You are incredible. Each day, for years, you have done whatever it takes to make sure that our patients receive the best care possible. Sometimes it was as simple as giving a patient a warm blanket or checking to see how their weekend went and letting them know that you valued them as a person. Today, you are doing so much more. At a time that we are all worried about COVID, our patients are terrified by COVID. By allowing our patients to continue to receive care in their home DCI dialysis clinic, you are allowing them to receive dialysis in a comfortable place, a safe place where they have gone three days a week for as long as they have received their dialysis care. Each of our clinics is a community. You have created our clinics to be a warm, inviting community. Today you are also making sure that it is a safe place for our patients to receive their care.

If our patients ask for a mask, even if they are asymptomatic, please give them a mask. If our staff asks to wear a mask and they are not treating a patient who is COVID+ or a PUI, please let them wear a mask. We want our patients and staff to feel as safe as possible. In addition, based on new information, it seems that we may be decreasing the likelihood of COVID transmission if everyone wears a mask.

You are working hard to make sure that our patients receive safe care. By separating patients who are a PUI and patients who are COVID+ at least six feet from each other, you are making sure that these patients can still receive care in a familiar environment of a DCI clinic while also ensuring that the other patients in the clinic receive safe care. By carefully cleaning the machine and carefully cleaning surfaces six feet around the machine after a treatment for a patient who is a PUI or COVID+, you are making sure that the next patient to receive dialysis in that space receives safe care.

And you are supporting our direct patient care staff, making sure that they feel safe in our clinic. Thank you for advocating for the use of N95 masks for our direct patient care staff.

We have been talking about N95 masks for weeks. It is time that we listen to you and recognize that it will help our staff if they can use a N95 mask while treating a COVID+ patient. Clinically, N95 masks are not necessary for care for patients who are a PUI or COVID+. According to CDC recommendations, N95 masks do not need to be used for these treatments and Northwest Kidney Centers is not using N95 masks. One reason that this decision has been so difficult is that the N95 mask has been in short supply, and we worry that every mask used in dialysis is one that might be denied to clinicians who need them in environments where aerosolized procedures are performed. But I know that for our direct patient care staff, there is a different level of stress when caring for a patient who we know is COVID+. On Friday we decided to allow our direct patient care staff to wear a N95 mask when treating a patient who is COVID+. 
I wish I could stand by your side while you are providing critically important dialysis care for our patients who are COVID+. For now, when you put on an N95 mask before you treat someone who is COVID+, think of it as a reminder that we are thinking of you and are at your side while you provide this critically important care.

There is a fear that we will run out of N95 masks. On Friday, Donovan Schultz did an incredible job tracking down N95 masks across DCI. We have 9,185 N95 masks across DCI. We currently have 80 patients who are COVID+ (and some are still in the hospital and have not returned to the clinic). The nurses in our hospital services program are treating 102 patients who are COVID+. If we use an N95 mask for each treatment for these patients, we will use less than 546 masks next week. I expect that the number of COVID+ patients will increase, but I want you to know that we have an adequate supply to use N95 masks for treatment of patients who are COVID+, starting this week.

We recommend that you cover the N95 mask with a surgical face mask. After you have treated a patient who is COVID+, please keep the N95 mask and continue to wear it in the clinic if you wish, but discard the surgical mask. I see the N95 as a badge of honor for our brave staff who are caring for our patients who are most in need.

To our patient care staff working for Hospital Services, we are committed to making sure that your work environment is as safe as possible. If you are treating a patient who is COVID+ in the hospital, we will make sure you can wear an N95 mask, just like the staff in the clinic. If you are treating a patient who is COVID+ or a PUI, we are committed to making sure that the gowning process you follow in the hospital is the same as the gowning process in the clinic. We are working on a process for DCI to provide isolation gowns to the hospital to allow you to follow the process followed in DCI clinics and will update you on this process next week. Mary Hobeika did an excellent job advocating for you yesterday. Mary – thank you for your leadership and thank you for making sure that our patient care staff in Hospital Services are able to work in a safe environment.

Similar to N95 masks, there is a fear that we may run out of surgical face masks. The fact is that we have an adequate supply of surgical face masks. We currently have 14,200 boxes of fifty masks at the Supply Company, totaling 60,000 masks, along with 3,500 boxes in our clinics for another 175,000 masks. In each of your locations, you did an incredible job of ordering adequate masks before the mask shortage. Last week, we only needed to send out a total of 40 boxes to two DCI locations to ensure that we had an adequate supply of masks for the week.

We have also been able to help some of our dialysis partners who have been at our side in the arena. Last week, we sent 40 boxes of surgical facemasks to our friends at Central Florida Kidney Centers. We hope that this will help a little over the next few weeks. Dennis Buhring, the CEO for CFKC emailed me to say, “I want you to know I shared your generosity and care and concern for CFKC with my entire Board. They asked me to THANK YOU for thinking and helping us. This also boosted the morale of my staff. We all thank you!”
I am honored to work for a company that thinks of the needs of others during a time of crisis. It definitely is a difficult balancing act to both ensure that we have an adequate supply for our patients and staff and also help out others, but I greatly appreciate the leadership of DCI for all that you are doing to make sure that we are helping others when we can.

On Monday, we were given the opportunity to purchase a bulk shipment of 25,000 boxes of surgical face masks, the total number of surgical face masks would be 1,250,000. The masks would be delivered in “Mid-April”. We looked at our needs for the next ten weeks and decided that we only needed 14,000 boxes. We still ordered all 25,000 boxes.

Why did we do that? We ordered all of the boxes not to hoard, but to share. On Tuesday I reached out to the independent dialysis providers who have been at our side in the arena and asked if it would help them if we could provide additional surgical face masks to them. Every provider was interested. We allocated the supply based on the number of patients served by each provider so that providers with more patients could receive more masks. And the price they will be paying for the masks is exactly the same as the price that DCI is paying for the masks. At a time of need, it is not appropriate to charge more to our friends who have been at our side in the arena. At a time of need, it is critical to help our friends whenever possible.

On Thursday, I sent out this email to our partners -

**From:** Doug Johnson  
**Sent:** Thursday, April 02, 2020 11:10 AM  
**Subject:** Sharing Face Masks

Thank you everyone for your quick response this am.

Our cost for the masks is your cost – [removed] cents per mask.

For shipment date, we have only been told “middle of April.” Will let you know when we receive. At that point, I will connect you with Hal Whetstone (DCI Supply Company) and he will coordinate everything for shipment.

As a group, we are:
- Atlantic Dialysis
- Centers For Dialysis Care
- Central Florida Kidney Centers
- Dialysis Center of Lincoln
- DCI
- Health Services Management
- Independent Dialysis Foundation
- Northwest Kidney Centers
- Puget Sound Kidney Centers
As a group, we care for more than 27,000 patients. We are much larger together than each of us individually.

I am honored to be your partner. Thank you for standing by our side during the COVID crisis. It is wonderful to not be going this alone.

Doug

I love that I work for an organization that made this happen. To DCI leadership – I am honored to be your partner and to be a part the leadership team. I am so impressed that there was never a question about whether we should pay the extra money now to help our partners during COVID. Thank you for thinking of others and making sure that we are a contributing member to the dialysis community.

Our partners were greatly appreciative of the help. One stated, “Our relationship with DCI is like a great big security blanket that keeps us warm and safe.” Another stated, “You are generous to a fault….not the worst fault you could have 😊.” We are so fortunate to have such incredible partners who are dedicated to ensuring that patients with kidney disease receive the best care possible. I am so happy that we have been able to help our partners in this time of need.

Thursday night, Kuma Sharma from The University of Texas San Antonio proposed a creative approach to help hospitals in New York City provide dialysis care if there are not enough dialysis nurses to provide care in the hospital. He wrote –

I have been in touch with my friend and colleague in Mt. Sinai in NYC. He said they were running short of dialysis nurses due to illness and not being able to report to work. Could the DCI company spearhead a nationwide movement to mobilize their staff, dialysis nurses and nephrologists to offer virtual advice? For example, a dialysis nurse in San Antonio could teach a non-dialysis nurse to connect a patient and operate a machine.

I called Dr. Robert Taylor on Friday morning and he started working on a solution to help. We will only follow this process if a patient is about to be denied dialysis care because the hospital does not have a dialysis nurse available to treat the patient. In this situation, we will use the
Zoom licenses that we received on Monday to provide virtual support. Robert has identified three REACH nurses who have recent hemodialysis experience and who are available and willing to help. We hope to find more nurses who will be able help. So many people stepped forward on Friday to help us develop this approach. Thank you to everyone for all that you did to get this started.

We are still working on this approach. I hope we can get started soon. It likely will not be perfect. But it will be right and it will help those in need. Thank you Robert for your leadership and for those who have been helping build this process, thank you for all that you are doing to make this possible.

At DCI, we have also been fortunate to receive the help of others. Many local emergency agencies have provided medical supplies to our clinics to help during this time of need. On Wednesday, we received this email from Tara Anthony, Nurse Manager at the DCI Waverly clinic:

From: Tara Anthony  
Sent: Wednesday, April 01, 2020 4:51 PM  
Subject: WAVERLY CLINIC

Good evening. I wanted to let you know that the Humphreys County Emergency Management Team donated a N95 mask to each one of the staff at the Waverly Clinic as well as to all the medical professionals in this county. The CNO of our local hospital is also willing to fit anyone who is taking care of a positive patient at this clinic. At this time, no one is wearing their mask. We are using the regular mask that we have always used. Please let me know if there is any issue with this. Thanks.

What a thoughtful gesture from the Humphreys County Emergency Management Team. In my opinion, the staff at the clinic should wear the N95 masks under their surgical face masks, not because of clinical need, but as a reminder of the support by the community as they provide critically important care to our patients. It warms my heart to see the support that is being provided in the community around Waverly, Tennessee during this time of need.

As we partner with you to ensure safe care for our patients during COVID, we owe you an obligation to keep you up to date about what we are seeing and to pause and allow you to share with us your current greatest challenges. Next week, we will have calls on the following times –

Dr. J and Doug – Monday at 3 pm CT and 6 pm CT
Dr. J and Doug – Wednesday at 6 pm CT
Pam and Carol – Thursday at 2 pm CT
Dr. J and Doug – Friday at 3 pm CT
High level, this is what we are seeing. We have eighty patients who have TESTED positive for COVID and eighteen of the clinicians in our facilities have TESTED positive for COVID. For our hospital partners, we are also caring for 102 people who are COVID+ through our Hospital Services program. One Hospital Services staff member has tested COVID+ from a community transmission of COVID.

We are hardest hit in the following states –
- New York
- Louisiana
- Georgia
- New Jersey
- Connecticut

For those of you working in these states, we are thinking of you and we are by your side. Be strong and be safe. Let us know what we can do to help.

We also provide care in seventeen states in which neither patients nor clinicians have TESTED COVID positive. Do I think that we do not have any COVID positive patients or clinicians in these seventeen states? Absolutely not. I think it is critically important that we recognize that patients and clinicians who are PUIs could be COVID positive. But I also think there is a reasonable chance that timely testing will not be available in these communities during the next week. In my opinion, our approach to care in these communities should be built on the assumption that timely testing will not be available this week.

For those locations in which we have patients and clinicians in our clinic who are COVID TESTED positive, testing is more likely to be available. We are beginning to see that some of our patients and staff who are PUIs can get a COVID test. However, in many locations access to testing is limited and therefore many of our patients and clinicians who are PUIs are not able to be tested. In my opinion, our approach to care should be built on the assumption that these individuals will not receive testing this week. I think we should also recognize that the risk that a PUI patient or clinician actually has COVID-19 in this community is higher than in communities in which testing is not available (since currently testing allocation is being prioritized to locations with the largest concentration of people TESTING COVID positive).

There is also the dream world in which a patient or clinician screens positive, receives a COVID TEST and has results within twenty-four hours. Three weeks ago, we thought this was a likely scenario. I look forward to the day that this is the process in all of our communities. We already have the plan for this situation ready to go. I think it is important for us to recognize today that this process is not yet in place in the vast majority of the communities in which we care for patients on dialysis.

Forty-nine years ago (two years before Medicare covered dialysis) my father opened one dialysis clinic in Nashville, Tennessee to save the lives of eight patients. Today we care for more than...
15,000 patients in more than 250 clinics in 28 states. We are honored to have you as our partner and are honored to have the privilege of caring for so many patients in need across the United States.

The next months will be difficult. We will face many challenges. We will be most successful if we face this challenge together, putting the patient first and also making sure that we support each other.

Thank you for all you do to improve the care for our patients and to ensure that they receive safe care. Thank you for all that you are doing to support our communities. I am inspired by what you do every day and look forward to working with you as we face the COVID-19 challenge together.

Doug