47th Annual Dialysis Conference
Kansas City, Missouri
2027 Program

Thursday, February 25, 2027

Session 1: PD Fundamentals
1:00-3:00 pm

1:00 How PD Works (physiology)
1:20 Basics of Prescribing PD
1:40 What is the PET and How to Use It
2:00 Fluid Overload – Prevention and Management
2:40 Discussion

Session 2: HD Fundamentals
1:00-3:00 pm

1:00 Inside the Machine: Dialyzer Design and HD Technology Essentials
1:20 Cracking the Code: How to Write and Refine an HD Prescription
1:40 Keeping the Circuit Open: Anticoagulation Strategies in HD
2:00 When Things Go Wrong: Troubleshooting Dialyzer and Machine Complications
2:40 Discussion

Session 3: HHD Fundamentals
1:00-3:00 pm

1:00 HHD Technology
1:25 HHD - Rx and Various Forms (nocturnal, short daily and clearance implications)
1:50 Patient Selection for HHD /Role of the Care Partner
2:10 HHD Patient Retention
2:30 Choosing the Right Cannulation Technique: A Patient-Centered Approach *(Balancing Infection Risk Against Patient Comfort and Self-Cannulation Success)*

3:00 Break

Session 4: PD Fundamentals - PD Access
3:30-5:00 pm

3:30 PD Catheter Basics for the Nephrology Team
3:55 PD Catheter Flow Complications –Assessment and Management
4:30 Non-infectious Complications of PD – Leaks
4:45 Discussion

Session 5: HD Fundamentals
3:30-5:00 pm

3:30 Managing Common Intradialytic Complications (hypotension, hypertension, cramps))
3:55 Rounding That Matters: What Patients Actually Want from Their Care Team
4:30 The Symptoms We Don't Talk About: Sleep, Itch, Restless Legs, and Mood in HD
4:45 Discussion

Session 6: Impact of Climate Change on Kidney Health
3:30-5:00
3:30 When the Air Turns Toxic: Wildfires, Heat, and the Dialysis Patient
3:55 Rising Waters, Rising Risk: Floods, Hurricanes, and Dialysis
4:20 Ready for Anything: Building Disaster Resilience into Dialysis Care
4:45 Discussion

Friday, February 26

Session 7: General Session and Keynote Presentations
8:30-10:00 am
8:30 **Welcome/Awards**

Keynote Presentations
9:00 Innovations and Future Directions in PD - Olof Heimburger, MD
9:30 Resilience, Purpose, and Finding Wins Through Adversity - David Rush

10:00-10:30 am Break

Session 8: PD Fundamentals: Infectious Complications
10:30-12:00 pm
10:30 Infection Prevention
10:50 Exit Site Infections
11:10 Peritonitis – Case Based Discussion
11:50 Discussion

Session 9: Vascular Access
10:30-12:00pm
10:30 Beyond Fistula First: Individualizing Vascular Access in the ESKD Patient
10:55 Catheter Dysfunction: Causes and Management
11:20 Prevention of Catheter-related Bloodstream Infections
11:45 Discussion

Session 10: Workshop: Writing a Peritoneal Dialysis (PD) Prescription: Thinking Like a Kidney
10:30-12:00 pm
Ramesh Khanna, MD
This presentation introduces the concept of isonatric ultrafiltration as a physiology-based framework for understanding and prescribing peritoneal dialysis (PD). Rather than viewing ultrafiltration solely as fluid removal, the concept emphasizes that the true therapeutic objective is the removal of isotonic extracellular fluid containing both water and sodium. By integrating classical renal physiology with modern understanding of peritoneal transport, it proposes that sodium removal during PD closely parallels the physiological events occurring in the nephron.

Session 11: Competition, Consolidation, and Closures in Dialysis Care

10:30-12:00

The dialysis landscape has changed substantially over the past decade, with increasing consolidation into *LDOs, the growth of MDOs, shifts in ownership, and facility closures. These changes may affect patient choice, modality availability, staffing, quality, access to transplant, emergency preparedness, and the viability of independent and safety-net dialysis facilities. This session would examine what consolidation and closures mean for patients, clinicians, facilities, and communities.*

10:30 Framing Talk: The Changing Dialysis Market
A brief data-driven overview of dialysis market consolidation, facility ownership trends, regional variation, closures, and what is known about associations with quality, access, and outcomes.
10:50 Rural, Independent, and Safety-Net Dialysis Facilities: Can They Survive Current Policy?
11:10 Panel Discussion: What Happens When Dialysis Markets Consolidate?
11:30 Discussion

12-1:15 PM Lunch symposium- Doors open at 12, program starts at 12:15 pm

Session 12: Is the Bundle Keeping Up? Payment Adequacy, Innovation, and Access in Dialysis Care
2:00-4:00 pm

The ESRD Prospective Payment System was designed to encourage efficiency while preserving access to high-quality dialysis care. However, dialysis care has changed substantially, with rising labor and supply costs, new drugs and devices, evolving quality expectations, home dialysis growth, and increasing attention to innovation. This session would examine whether the dialysis bundle is keeping pace with clinical practice and whether current add-on payment pathways adequately support access to new therapies.

2:00 Payment Adequacy in the ESRD Bundle (cover binders as well/unintended consequences)
2:30 TDAPA and TPNIES: Are Add-On Payments Supporting Innovation?
3:00 Home Dialysis, Staffing, and Support Services: What the Bundle Forgot
3:30 Panel Discussion

Session 13: Jeopardy (Open to all to participate)
2:00-4:00 pm

Dialysis Jeopardy is an interactive game based on the popular TV show where participants answer questions across various categories related to dialysis. From clinical guidelines and patient management to the latest research and technological advancements, this event provides an opportunity to test your knowledge, learn from your peers, and discover new insights while having some fun! The questions are carefully crafted to challenge your understanding and encourage collaboration with the dialysis team.

In addition to nephrology fellows, we encourage all nephrology providers, including nephrologists, nephrology nurses, dialysis technicians, and renal dietitians, to form teams and join us for this fun and exciting event. Whether you are a seasoned professional or a budding expert, Dialysis Jeopardy promises to be an engaging and informative experience for all.

Session 14: Pharmacotherapy Advances in CKD/ESRD
2:00-4:00 pm

2:00 HIF-PHIs Come of Age: Where Oral Anemia Agents Fit in 2027
2:20 GLP-1s and SGLT2i in Dialysis: Beyond Diabetes and Weight
2:40 Rethinking Phosphorus: New Binders and Non-Binder Strategies
3:00 Potassium Management Reimagined: Binders, Timing, and Diet Liberalization
3:20 Pipeline Watch: What's Coming Next in CKD/ESRD Pharmacotherapy (Investigational agents, novel mechanisms in trial, what to watch for in the next 2-3 years)
3:40 Discussion

Session 15: Dialysis Access/POCUS Workshop Hands-on Course: Multidisciplinary Hands-on Course: Multidisciplinary
2:00-4:00 pm
This session is a hands-on multidisciplinary course designed to enhance participants' clinical skills in evaluating and managing dialysis access (HD vascular access and PD catheters). The session combines focused didactic instruction with practical training, offering an immersive experience in both physical examination and point-of-care ultrasound (POCUS) techniques for evaluation of dialysis access. Attendees will learn to perform comprehensive physical examinations of dialysis access, use ultrasound to evaluate access maturation and mark areas for cannulation, and address common troubleshooting scenarios encountered in the dialysis unit. This workshop aims to equip clinicians and providers with the knowledge and technical proficiency necessary for optimizing dialysis access care.

- Didactics
- Hands-on
- Physical Examination of Dialysis Access
- US of Dialysis Access for Maturation Evaluation
- US Dialysis Access for Cannulation
- Troubleshooting in the Dialysis Unit

4:00-6:30 pm Poster Presentations and Exhibitor Reception

Saturday, February 27

Session 16: Hemodiafiltration: The Filtration Frontier
8:00-10:00 am
8:00 Inside the Machine: HDF Technology and How Convection Works
8:25 Prescribing HDF: Getting the Convection Volume Right
8:50 MCO dialyzers
9:15 Debate: Should HDF Be the Standard of Care in the US?

- Pro: "Make the Switch: The Case for HDF as Standard Care
- Con: "Hold the Line: Why HD Still Holds Its Own
- Rebuttals/Discussion

Session 17: Save What's Left: Preserving Residual Kidney Function in 2027
8:00-10:00 am

8:00 RKF Doesn't Care About the Chair: Why RKF Matters in All Modalities
8:25 Prescribing for Preservation: Drug Strategies to Protect RKF
8:50 Don't Squeeze Too Hard: Volume Management and RKF
9:15 Start Slow, Stay Strong: Incremental Dialysis and RKF
9:40 Discussion

Session 18: Innovations in Peritoneal Dialysis: The More You Know
Joint Session with the ISPD North American Chapter (NAC)
8:00-10:00 am

8:00 Presidential Address

8:10 Non-icodextrin Based Solutions, Devices that Prevent/Detect Peritonitis & On-site PD Solution Generation

Three 15-minute roundtable small group discussions focusing on the environmental effect of peritoneal dialysis delivery. Groups will discuss:

1) Non-icodextrin-based PD Solutions
2) Devices that Prevent/Detect Peritonitis
3) On-site PD Solution Generation

8:55 Panel Discussion and Q&A – Attendees vote on which innovation they believe is the most impactful in driving forward PD delivery

9:05 Break

9:10 Trends in Hospitalization Among Patients Receiving PD in the United States

A presentation of the PDOPPS project undertaken by this year's ISPD-NAC Research Awardee.

9:40 Panel Discussion and Q&A

10:00 Break

Session 19 - Tackling PD Therapy Loss: Tracking & Prevention
Joint Session with the ISPD North American Chapter (NAC)
10:30-12:00 pm

10:30 ISPD Position: Tracking & Reporting Loss from PD Therapy

Outlining the latest ISPD position statement on tracking and reporting loss from PD therapy

11:00 Break

11:10 Standardizing PD-related Infection Training & Protocols

This session will discuss the TEACH-PD trial design and outcomes, as well as findings from the PDOPPS studies and OPPUS (Optimizing Prevention of PD-Associated Peritonitis in US) studies in paving a path to reducing PD dropout rates

11:40 Panel Discussion and Q&A

12:00 Lunch

12:00 Lunch

Session 20: Building a Successful Home Dialysis Program: From Start-Up to Scale
10:30-12:00 pm
10:30 Starting a New Home Dialysis Program: The Nuts and Bolts
11:00 Scaling the Program and Building the Home Dialysis Ecosystem
11:30 Expanding into HHD
11:50 Moderated Panel and Audience Q&A

Session 21: Hemodialysis Access: All About AV Access
10:30-12:00
10:30 Understanding Access Maturation and Surveillance
10:50 High-output Heart Failure from AV Access
11:10 Steal Syndrome and Hand Ischemia
11:30 Surgical vs Endovascular AVF Creation
11:50 Discussion

Session 22: Advances in Hemodialysis: AI, Algorithms, and the Future of Volume Control in Hemodialysis
10:30-12:00 pm
Volume management remains one of the most persistent challenges across hemodialysis care, directly influencing cardiovascular outcomes, hospitalization risk, and quality of life both in-center and at home alike. This session moves from established tools to AI-driven prediction, then puts the field's most provocative question to a live debate: should algorithms replace clinician judgment in setting dry weight?
10:30 Beyond the Bathroom Scale
Current device-based volume assessment tools in hemodialysis (bioimpedance spectroscopy, blood volume monitoring, and automated UF profiling)
10:50 Can AI See It Coming?
Predicting fluid overload and hypotension with multi-modal AI/ML models
11:10 Should AI Set Your Dry Weight?
- Pro: AI-assisted Dry Weight Modeling Should Replace Static, Periodic Reassessment
- Con: Clinical Judgment and Periodic Reassessment Remain Essential; AI Isn't Ready to Lead

11:30 Rebuttal/Discussion
11:40 Panel Discussion: Implementation Challenges *(Workflow integration, clinician trust, liability, reimbursement)*

12:00-2:00 pm Lunch symposium, Posters, and Exhibits

Session 23: Optimizing Home Hemodialysis: Practical Solutions for Access, Prescription, and Long-Term Success

2:00-4:00pm

Join this 90-minute interactive workshop where expert facilitators rotate through five participant tables, concluding with a central stage panel synthesis.

How the Rotations Work

Participants remain at their tables while facilitators rotate through every group for structured 12-minute discussion sprints:

- Mins 0–2 (Framing): The facilitator introduces the case prompt.
- Mins 2–8 (Discussion): Table participants collaborate on challenges, workflows, and solutions.
- Mins 8–11 (Capture): Key takeaways are recorded on the table flipchart.
- Min 12 (Transition): Facilitators rotate to the next table when the bell rings

Moderators or Discussion Leaders:

- Table 1: Patient Selection & Onboarding Across Populations
- Table 2: Vascular Access in the Home
- Table 3: Machine Interface & Digital Health
- Table 4: Prescription Design & Dosing Logistics
- Table 5: Retention Strategies & Burnout Prevention

Session 24: CRRT Decoded: Circuits, Complications, and Critical Care Pharmacology

2:00-4:00 pm

2:00 CRRT Fundamentals: Modality and Prescription Basics
(Basics CVVH vs. CVVHD vs. CVVHDF, dose/clearance principles)

2:25 Anticoagulation in CRRT: Citrate, Heparin, and Practical Troubleshooting
(Basics Circuit clotting prevention, citrate protocols, managing complications)

2:50 CRRT in Special Populations: Liver Failure and Sepsis
(Basics/Applied Practical adjustments for the sickest ICU patients/Additional value of hemoadsorption)

3:15 CRRT-Pharmacokinetics Interface: Drug Dosing in Continuous Therapies

3:40 Discussion

Session 25: Kidney Care in the Medicare Advantage Era: Access, Equity, and the Road Ahead

2:00-4:00

Medicare Advantage enrollment among patients with kidney failure has increased substantially since the 21st Century Cures Act expanded access for individuals with ESKD. This shift has important implications for dialysis care, transplant access, out-of-pocket costs, and patient choice. This session will examine how Medicare Advantage is changing kidney failure care.

2:00 Medicare Advantage in ESKD: How Did We Get Here?

2:25 Dialysis Care Under Medicare Advantage: Networks, Utilization Management, and Patient Experience

2:50 Medicare Advantage and Access to Kidney Transplantation

3:10 What Should We Monitor as MA Becomes a Larger Part of ESKD Care?

3:35 Discussion

Session 26: Fellows Forum
2:00-4:00 pm
This session starts with a brief keynote presentation followed by an interactive educational forum where nephrology fellows present challenging and intriguing clinical cases to their peers and faculty members. In this session, fellows demonstrate their diagnostic reasoning, clinical decision-making and knowledge of nephrology. Each case presentation typically includes patient history, examination, findings, diagnostic challenges, management strategies and outcomes.
The session encourages discussion and feedback from attendees, fostering a collaborative learning environment where fellow can gain insights from experienced nephrologists, explore different approaches to patient care, and stay updated on best practices. It also provides an opportunity for fellows to enhance their presentation and communication skills, critical for their professional development.
The presentations are judged by a panel of judges, and a winner is chosen based on the collective scores from the judges.
2:00 Fellows Keynote Presentation
2:30 Presentations of Fellows Submitted Cases

Session 27: Food for Thought: Rethinking Nutrition in Dialysis
4:30-6:00 pm
Nutrition in dialysis has moved well past simple protein counting and phosphate restriction. This session tackles four actively evolving nutrition questions, from whether plant-based diets are ready for prime time in ESKD, to how much protein patients really need, to why higher body weight seems to protect dialysis patients, to the quietly overlooked micronutrients that may matter more than we think.
4:30 Are Plant-Based Diets Ready for Dialysis?
4:50 How Much Is Enough? Rethinking Protein Needs in Dialysis
5:10 The Obesity Paradox: Why Fatter Might Mean Fitter in Dialysis
(*overview of reverse epidemiology, proposed mechanisms, why BMI is a flawed proxy and need for body composition measurement, sarcopenic obesity as a high-risk phenotype, clinical implications-should weight loss be recommended and if so what tools beyond BMI should guide that decision)*
5:30 The Micronutrients We Forget
(water-soluble vitamins, trace elements, what to check/supplement, what supplements to not take)

Session 28: Transitions of Care
4:30-6:00 pm
4:30 The Runway to Dialysis: Preparing Patients Before Day One
4:50 Modality Switches: Making PD-to-HD (and Back) Work for the Patient
5:10 The Failing Transplant: Recognizing, Managing, and Planning the Return to Dialysis
5:30 Growing Up on Dialysis: The Pediatric-to-Adult Handoff
5:50 Discussion

Session 29: Matters of the Sex: Intersection of Reproductive and Cardiovascular Health with Kidney Failure
4:30-6:00 pm
4:30 Sex-Specific Cardiovascular Burden and Mortality Risk in CKD
4:50 Sex Disparities in Vascular Access
5:10 Menopause, Hormone Therapy, and Family Planning with Kidney Failure: What Clinicians Need to Know
5:30 Care of a Pregnant Patient on Dialysis
5:50 Discussion

Sunday, Feb 28, 2026

Session 30: CKM Syndrome in Dialysis: Redefining Cardiovascular Risk in ESRD
8:30-10:00 am
Cardiovascular disease remains the leading cause of death in dialysis patients, yet traditional cardiovascular risk models and general-population CKM guidance often doesn't translate well to ESRD. This session examines how the cardiovascular-kidney-metabolic framework applies, and where it breaks down in dialysis patients, and reviews the evidence behind screening, pharmacologic prevention, and emerging metabolic therapies in this uniquely high-risk population.

8:30 **CKM Syndrome Meets ESRD: A Framework That Needs Rewriting?**
(Why don't dialysis patients fit neatly into standard CV risk paradigms: reverse epidemiology, the obesity *paradox, non-traditional risk factors, how traditional risk calculators (e.g., ASCVD risk score) perform poorly in ESRD populations)*

8:50 **To Screen or Not to Screen: Cardiovascular Testing in Dialysis Patients**
(pre-tx cardiac screening/clearance, ISCHEMIA-CKD trial, merit of asymptomatic CAD screening in dialysis patient, practical guidance)

9:10 **Statins, SGLT2i, and GLP-1s: What Actually Works in Dialysis?**
(Pharmacologic cardiovascular/metabolic prevention strategies in ESRD)

9:30 **The Silent Killer: Sudden Cardiac Death and Arrhythmia Risk in Dialysis**
(Why SCD are higher in dialysis pts, dialysis specific triggers, modifiable dialysis related risk factors, ICDs role/limitations, practical considerations to decrease arrhythmia risk)

9:50 Discussion

10:00-10:30 Break

Closing Plenary Session 31: Empowering the Patient's Journey: From Stories to Action
10:30 am-12:00 pm