Brian Martindale, Bay City, MI
AKF Ambassador

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FIGHTING ON ALL FRONTS

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AKF in ACTION

Fighting kidney disease and helping people live healthier lives.

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Fistula and graft bleeds: What are they and how can they be prevented and treated?

If you receive hemodialysis through an arteriovenous fistula (AVF) or a graft (AVG), you should be aware of the risk of unexpected bleeding and ruptures through your dialysis access point. While rare, these are serious occurrences that can lead to rapid and significant blood loss, requiring urgent action, particularly in home settings where timely medical assistance may not be available. Over 80% of fistula and graft ruptures occur at home.

Know your access site

Whether you receive hemodialysis in a clinic or at home, you should regularly make sure your fistula or graft is healthy and functioning properly and not rely solely on your dialysis team or care partner to do this. Check your fistula or graft regularly for:

- Swelling
- Bleeding
- Changes in thrill (the vibration felt over the access site)
- Skin breakdown or signs of infection

Don't wait for your next dialysis session to speak up. If you notice anything unusual—or if something just doesn't feel right—**call your dialysis care team immediately.**

Build your bleeding kit

Health care professionals recommend that people on home hemodialysis have an emergency kit with these items:

- 4 gauze packets
- 1 roll of adhesive tape
- 4 pressure pads
- 2 paper towels
- 1 pair of large gloves
- 1 tourniquet

Store these in an easy-to-reach place or a bag you carry often—you may not have time to search for supplies during an emergency.

What to do if your fistula or graft starts bleeding outside of a dialysis clinic:

Remember: If a bleed occurs, your main priority is to stop the bleeding, not preserve the function of your fistula or graft, as alternative access can be created.

- Use at least two fingers to hold the gauze
- Apply firm, continuous pressure
- Wait at least 10 minutes before checking to see if the bleeding has stopped
- When bleeding stops, apply fresh gauze and tape or a clean pressure pad
- If bleeding continues after 10–15 minutes, or starts again, **reapply pressure and call 911 or seek emergency help immediately.**

Stay prepared. Stay safe.

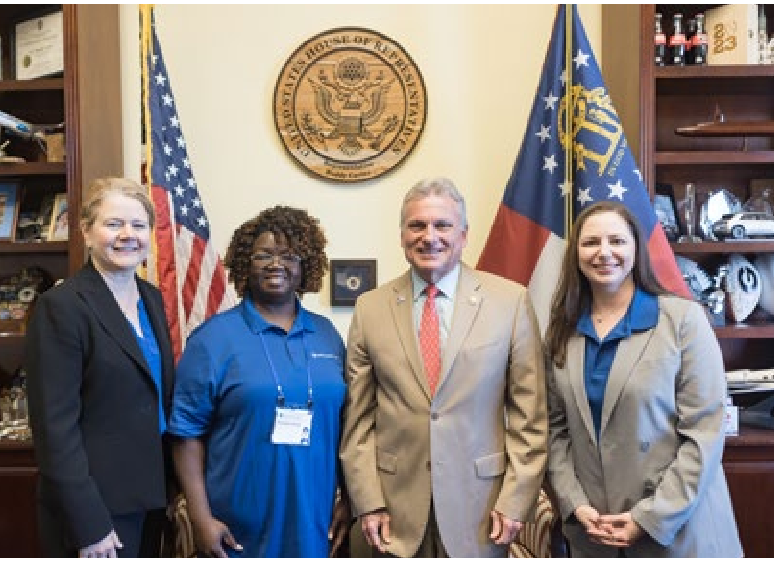
Unexpected bleeding from a fistula or graft is rare, but preparation can make all the difference. Share this information with your care partner or family members and **practice what to do in an emergency.**

New tool: Fistula caps

Innovative **fistula caps** are now available to help manage emergency bleeds and have been used in the United Kingdom. They are starting to become available in some areas in the U.S. These small bottle-cap like devices create a **vacuum seal over the bleeding site**, helping to:

- Capture blood
- Promote clotting
- Stabilize the site until help arrives

Ask your care team if fistula caps are right for you—and learn how to use one in an emergency.



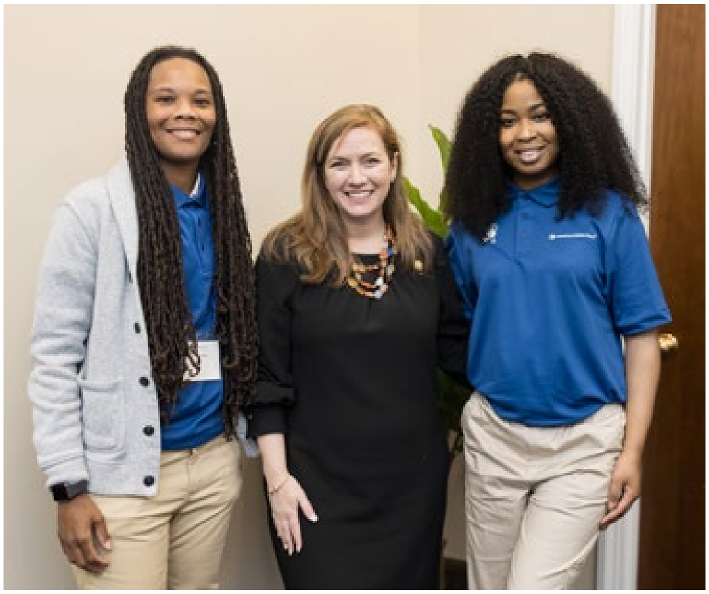
Above: AKF staff member Deborah Darcy, AKF Ambassador Shameka Smalls, Rep. Buddy Carter and AKF Ambassador Valarie Kite

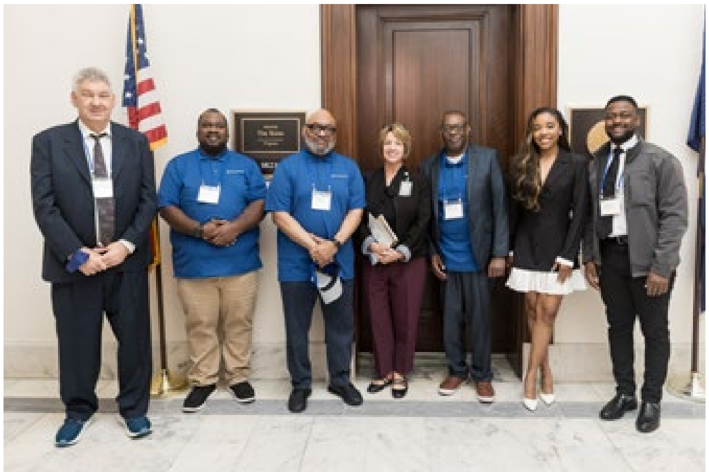
AKF Ambassadors urge lawmakers to protect living donors and Medicaid during 2025 Kidney Action Summit

On May 7, 30 AKF Ambassadors representing 18 states and the District of Columbia traveled to Capitol Hill to advocate for policies that help protect living kidney donors and people with kidney disease. Over the course of the day, Ambassadors had 58 Congressional meetings to advocate for two vital issues:

- **The Living Donor Protection Act of 2025.** This bipartisan legislation would prevent insurers from denying or canceling coverage, refusing to issue coverage, changing the price of coverage, or otherwise modifying any aspects of life, disability or long-term care insurance for someone solely because they are a living organ donor. The legislation would also ensure that living organ donors have Family Medical Leave Act protections so they can take time off work to donate a kidney and recover without fear of losing their job. For more information on this bill, visit **kidneyfund.org/ldpa-2025**.
- **Protecting Medicaid.** Congress is considering legislation that would result in significant changes to the Medicaid program, a vital lifeline for millions of low-income Americans living with or at risk for kidney disease. The nonpartisan Congressional Budget Office estimated there would be at least $716 billion cut from Medicaid if the bill as passed by the House of Representatives is enacted, resulting in nearly 8 million people losing their health insurance. AKF is opposed to this bill, which would also result in changes to Affordable Care Act Marketplace coverage and millions of others losing health insurance. AKF will continue to report on this issue in the next edition of this newsletter. For more information on the proposed cuts to Medicaid, visit **kidneyfund.org/Medicaid-changes**.

To learn more about becoming an AKF Ambassador and getting involved in AKF's Advocacy Network, visit **kidneyfund.org/advocacynetwork**.





(Upper photo): From left to right: AKF Ambassador Ariel Brigham, Rep. Lizzie Fletcher and AKF Ambassador LaToya Turner.

(Bottom photo): From left to right: AKF Ambassadors Harald Stellwag, Jr., Quenton Turner-Gee and Patrick Gee; Legislative Assistant Siobah Murray; AKF Ambassador Steven Walker and AKF staff members Asia Mason and Andrew Richardson.

Kidney Health Coach Health Equity Grant recipients: Using education as a powerful tool in the fight against kidney disease

AKF's Kidney Health Coach (KHC) program is our free, community health education program that equips health professionals and the public with the knowledge and tools to educate patients and the community about preventing and managing kidney disease. In the second year of the KHC Health Equity Grant program, AKF awarded 19 coaches and four organizations with grants. Here is an overview of how these four community organizations used their grants.

Alpha Chapter, Inc. of Chi Eta Phi Sorority, Inc.

Alpha Chapter, Inc., the charter chapter of Chi Eta Phi Sorority, Incorporated® was founded in 1932 in Washington, D.C. Guided by its motto, "Service for Humanity," the chapter is dedicated to helping develop healthy communities through advocacy, collaboration, education, leadership, research and service.

"Through engaging presentations, hands-on activities and real-life stories, our goal is to break down barriers to understanding the importance of kidney health," said Joan Smith, a nurse practitioner with a doctorate in nursing practice and the education committee chair for the Alpha Chapter, Inc. of Chi Eta Phi Sorority, Inc. "We believe that education is a powerful tool in the fight against kidney disease, especially in underserved communities. The support from the American Kidney Fund has been instrumental in helping us bring this vision to life, and their resources have greatly enhanced our events."

Jackson State University

Jackson State University is a historically Black university focused on educational excellence and empowerment within the African American community. The university is dedicated to providing high-quality education, fostering research and community service, promoting social justice and advancing underserved communities.

As part of that overall mission, Jackson State's Department of Health, Physical Education and Recreation runs a program to teach fourth graders in the Mississippi Delta about nutrition and kidney health. "This program is not just about imparting knowledge; it's about nurturing a healthier future," said Brieah Hudson, who has a doctorate in public health and is the program's undergraduate coordinator. "Understanding the importance of nutrition can empower these young minds to make better choices, fostering lifelong habits that support their overall well-being. The American Kidney Fund has been instrumental in our success, providing resources and support that have allowed us to create engaging, impactful programs. Together, we are planting the seeds for healthier communities, one lesson at a time."

Lambda Chi Chapter, Chi Eta Phi Sorority, Incorporated®

The Lambda Chi Chapter of Chi Eta Phi Sorority, Inc® was established in 1965 as a professional organization for registered nurses and student nurses. The chapter has programs focused on health promotions, disease prevention, leadership development, mentoring, recruitment, retention and scholarship. Lambda Chi serves the community through health fairs and other venues, providing education that promotes a healthy lifestyle.

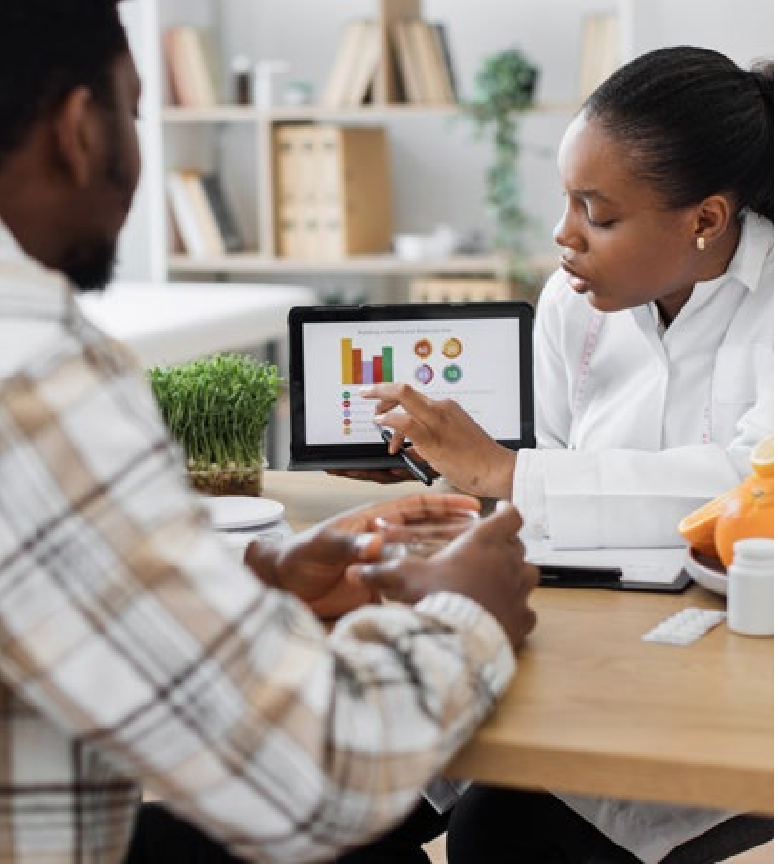
"The Lambda Chi Chapter is dedicated to service for humanity," said Nikeyia Davis, a nurse practitioner and the recording secretary for the Lambda Chi Chapter. "Currently, our kidney education has been presented at several faith-based organizations. It gives us great pleasure to contribute to decreasing disparities within our community, which is why we applied for the KHC grant. We've had several people interested in becoming coaches as well."

Northern Virginia Baptist Association (NVBA)

The NVBA was organized at the First Baptist Church of Warrenton, Virginia in 1877 with the purpose of promoting the union of churches, encouraging Christian and general education and advancing the cause of Christ consistent with the word of God. A critical branch of the NVBA is its Commission on Health and Wellness (COHW), which promotes the spiritual, physical, mental, environmental, social and financial health of individuals, affiliated churches and their surrounding communities at large, regardless of religious beliefs or affiliations.

"[The KHC Health Equity Grant] provides us the tools and resources to equip the most vulnerable populations who are at the greatest risk for developing chronic kidney disease with information that can potentially be life-changing and lifesaving," said Sister Coyan Lewis, chair of COHW. "As individuals become Kidney Health Coaches, each one can teach others!"

For more information on the Kidney Health Coach program, visit **kidneyfund.org/khc**.



All about kidney-friendly eating patterns

A kidney-friendly eating pattern is a way of eating to support your kidney health and improve overall health. It includes foods that are easy on your kidneys and limits other foods and fluids so certain minerals in those foods, like potassium, do not build up to high levels in your body.

Eating pattern versus diet

“Diet” and “eating patterns” or “eating habits” are often used in the same way, but they refer to different approaches to eating. Diet refers to set guidelines of foods to eat or avoid for a specific period of time. Eating patterns or habits aim to improve your understanding of food and health that leads to long-term changes. It also considers factors like culture, preferences and lifestyle.

There is no such thing as a “kidney diet” with a specific list of foods all people with kidney disease should and should not eat. Each person with kidney disease is unique with specific needs, which is why it is important to work closely with your doctor and dietitian.

Plant-forward eating patterns for chronic kidney disease

Plant-forward or plant-based eating is an eating pattern that focuses on foods like vegetables, fruits and whole grains. This eating pattern has health benefits, including a lower risk of obesity, type 2 diabetes, high blood pressure and heart disease. In addition to focusing on consuming mostly plant foods (such as whole grains, fruits, vegetables, legumes, nuts and seeds), a plant-forward eating plan focuses on limiting animal foods such as meats, fish, cheese and milk and limiting ultra-processed foods such as sugary drinks, packaged snacks, fast food and frozen meals.

Vegan and vegetarian eating patterns are plant-based; however, you do not need to completely eliminate animal sources to follow a plant-based eating pattern. You can reduce your intake of animal products by choosing one day a week or one meal a day to be meatless, including plant-based proteins (beans, lentils, tofu, nuts) into your meals and filling half your plate with vegetables at each meal.

Some common plant-forward eating patterns include the Dietary Approaches to Stop Hypertension (DASH), Mediterranean Style and the Mediterranean-DASH Intervention for Neurodegenerative Delay (MIND). For more information on these patterns, visit **kitchen.kidneyfund.org/kidney-friendly-eating-patterns/**.

Tips for starting

When you have kidney failure—whether you are receiving dialysis or have a kidney transplant—you have unique nutrition needs. If you are interested in following a plant-forward eating pattern, it’s important to work with a registered dietitian. A registered dietitian is someone with special training in food and nutrition who can help guide you in building an eating pattern that works for you. They will review your labs to make sure your phosphorus and potassium levels stay within normal range and recommend how much protein you need. For more information on working with a dietitian and finding a dietitian who is right for you, visit **kitchen.kidneyfund.org/ask-a-dietitian/**.

For more information on kidney-friendly eating patterns, scan this QR code:

AKF's program supporting living kidney donors expands to Illinois and southern Virginia

As part of AKF's continuing efforts to increase living kidney donation, AKF's Living Donor Assistance Program is now open in Illinois and all of Virginia (instead of solely northern Virginia). The program, which aims to remove financial barriers to living donation, provides financial assistance to living kidney donors anywhere in the country who are donating a kidney to a recipient in Massachusetts, New York City, Washington, D.C., Maryland, Virginia or Illinois.

Grant specifics

- Grants are for reimbursement of out-of-pocket travel-related and childcare expenses incurred by living donors
- Grants are up to $2,500 per donor
- One lifetime grant is available per living kidney donor

Eligibility

- Open to individuals who donated a kidney within the 12 months before their application submission date
- Kidney recipient's evaluation and/or surgery took place at a hospital in Massachusetts, New York City, Washington, D.C., Maryland, Virginia or Illinois.
- Donor incurred out-of-pocket expenses not covered by insurance or reimbursed by a similar assistance program
- Donor must permanently reside in the U.S. or its territories
- Living donor or recipient financial information is not required or considered when evaluating applicants for program eligibility

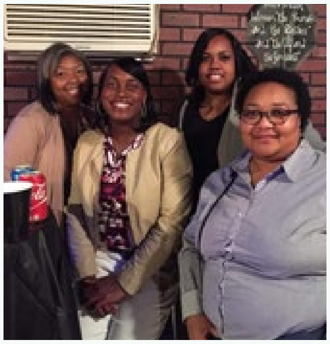
To apply

For questions regarding the Living Donor Assistance Program, please reach out to **livingdonor@kidneyfund.org**.

To view the Living Donor Assistance Program webpage, visit **kidneyfund.org/ldap**.

The Living Donor Assistance Program is made possible in part by support from the Sievers Family Charitable Fund and the Friends of David Atkins.

AKF Ambassador shares her journey with ADPKD and highlights the need for increased awareness and education of the genetic disease



AKF Ambassador Tamara Walker was diagnosed with autosomal dominant polycystic kidney disease (ADPKD) shortly after giving birth to her second son in the early 2000s. She felt pain in her abdomen and thought it may have had something to do with giving birth. As a precaution, Tamara visited her OB-GYN, who sent her to the hospital for ultrasounds and tests. Those tests confirmed that she had ADPKD.

While Tamara had heard of ADPKD and was aware that her father and his siblings had been diagnosed with the disease, she did not know ADPKD could be passed down to her or her children until years later. This lack of awareness left Tamara feeling shocked, frustrated and devastated by her diagnosis. "If I had known, if I was educated, I would have been a little more successful with battling the disease," she said.

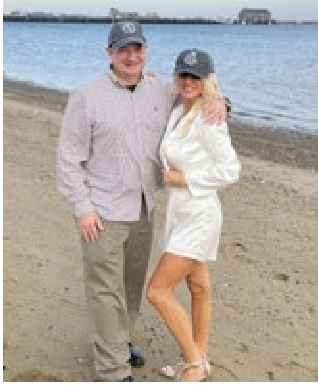
Tamara described the impact ADPKD has had on her life as "monumental." "It's a long journey and it affects not just me, but the whole family and generations after me, [including] my children."

As a result, she emphasized the need for greater education and awareness of APDKD, and for people who are at risk to talk to their doctor and their families about getting screened. She also urged people to make sure that their doctor is knowledgeable on how to treat polycystic kidney disease specifically.

For more information on living well with APDKD, visit **kidneyfund.org/pkd**.

AKF's ADPKD education campaign was developed with support from Otsuka America Pharmaceutical, Inc.

‘I just wanted to make him feel better’: Tracey Previti shares how she donated a kidney to her now-husband with help from AKF’s Living Donor Assistance Program



When Tracey Previti first told her family and friends that she was going to donate her kidney to her then-boyfriend John, they were unsure if she was making the right choice. Tracey said that their reaction was understandable considering that she John were only dating at the time. “It wasn’t like we were together forever, you know?” she said.

Tracey and John originally started dating in 2019 and reconnected in 2021. “From there, we just knew, this is it,” Tracey explained.

About a year later, Tracey was surprised to learn that John was in kidney failure and would soon need to begin dialysis unless he could get a kidney transplant. “I said, ‘If I could take this away from you, I would. If I knew I was a match, I definitely would,’” Tracey told him. The offer even surprised her. “I wasn’t even an organ donor, at that point, I just wanted to make him feel better.”

Tracey knew that John hadn’t been feeling well for a while at that point. “He was sick, and he wasn’t telling me exactly what was going on,” Tracey said. When John did share his struggles with his kidney health, Tracey learned that it was a genetic kidney disease called polycystic kidney disease (PKD) and it was affecting multiple members of his family.

Before learning about John’s health struggles, Tracey admits she knew very little about kidney disease. “I just knew you could live with one kidney. That’s all I knew,” she said. “I didn’t really know it can kill you…I just thought like, oh, dialysis, you can be on dialysis forever, but I now know you can die from kidney disease, and no one really talks about it.”

Tracey also learned about paired organ donations, which is when two donor and recipient pairs swap donors to get better kidney matches. She was not a match for John, but on Oct. 25, 2023, Tracey donated a kidney and John received one.

Tracey said the transplant made John “just feel so much better.” Unfortunately, Tracey’s recovery was a little more complicated. There was a problem with her incision site that required two additional surgeries to correct. Not only did this cause physical and mental stress, but the additional surgeries also caused some financial stress. While the Family and Medical Leave Act covered a good percentage of her salary, it didn’t cover all of it. AKF’s Living Donor Assistance Program stepped in and gave Tracey a grant. “It was just a relief,” she said.

Afterward, she decided to “pay it forward,” and she and her coworkers contributed over $1,800 to the Living Donor Assistance Program. “I did it because I knew what donors go through, and it’s physical,” Tracey said. “But I think it’s mentally harder than physically. You just worry constantly … I just wanted [donors] to know that there is help out there if you need it.”

Almost exactly a year after their transplant surgery, Tracey and John were married in a “short and simple” ceremony on Oct. 31, 2024. “We just want to spend the rest of our lives with each other,” said Tracey.

Visit **kidneyfund.org/tracey** to read Tracey’s full kidney donation story. To view the Living Donor Assistance Program webpage, visit **kidneyfund.org/ldap**.

VELPHORO®
(sucroferric oxyhydroxide)
chewable tablets

VELPHORO
Voices

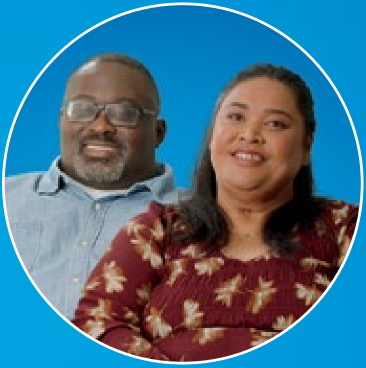
VELPHORO
10 YEARS
CELEBRATING PATIENTS

Real people, real success stories with Velphoro

Listen to patients share their personal journeys with Velphoro.

"I would recommend Velphoro because you can break it, crush it, chew it, and it tastes great."

—Anita



"Velphoro helps me control my phosphorus and maintain it."

—Easter

"I could take one phosphate binder instead of six with each meal."

—Antonio

"Ever since we switched my phosphate binder, my phosphorus has been spot on."

—Robert

The paid testimonials provided are representative of that individual's experience, and not all patients may experience these benefits.

Watch their stories at **VelphoroVoices.com.**

Scan the code with your cell phone camera

INDICATION

Velphoro® (sucroferric oxyhydroxide) is a phosphate binder indicated for the control of serum phosphorus levels in adult and pediatric patients 9 years of age and older with chronic kidney disease on dialysis.

IMPORTANT SAFETY INFORMATION

- Velphoro chewable tablets must be taken with meals. Velphoro should be chewed or crushed. Do not swallow whole. Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and other supplements. Velphoro can interact with other medicines.
- Tell your healthcare provider if you have any of the following: peritonitis (an infection) during peritoneal dialysis, significant gastric or liver disorder, recent major gastrointestinal (GI) surgery, a history of hemochromatosis or other disease that results in iron buildup in the body. People with these conditions were not included in clinical studies with Velphoro, and your healthcare provider will monitor your iron levels while you are taking Velphoro.
- Velphoro can cause side effects. The most common side effects are discolored stool, diarrhea, and nausea. Tell your healthcare provider if you have any side effect that bothers you or that does not go away.
- Discolored (black) stool is considered normal if you are taking an oral medication that contains iron, like Velphoro. Discolored stool may mask gastrointestinal bleeding, which was not a side effect of Velphoro in clinical studies.
- Before taking Velphoro, tell your doctor if you are pregnant, plan to become pregnant, or are breastfeeding.

Velphoro is available by prescription only. For additional Safety Information, please see full Prescribing Information at **Velphoro.com**.

To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Medical Care Customer Service at 1-800-323-5188 or FDA at 1-800-FDA-1088 or **www.fda.gov/medwatch**.

FRESENIUS
MEDICAL CARE
RENAL PHARMACEUTICALS

Distributed by: Fresenius Medical Care North America, Waltham, MA 02451
US-Velphoro-000083 Rev B 10/2024

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Brief Summary:

Please see Full Prescribing Information for additional information

VELPHORO®
(sucroferric oxyhydroxide)
chewable tablets

What is Velphoro and how should it be used?

Velphoro (sucroferric oxyhydroxide) is a phosphate binder used to control phosphorus levels in adult and pediatric patients 9 years of age and older with chronic kidney disease on dialysis.

How should Velphoro be taken?

Chew or crush Velphoro tablets, do not swallow whole.

The recommended starting dose for adults and pediatric patients 12 years of age and older is one 500 mg tablet three times daily with meals.

The recommended starting dose for pediatric patients 9 to <12 years of age is one 500 mg tablet two times daily with meals.

Follow all directions on your prescription label. Your physician may adjust your dose, as often as weekly, by 1 tablet per day until you meet your phosphorus goal.

How is Velphoro available?

Velphoro (sucroferric oxyhydroxide) is available as a 500 mg chewable tablet.

Is there any reason that you cannot take Velphoro after being prescribed by your doctor?

No.

Important note

Velphoro has not been studied in patients with peritonitis while on peritoneal dialysis, or those who have stomach or liver disorders, iron diseases, or those who have had abdominal surgeries. Tell your doctor if you have or had any of these.

What are some possible side effects?

The most common adverse drug reactions to Velphoro chewable tablets in hemodialysis patients included discolored stool (12%) and diarrhea (6%).

Discolored (black) stool is considered normal if you are taking an oral medication that contains iron, like Velphoro. Discolored stool may mask gastrointestinal bleeding, which was not a side effect of Velphoro in clinical studies.

The following adverse reactions were identified after Velphoro had been on the market by some patients and were reported voluntarily.

Tooth discoloration

Skin rash

The risk information provided here is not comprehensive. To learn more, talk about Velphoro with your healthcare provider or pharmacist. The FDA approved product labeling can be found at www.velphoro.us/ or 1-800-323-5188.

To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Medical Care North America at 1-800-323-5188 or FDA at 1-800-FDA-1088 or *www.fda.gov/medwatch*.

What should you discuss with your physician when taking Velphoro?

Some drugs may interact with Velphoro. Tell your health care provider(s) about all medicines you use now and any medicine you start or stop using.

Tell your doctor if:

You are pregnant or nursing

What happens if you take more than prescribed?

There are no reports of overdosage with Velphoro in patients. Low phosphorus levels should be treated by standard clinical practice.

Velphoro has been studied in doses up to 6 tablets per day.

HOW SUPPLIED/STORAGE AND HANDLING

Velphoro is a chewable tablet supplied as brown, circular, bi-planar tablets, embossed with “PA 500” on 1 side. Each tablet of Velphoro contains 500 mg iron as sucroferric oxyhydroxide. Velphoro tablets are packaged as follows:

NDC 49230-645-51	Bottle of 90 chewable tablets

Storage

Keep the bottle tightly closed in order to protect from moisture.

Store at 25°C (77°F) with excursions permitted to 15 to 30°C (59 to 86°F).

Distributed by:
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Waltham, MA 02451

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FRESENIUS
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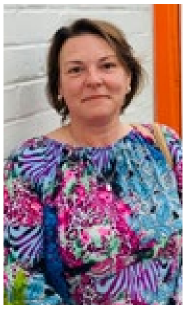
AKF staff spotlight



Name: Bridgit Phelps

Hometown: Fairfax, Virginia

What do you do at AKF? I am the director of peer-to-peer fundraising. I am responsible for all fundraising revenue through our peer-to-peer KidneyNation campaign and the 37 Mile Challenge. I work with corporate and community partners across the country to get them engaged with the AKF mission and coach them on fundraising and how to host a community event or online fundraiser.

Why are you passionate about fighting kidney disease? I see how kidney disease disrupts the lives of so many people. Although there is a lot of information available about kidney health and ways to prevent kidney disease, many people are still not aware. I love working with those affected by kidney disease so that I can help educate them as well as help them raise funds so that AKF can continue to provide vital programs and services to our kidney community. Growing up, my mother worked as a critical care nurse. I knew I didn't want to go into medicine, but I did want to do something that could help others, and nonprofit development work is my way of doing that.

What is the best part of your job? I love that I get to build relationships with so many people around the U.S. and really get to know them and help them. Their stories are so inspiring, and they motivate me to do everything I can to make an impact.

What are your favorite hobbies outside of work? I love to read, get outside and be active with my miniature dachshund, Cookie, and binge-watch crime/investigative dramas. I think in a past life I was a forensic scientist!

Kidney Kitchen®

This and other recipes can be found at ***kitchen.kidneyfund.org***.

Quinoa Fruit and Nut Salad

Makes: 4 servings
Serving size: ½ cup

Prep time: 25 min
Cook time: 10 min
Chill time: 25 min

Recipe contributed by Linda Blaylock of CKD Culinary Consulting, Chef, Certified Nutritionist, Kidney Health Coach, and Creator of the How to Eat for CKD Method

Nutrition facts

(1 serving = ½ cup)

Calories = 211
Carbohydrates = 27 g
Sugar = 13 g
Fiber = 3 g
Calcium = 22 mg
Fat = 12 g
Saturated Fat = 2 g
Trans Fat = 0 g
Protein = 3 g
Phosphorus = 112 mg
Cholesterol = 0 mg
Sodium = 155 mg
Potassium = 217 mg

Ingredients:

- ¼ cup dry quinoa (or 1 cup cooked)
- ½ teaspoon plus 2 tablespoons olive oil, divided
- ¾ cup water
- 1 large orange (1 teaspoon of zest and ¼ cup juice)
- 2 tablespoons lime juice
- 2 teaspoons Swerve® brown sweetener
- ¼ teaspoon salt
- ½ teaspoon allspice
- ½ teaspoon white pepper
- 1 firm sweet-tangy apple, cored and chopped (1 cup)
- ¼ cup celery, sliced
- ¼ cup cashew halves (can use another nut if you prefer)
- ¼ cup dried cranberries
- ¼ cup green onions, sliced

Directions:

1. Rinse the quinoa in a fine meshed strainer until water runs clear.
2. In a saucepan, heat ½ teaspoon of oil over medium heat, then add the quinoa and cook 1 to 2 minutes or until fragrant and it begins sticking to the pan and jumping.
3. Add the water and bring to a boil. Reduce heat to medium-low, cover and simmer about 7 to 12 minutes or until water is absorbed.
4. Place orange zest and juice, olive oil, lime juice, sweetener, salt, allspice and white pepper into a small jar. Shake well to combine. Set aside.
5. When quinoa has absorbed the water, remove the heat. Remove the lid and cover with a clean towel. Let stand for 5 minutes, then fluff with a fork. Let it cool for 20 to 30 minutes.
6. When quinoa is cooled, toss with the apple, celery, cashews, cranberries and onions.
7. Add the dressing. Toss well and serve ½ cup per person.

Cooking Tip: Make this into a light lunch by adding ½ pound of diced or shredded chicken, tofu, or vegan chicken.

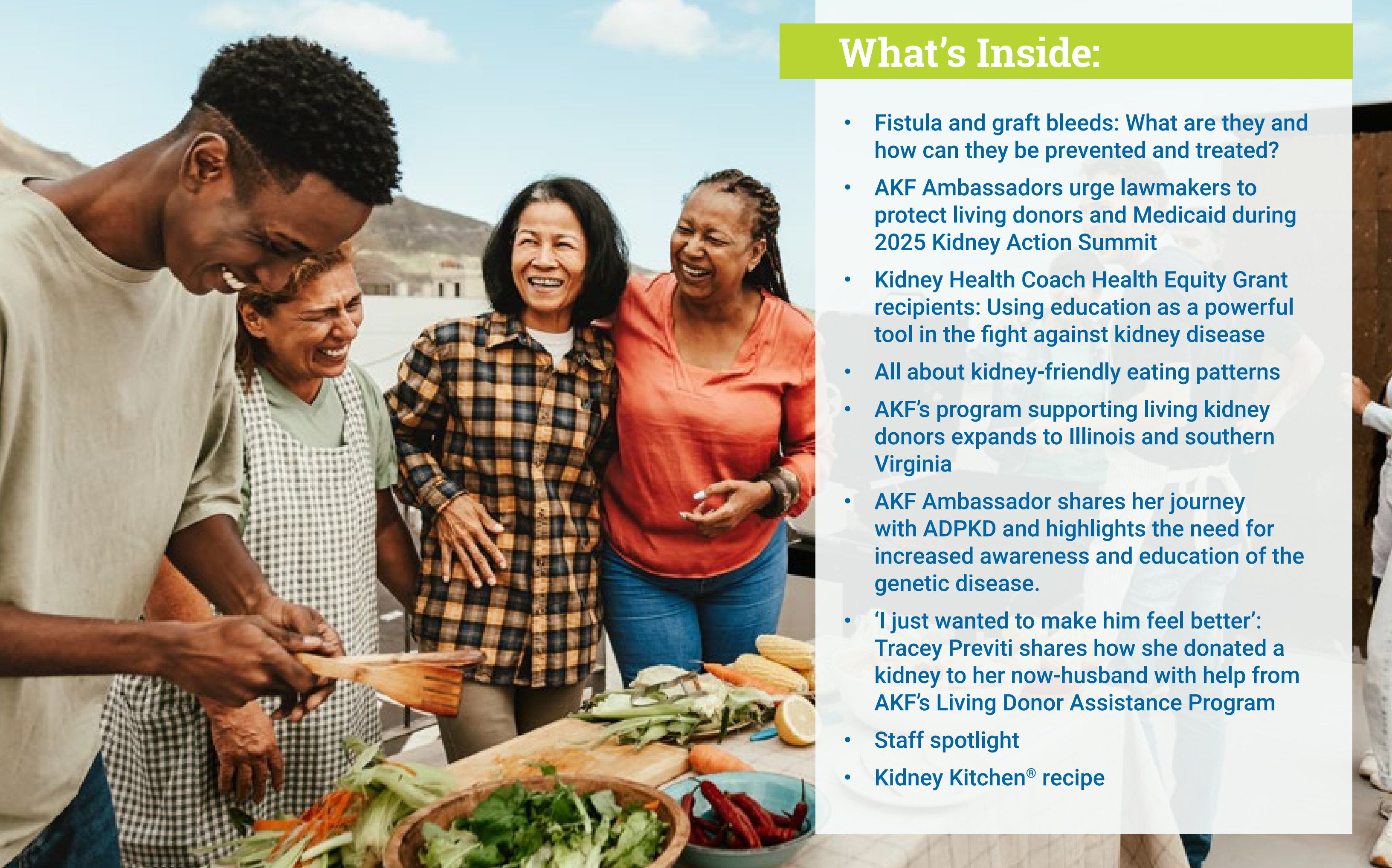
American Kidney Fund®
FIGHTING ON ALL FRONTS

11921 Rockville Pike
Suite 300
Rockville, MD 20852
800.638.8299

KidneyFund.org

AKF is fighting on all fronts as the nation's leading kidney nonprofit.

Sign-up to receive our monthly e-newsletter to get the latest updates at **KidneyFund.org/sign-up**.



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- Kidney Health Coach Health Equity Grant recipients: Using education as a powerful tool in the fight against kidney disease
- All about kidney-friendly eating patterns
- AKF's program supporting living kidney donors expands to Illinois and southern Virginia
- AKF Ambassador shares her journey with ADPKD and highlights the need for increased awareness and education of the genetic disease.
- 'I just wanted to make him feel better': Tracey Previti shares how she donated a kidney to her now-husband with help from AKF's Living Donor Assistance Program
- Staff spotlight
- Kidney Kitchen® recipe