

Explore Transplant

Education Program for Kidney Patients

This folder helps kidney patients make informed decisions about their treatment options.



Here's what you'll learn about in this folder:

- ▶ The basics of kidney disease
 - What kidneys are and what they do
 - What is kidney disease
 - How to slow down kidney disease
 - What your kidney disease treatment options are
- ▶ What you need to know about kidney transplants
 - Pros and cons of different treatment options
 - Common questions about kidney transplants
 - What it's like to get a transplant
 - Possible risks of kidney transplant
- ▶ What you need to know about living donation
 - Ways that people can donate a kidney
 - What it's like to donate a kidney
 - Possible risks to a living donor
- ▶ How to decide what to do about your kidney disease
 - Reasons to explore transplant
 - Who can support you
 - List of helpful resources list
 - Compare and choose a next step, such as learning about your treatment options, making dialysis better, or beginning transplant evaluation

Also, learn real-life donation stories from people who have received living donor transplants or donated kidneys

Pricing

Explore Transplant materials

Item	Price each at quantity		
	1-199	200-499	500+
Explore Transplant Patient Education Packet, English or Spanish* DVD only	\$10.00	\$9.25	\$8.50
Explore Transplant Patient Education Packet, English or Spanish* with DVD and unlimited video Streaming	\$10.50	\$9.75	\$8.50

*Print materials in Spanish; DVD with Spanish-language voiceover

Order form

Explore Transplant materials

Item	Quantity	Price ea.	Total
ET English folder with DVD			
ET Spanish folder with DVD			
ET English folder with DVD and video streaming			
ET Spanish folder with DVD and video streaming			
Subtotal			
Ground shipping & handling (12% of subtotal with a minimum charge of \$6)			
Grand total			

Shipping and payment information

Name: Date:

Organization:

Address:

City: State: Zip:

Phone: Email:

Send an invoice (PO #, if applicable _____) Check enclosed (to Health Literacy Media)

Credit Card: Amex Mastercard VISA

Credit card # _____ Expiration _____

Name on card # _____ Signature _____

Please email form to Bridgette Sims at bsims@healthliteracy.media