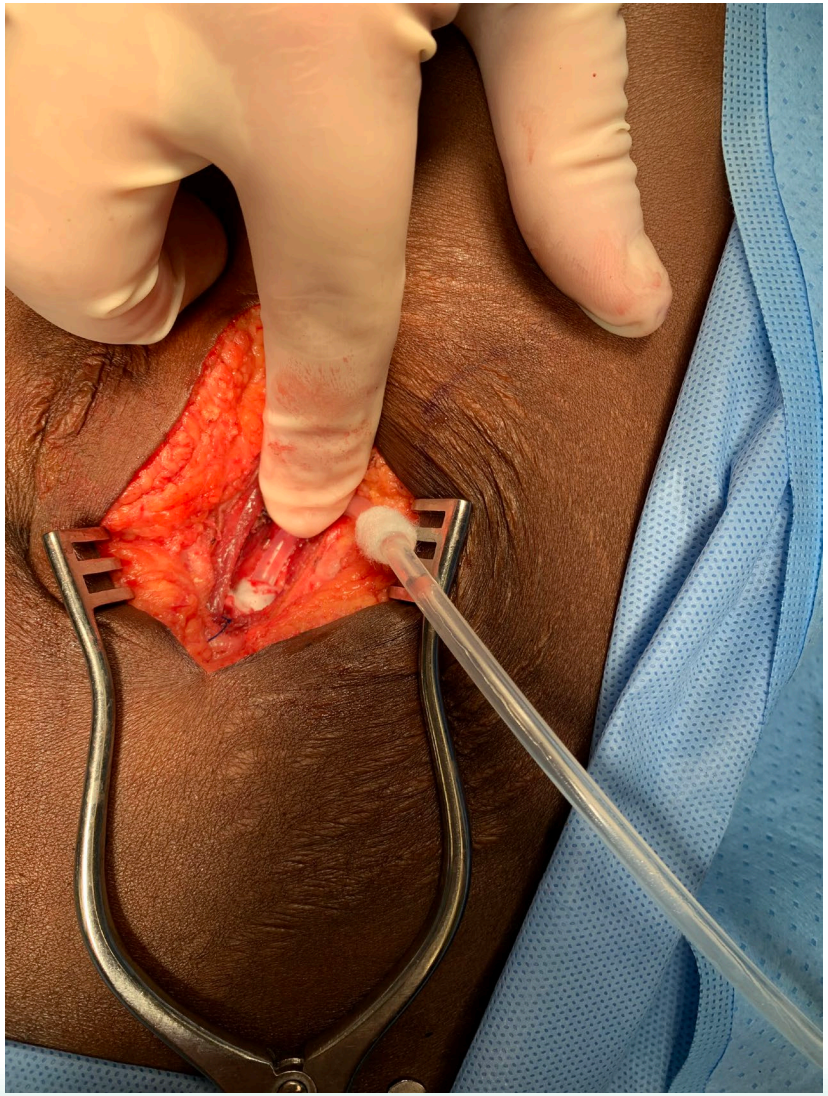
Blunt Stringer and Direction

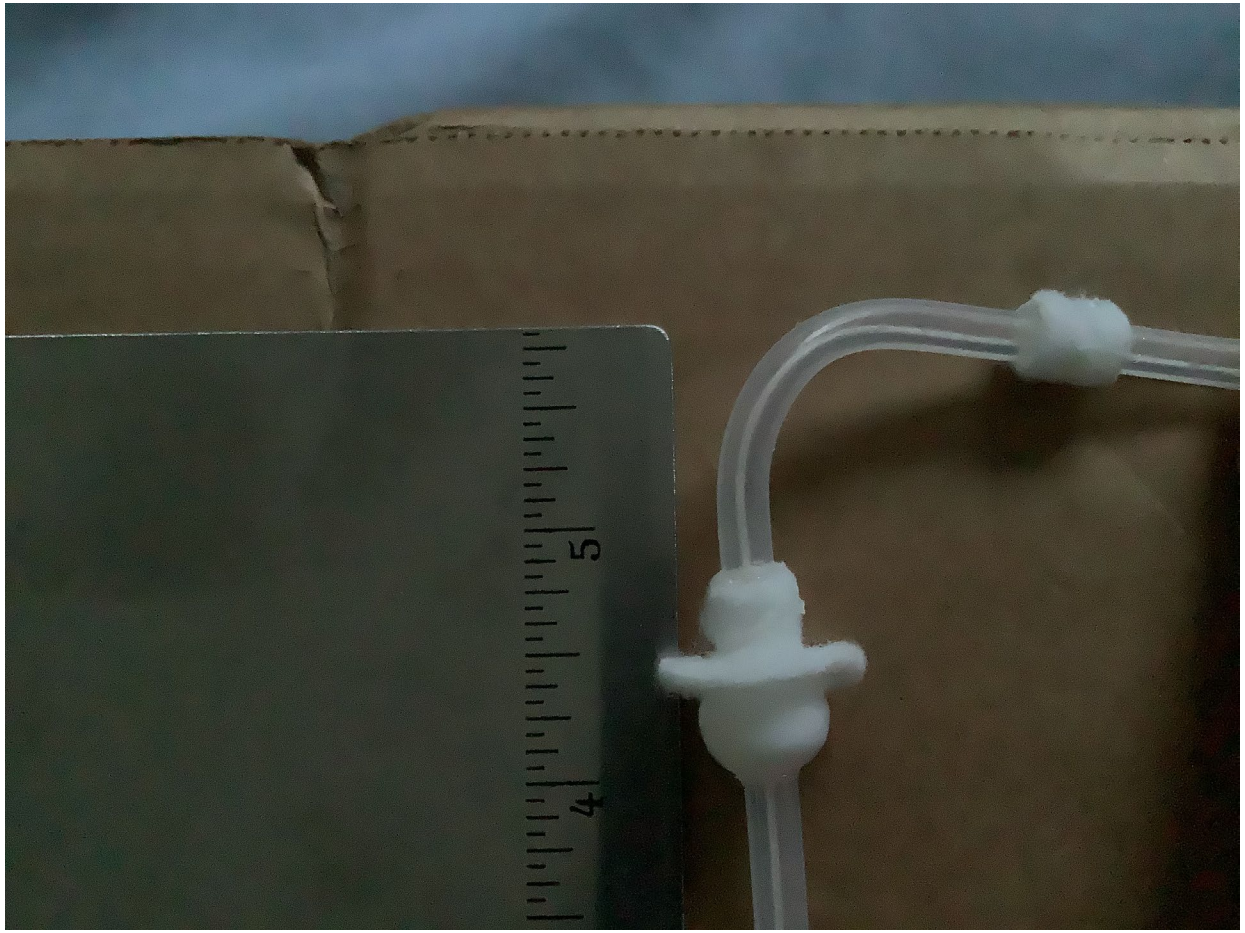
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Purse-string and Seating

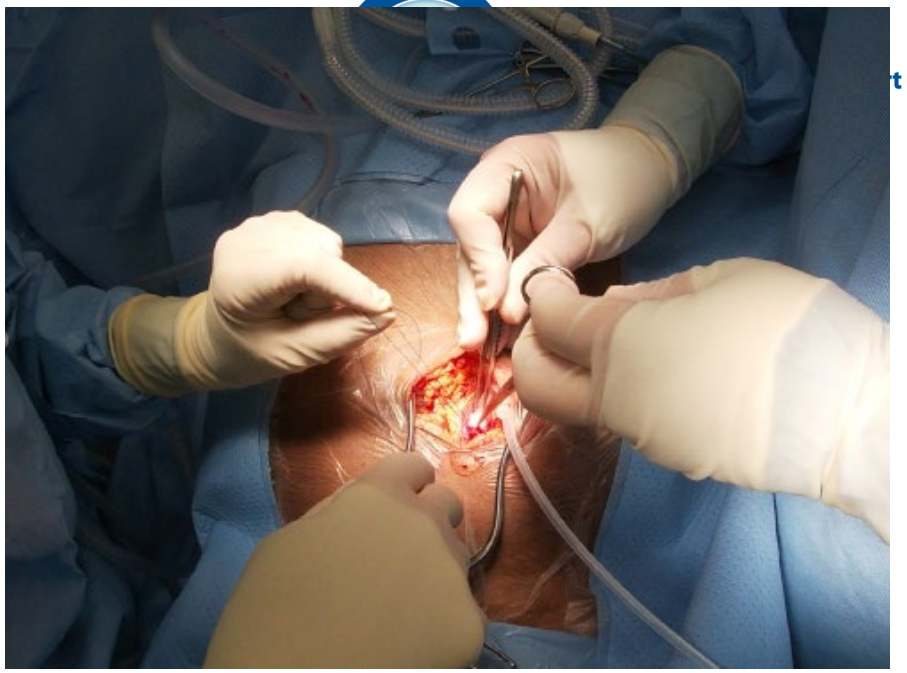


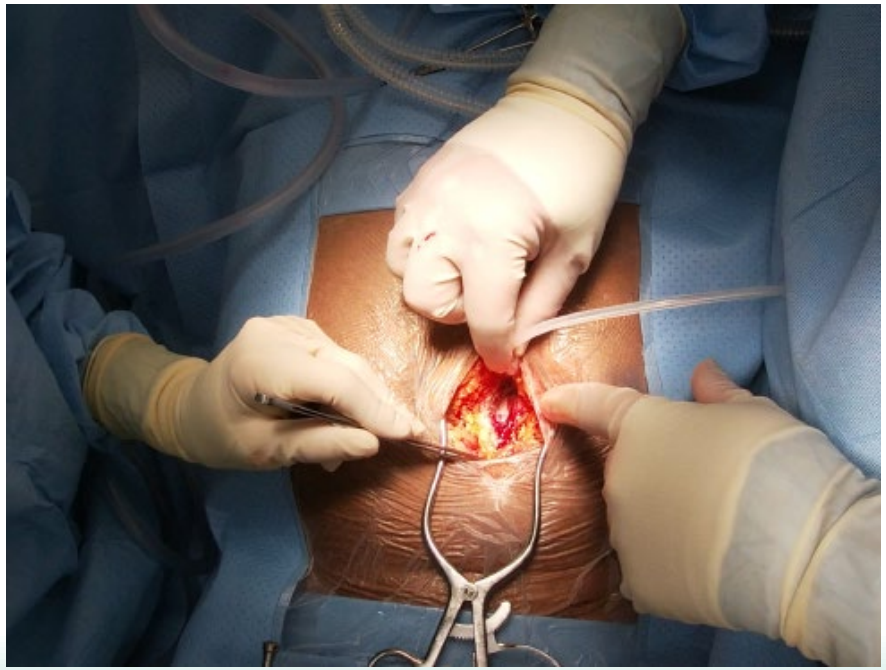




Seating
the Ball
and Flange

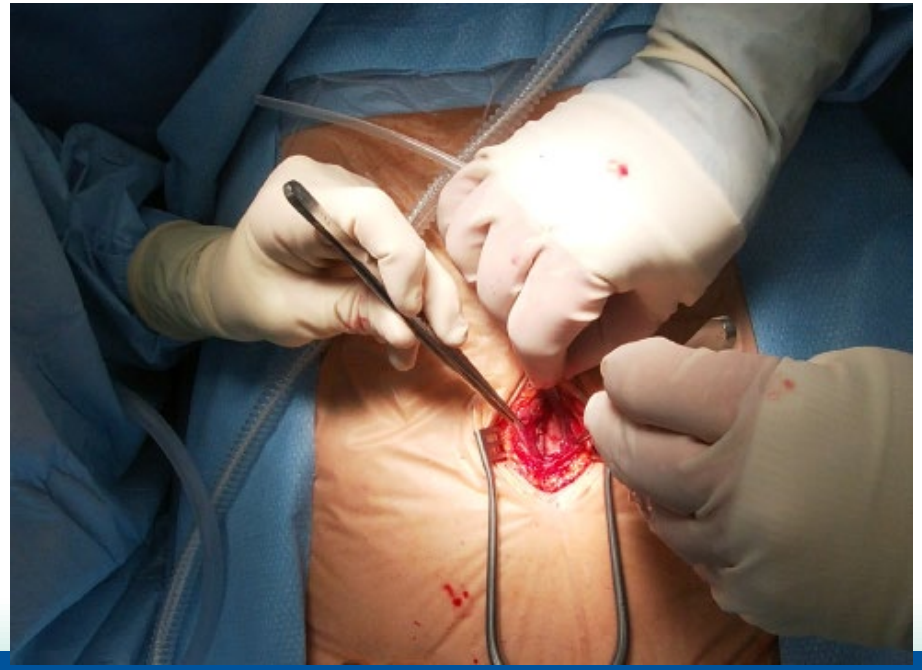
Tying
the
Pursestring

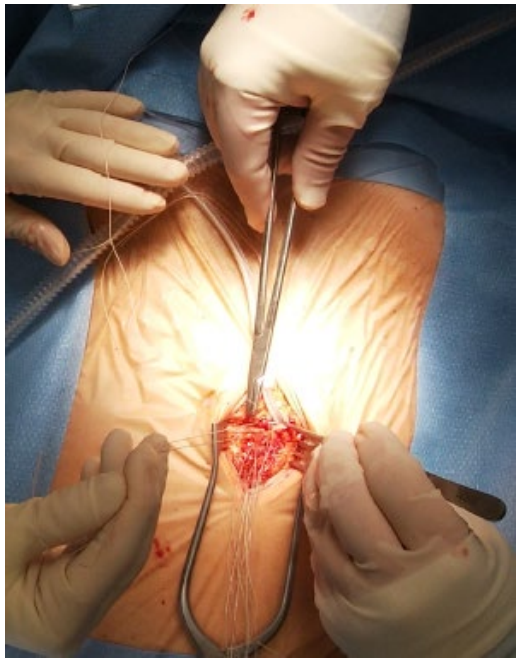




Catheter
Sits
Perfectly

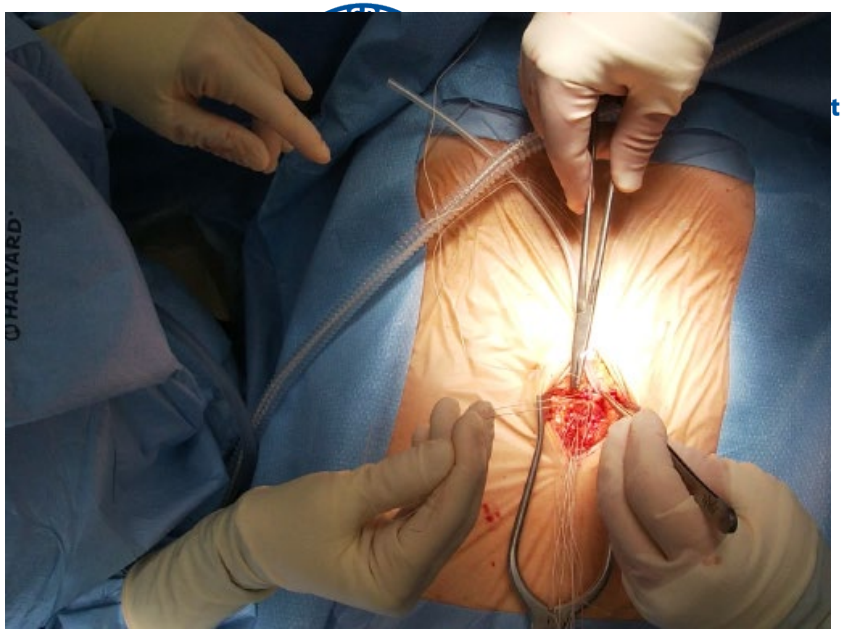
Catheter
Sits Flat
On Posterior
Sheath

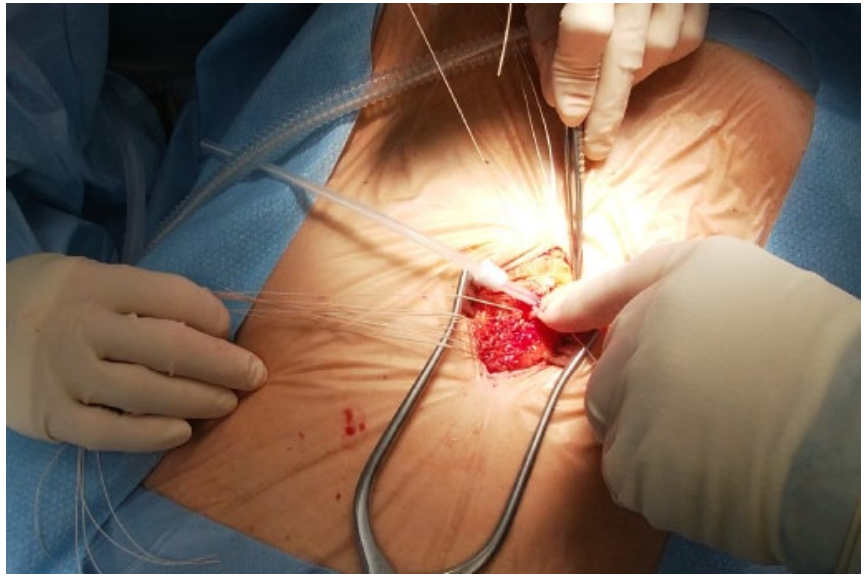




Close Fascia Over Catheter

Close Fascia Above and Below Exit

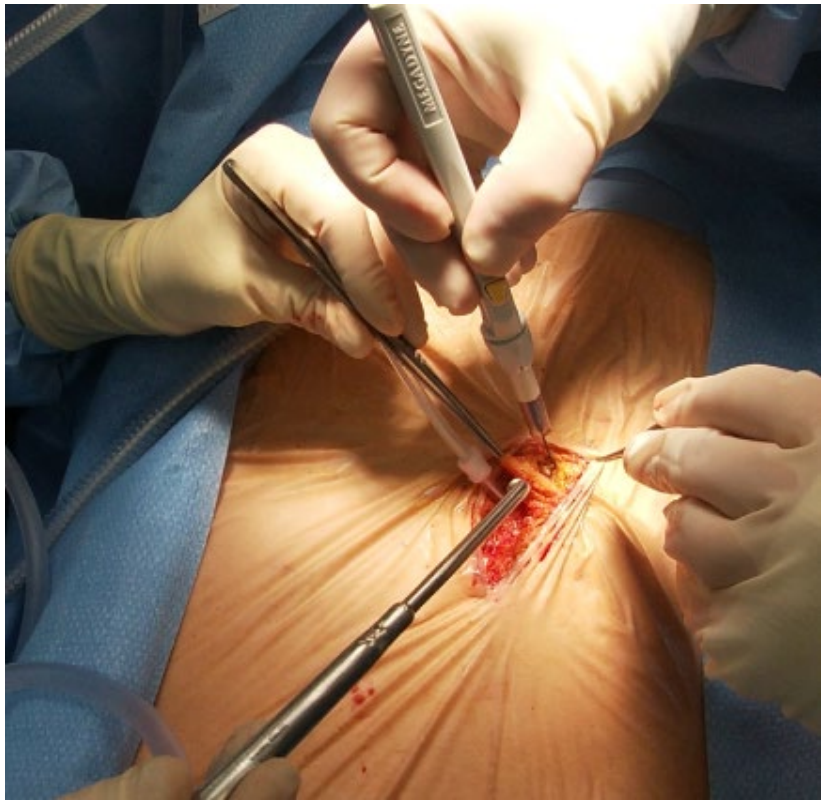




Attention to Fascial Closure- Catheter Exiting Fascia

Fascia Closed



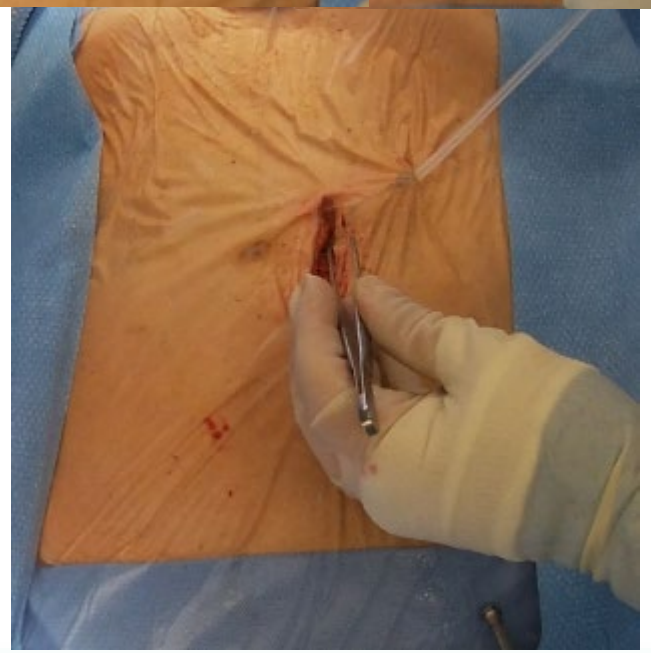


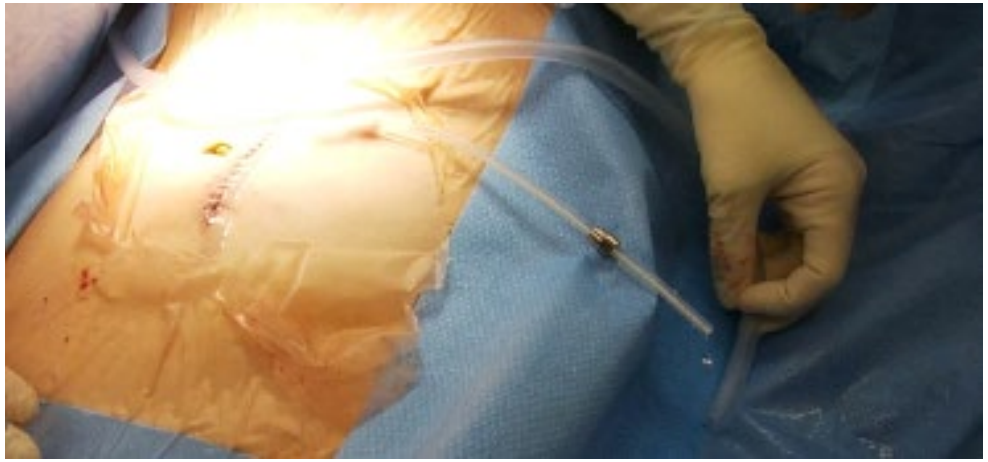
Pocket
For
2nd
Cuff



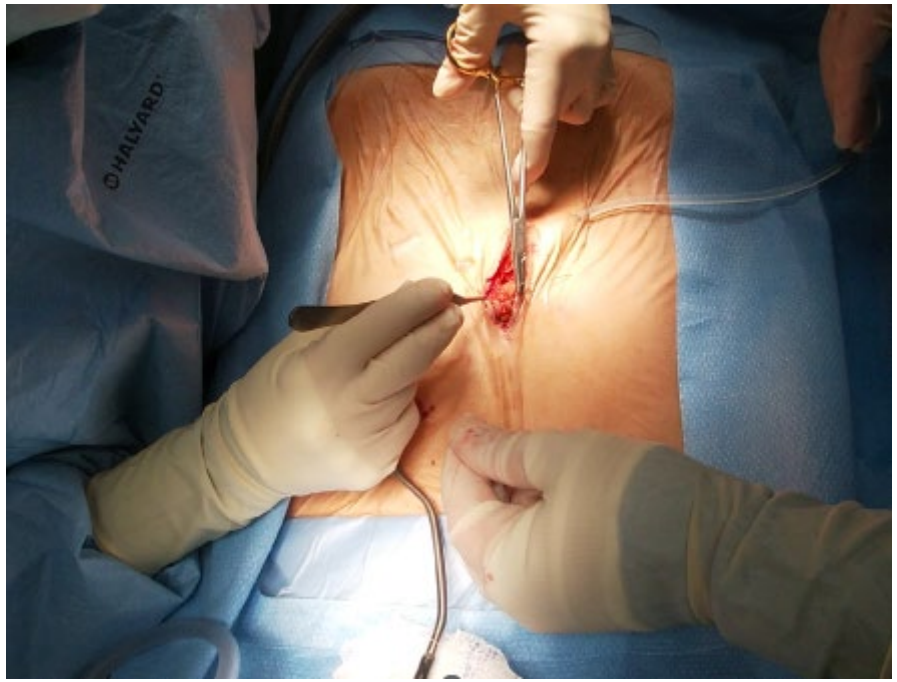


Catheter
Exit



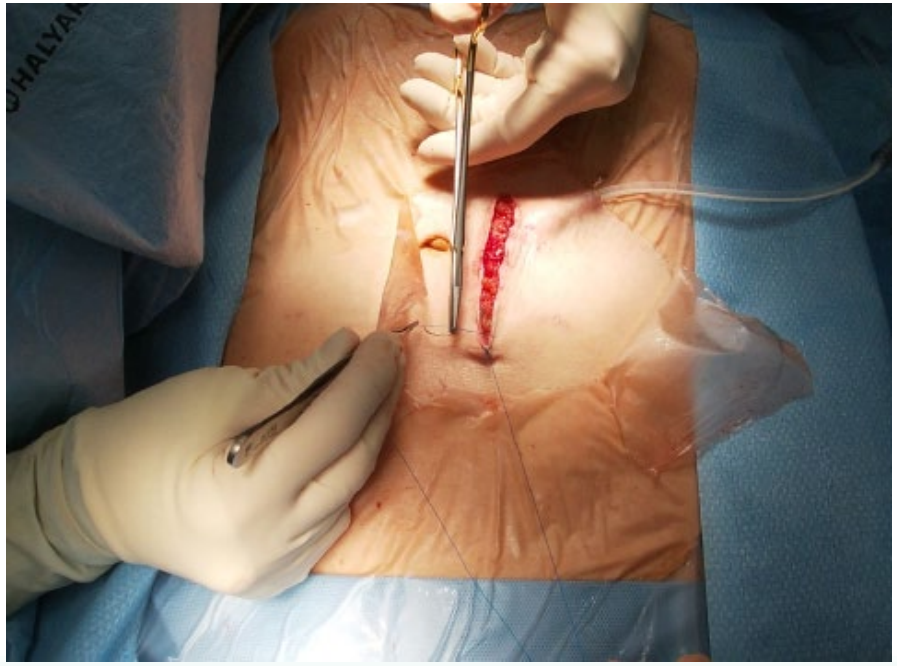


Catheter
Works
Immediately
With No
Leak

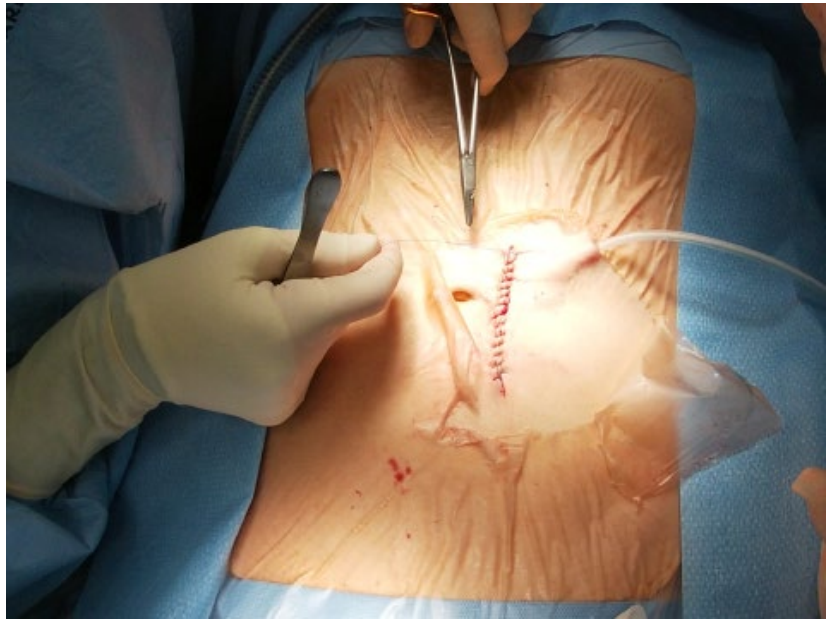


Subcutaneous Closure

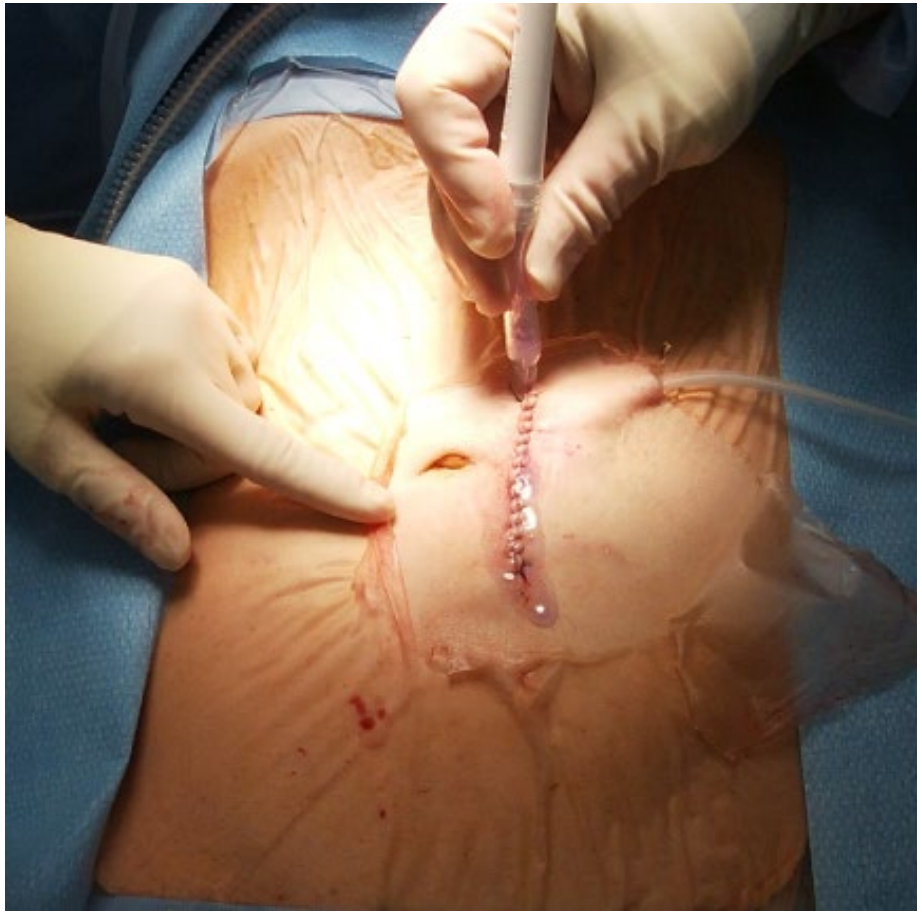




Skin Closure



Put On Skin Glue
and You're Done



Questions?

Average OR Time
40 Minutes

Polling Question

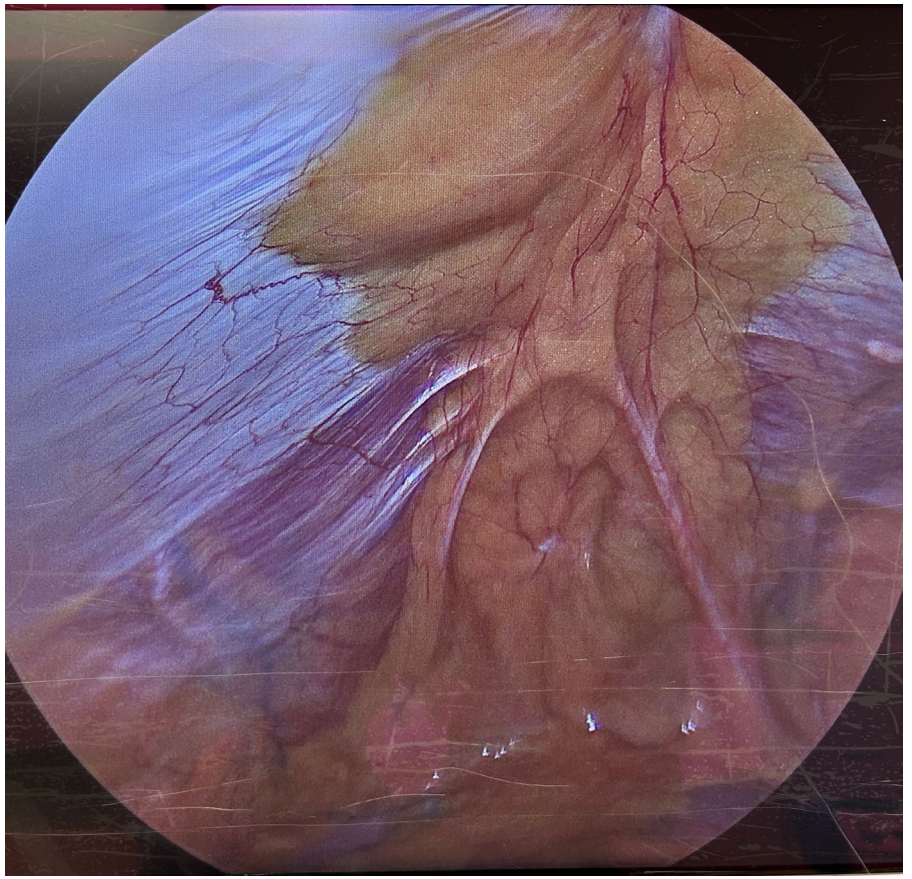
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What do you think is the biggest potential benefit of ISPD for patient with sudden kidney failure?

- Avoid emergency hemodialysis
- Start dialysis at home sooner
- Increase home dialysis initiations from CKD
- Reduce delays in treatment
- Not yet sure

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What to look out for - a Fascia/adipose trap



KHARES Social Media

Kidney Health Analytics and Responsive Emergency Support

Facebook

Instagram

X

LinkedIn

General Inquiries/PFE/Network Collaboration
KHARES@ipro.org

KHARES Hotline: 866-446-3507

Thank You for Attending

Kidney Health Analytics and Responsive Emergency Support

Please take a moment to complete the event assessment

Working together. Responding together. Supporting every kidney patient.

KHARES Leadership Team

- **Sue Caponi** – Project Director
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How to Reach Us

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General Inquiries / PFE / Network Collaboration
KHARES@ipro.org

Recalls & Communications
KHARESCommunication@ipro.org

KHARES Hotline
866-446-3507

One Team. One Mission. Uninterrupted Care for Every Kidney Patient.

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