



OCHSNER MULTI-ORGAN TRANSPLANT CENTER

**LIVING DONOR
EDUCATION, INFORMATION, & COMMUNITY RESOURCE
HANDBOOK**

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Introduction

Welcome to the Ochsner Kidney Transplant Program!

Choosing to donate a kidney and give the “gift of life” is one of the most meaningful things anyone can do. Becoming a living donor offers a loved one or friend an alternative to remaining on the national transplant waiting list to receive an organ from a deceased donor. While living donation is not for everyone, it can be rewarding to know an opportunity for a better quality of life has been given to someone else.

This book explains certain issues and answers many common questions about living donation. We encourage you to share the information contained in this important handbook with any family members, friends, or caregivers who will be involved with your medical treatment and recovery. By knowing the facts, you and your family can make an educated decision, one that you can feel comfortable with, now and in the future.

Over the next few days, you will meet several members of our team. Each will evaluate and educate you on living kidney donation as a treatment option for your family/friend’s disease process. In order to qualify as a living donor, you must be physically fit, in good general health, and free from high blood pressure, diabetes, cancer, kidney disease and heart disease.

You will be scheduled for several diagnostic tests to determine your level of physical and mental health. Once the results of all testing is available, the Transplant Committee will review your case and determine if you are a suitable kidney donor for the patient awaiting a transplant.

It is also important to know, that you may change your mind at any time during the process. Your decision and reasons are kept confidential.

We are dedicated to providing you with the most up to date and cutting edge care; however, we will need your assistance. Please make every effort to keep all appointments as scheduled. If you can not keep your appointments please call in advance to reschedule.

If there is anything we may do to help you through this process, please contact us at (504) 842-3925 or (800) 928-1635.

The members of your team include:

Living Donor Coordinator: Rebecca Guillera

Transplant Social Worker: Surveen Klein, Louise Landry

Patient Service Associate: Brenda Broussard

Donor Advocate 504-842-3541

Treatment Options for Kidney Failure

Your kidneys are 2 bean-shaped organs located behind your stomach in the middle of your back, on either side of your spine. Kidneys perform some of the most important jobs in your body including:

- Filtering and removing waste by producing urine
- Helping to regulate blood pressure
- Cleaning and controlling the amount of blood in your body
- Keeping the body's balance of water, salt and acid constant
- Making hormones that help bone marrow produce red blood cells

If something happens to abnormally change the way the kidneys work it is usually because of a condition that has been attacking the kidneys for a long time. Some conditions which can injure the kidneys are diabetes, high blood pressure, infection, cysts, and kidney stones. These can lead to chronic kidney disease which affects both kidneys. Sometimes you can be born with a problem that affects the kidney or have a problem that runs in your family. There may be no symptoms of kidney disease until you have had it for a while.

When the kidneys are not working correctly, the body's waste and excess fluids build up, causing harm to your body. Some signs of kidney disease are:

- Fluid retention – puffiness in the face, swelling of hands and feet
- A change in urination – amount, frequency, painful or difficult
- Shortness of Breath
- Mental confusion
- Abnormal blood or urine test results
- Tiredness

If kidney disease has not been diagnosed or treated early enough, or if you have not responded to treatment, the disease may progress to end stage kidney failure (ESRD). At this point, the kidneys have stopped working and you will need treatment in order to survive. Treatment options for kidney failure include:

- Hemodialysis
- Peritoneal Dialysis
- Kidney Transplantation (from a living or deceased donor)

Kidney transplant is considered a treatment for kidney disease, it is not a cure. Transplant recipients may lead a more normal life, free from dialysis. However, they will have to take medications and have frequent follow-up care for the life of the transplant. There are side effects to both dialysis and transplant. Understand, if you choose not to become a kidney donor, your recipient has other options.

After donating a kidney, a person can live a long and healthy life with just one kidney. The remaining kidney simply grows bigger and takes over the work of both kidneys.

Benefits of Living Kidney Donation

There are several important reasons why living donation may be a good option for certain potential recipients.

A kidney donated by a blood relative is usually a better match, with a better chance for success. When well-matched to the donor organ, the recipient is often able to take lower doses of anti-rejection medication.

With living donation, both the donation of a living kidney and the actual transplantation can happen almost simultaneously with very little damage to the organ, because it has not been outside the body for long.

Kidneys from living donors usually have a longer life span, and may begin to function while the recipient is still on the operating table.

For some transplant candidates, a living donation can be lifesaving. Typically, there is about a 3 to 5 year wait for a deceased donor kidney. Data shows that approximately 1 out of 20 patients die each year from kidney disease as they wait for a donor kidney. Living donation may also help to avoid the potential health complications which occur when a recipient is on dialysis for a long period of time.

While on the waiting list for a deceased donor kidney, the recipient never knows when an organ will become available or when the surgery will happen. With a living donation, surgery is scheduled ahead of time, avoiding the stress and uncertainty of being on the waiting list. Being able to schedule surgery in advance means both the recipient and the donor can prepare to be in the best of health, both physically and mentally.

Lastly, donating an organ in itself can be a very rewarding experience. It's one of the few changes that most people ever get to be a real hero. Many living donors say that they feel better about themselves after donating.

Living Donor Evaluation

The evaluation is a 2 to 3 day process to help ensure that you will not be harmed by donating, and that you are healthy and will remain healthy after donation. It also allows time for the donor to make sure they are fully aware of what is required. While many people are willing to be living donors, not everyone has the qualities necessary to participate in living donation. Donors must be chosen carefully in order to avoid outcomes which are medically and psychologically unsatisfactory. The evaluation is an opportunity for you to obtain a wealth of knowledge regarding kidney donation and to also ask questions about your future medical treatment. **It is important to understand the potential risks and benefits of living kidney donation before making the decision to become a donor. Speak with your transplant team, use the resources available, ask questions, and voice concerns.**

If you do not live in the local New Orleans area, you may want to make arrangements to stay in the area for your evaluation. Refer to page 17 for several options which may meet your needs while you are undergoing your pre-donation evaluation, surgery, and recovery. (You may also use these options at any time during the course of your medical treatment). There are other options not listed which may be available through the phone directory or online.

During your evaluation you will meet with all members of the transplant team.

- The Transplant Nephrologist/Physician Assistant will take a detailed medical history and perform a physical assessment.
- The Transplant Surgeon will also take a history but will be looking at your abdomen to see if there are any scars, masses, hernias or other abnormalities that would not allow for the donation to take place. He will also discuss the donor surgery with you.
- The Donor Advocate is an independent person, not affiliated with the transplant center. Their role is to represent and advise you. They ensure that the donor's decision is informed and free from coercion and that your rights are protected.
- The Clinical Transplant Nurse Coordinator serves as your primary contact by teaching about the process and answering questions related to donation. She will also organize your evaluation. This includes coordinating the tests and consultations needed for a complete evaluation.
- The Social Worker will meet with you alone and perhaps with your family members to complete a thorough assessment. This is an opportunity for the social worker to get to know you, identify any concerns or needs you may have, assess your support system, insurance, and financial situation, as well as link you to any necessary resources. The social worker will be asking you questions that may seem personal. Please recognize that there may be sensitive issues which need to be addressed. The social worker may arrange to meet with you alone without your family to ensure open communication between you and the social worker.
 - If you are experiencing feelings of pressure, coercion, or obligation to donate, please talk with your Transplant Social Worker immediately. This may be a reason not to donate. Receiving compensation for organ donation is illegal. Compliance with the law is required.

The following are tests which you will undergo during your medical evaluation. Additional tests may be required depending on your medical history and physical examination.

Blood Typing: The donor and recipient must have compatible blood types, but does not need to be an exact blood type match.

Tissue Typing: This blood test checks the tissue (DNA) match between six codes on the donor and recipient cells. Tissue typing between the donor and recipient does not need to match in order to have a successful transplant.

Crossmatching: A blood test done to see if the recipient will react to the donor organ.

Antibody is a protein substance made by the body's immune system in response to an antigen (a foreign substance; for example, a transplanted organ, blood transfusion, virus, or pregnancy). Antibodies can attack the transplanted organ. The white blood cells of the donor and the serum of the recipient are mixed to see if there are antibodies in the recipient that react with the antigens of the donor.

If the crossmatch is "positive," then the donor and patient are incompatible because antibodies will immediately react against the donor's cells and cause immediate loss of the transplant. If the crossmatch is "negative," then the transplant may proceed.

This test is performed prior to the medical evaluation and again within 7 days of transplant.

Urine Tests: Urine samples are collected for 24 hours to assess the donor's kidney function. A single sample is also obtained to check for protein and infection in the urine.

Blood Chemistries: Blood tests are taken to check for infectious diseases, blood count, cholesterol, and basic chemistries, which give information on the functioning of the kidneys/ liver.

If you have a close blood relative with diabetes, you will also have a glucose tolerance test, which screens for diabetes.

Tuberculosis Skin Test: This is an injection placed under the skin on your arm to determine if you have been exposed to tuberculosis.

Chest X-Rays: A chest X-Ray is performed to screen for lung disease.

Electrocardiogram (EKG): An EKG is performed to screen for heart disease. An exercise stress test will be performed if you are 40 years or older.

Nuclear Medicine Renal Scan: This test shows the percentage of work that each kidney is performing. Example: Right kidney is doing 52% of the work and the left kidney is doing 48% of the work. These results enable the physicians to determine which kidney will be donated.

CT Arteriogram: This test involves injecting a liquid that is visible under X-Ray into the blood vessels to view the organ to be donated. This enables the physicians to examine the kidney and its blood supply prior to surgery.

Psychiatric Evaluation: After meeting with the social worker, you may be referred for a psychiatric and/or neuropsych evaluation. If a person is donating to an unrelated person, who is not a spouse, they will undergo a psychiatric evaluation.

Female Examinations: For all female donors, a complete gynecological examination and Pap smear is required. This can be done with your physician or if you have had this completed in the last year, you can have the medical records sent to us. For females 40 years and older, a mammogram is also required. Again, if you have had this done in the last year, records can be sent to us for use.

Colonoscopy: A colonoscopy will be required on all donors age 50 or older. If this has been obtained with your own physician, please have the records sent to us.

Once all the results of the test done in your evaluation are completed, the Transplant Selection Committee, which consists of all members of the transplant team, will review your case. The committee, after reviewing all information, will determine if you are a suitable donor for the recipient.

You will receive a phone call from the living donor coordinator once the review is complete and the committee has made their decision.

LIVING KIDNEY DONOR SELECTION CRITERIA

Any person over 18 years of age meeting the following criteria may be considered a potential living kidney donor:

1. Overall good general health.
2. Able to understand the risks and benefits of donation
3. Has acceptable kidney function and anatomy as determined during the living donor evaluation process.

Absolute Contraindications

1. Diabetes mellitus or impaired glucose tolerance on 2-hour Glucose Tolerance Test.
2. Evidence of kidney disease, for example:
 - a. GFR < 80 ml/min
 - b. Proteinuria > 150 mg/24 hours.
 - c. Small kidneys
3. Active infections.
4. Current pregnancy.

Relative Contraindications will be considered on a case-by-case basis, considering donor's age and other health concerns:

1. BMI (Body Mass Index) > 33.
 - a. If the right kidney is going to be used for donation, then BMI must be <30.
2. History of malignancy.
3. Current substance abuse.
4. Hypertension requiring more than one medication to control.
5. Kidney stones without treatable cause.
6. Any medical condition that, in the opinion of the transplant team, may increase the potential donor's risk of kidney failure.

Pre – op Testing and Hospital Admission

Preparing for Surgery (pre-op)

Once you are approved as a living kidney donor for your recipient, your Transplant Coordinator will discuss surgery dates with you. Keep in mind, this process moves at the pace in which you need. Surgery will be scheduled for the day you request and pre-op appointments will be scheduled for a week prior to the surgery date.

During pre-op you will have the following appointments:

- Blood testing to check kidney function and the final crossmatch will be obtained.
- Chest x-ray and EKG
- Transplant Nephrologist will provide medical clearance for surgery
- Transplant Surgeon will review surgical procedure
- Transplant Coordinator will provide instructions for the day of surgery
- Transplant Social Worker will discuss your understanding, your ability to choose not to donate, and assure caregivers, financial, and other plans are in place.
- Anesthesia physician will obtain information and review details of surgical anesthesia

Although smoking does not prohibit you from being a kidney donor, **you must stop smoking for two weeks before your surgery**. Smokers have an increased risk of cardiovascular (heart) and pulmonary (lung) complications with any surgery. The transplant team recommends that all donors refrain from tobacco use after organ donation to prevent long term health problems related to smoking.

Keep in mind, a number of events could happen that may change the date of the transplant.

- The recipient's condition may decline to the point where they are too sick for transplant.
- Abnormal testing may be discovered with pre-op testing that requires further evaluation prior to transplant.
- The program may be busy transplanting organs from deceased donors and your surgery will need to be rescheduled.

The Surgery

The donor is admitted to the hospital on the morning of surgery. You should bring minimal belongings (medications, toiletries and clothing) to the hospital. Leave all jewelry or other valuables at home or give them to your family for safekeeping. You will be prepared for surgery as any patient would be, including having your temperature and blood pressure taken, and having an intravenous (IV) line started. In surgery the donor is given general anesthesia and “put to sleep.” An endotracheal tube (breathing tube) is placed to breath for you and a catheter is placed in your bladder to monitor your urine.

A nephrectomy is the surgical removal of a kidney. Laparoscopic nephrectomy is a minimally invasive surgical procedure for obtaining a kidney from a living donor that can make the process easier.

In this procedure, the surgeon makes three small incisions, “ports”, around the abdomen. The kidney is removed through a 3 inch central incision below the belly button. Through one of the other openings, a special camera, called a laparoscope, is used to produce an inside view of the abdominal. Surgeons use the laparoscope, which transmits a real-life picture of the internal organs to a video monitor, to guide them through the surgical procedure.

The surgery lasts approximately 3 to 4 hours. During this time, family can wait in the surgery waiting room, located on the 2nd floor of the hospital. It is possible the surgery may be longer or shorter, so do not be alarmed. When the surgery is complete, the physician will speak to your family.

Risks and Complications

Living donors should fully understand the risks involved in donating a kidney. Even though you are in good health, there are always some risks any time someone undergoes surgery. Some of these may include:

- Allergic reaction to anesthesia
- Pneumonia
- Blood clots in the lung (pulmonary embolism)
- Infection of the incision or urinary tract
- Bleeding, requiring the need to return to surgery or blood transfusion
 - Although blood donation during this surgery is uncommon, it may be necessary. If you would like to donate your own blood before the surgery, please let the donor coordinator know in advance.
- Death – this rate is extremely low, 0.03% (that is 3 out of every 10,000 surgeries)

After the Surgery

You will go to the recovery room immediately following the surgery. The breathing tube will be removed and you will be given pain medication. Once stabilized, donors are transferred to the transplant step-down unit on the 7th floor of the hospital (TSU-7R). All rooms on TSU are private and are equipped with a pull out couch. If a family would like to stay with you, this is acceptable.

Discharge Planning

The average hospital stay for a donor is 24 hours. As with any operation or treatment, if there are any complications, this may delay your discharge. Every patient has an individualized treatment approach and recovers within different time frames. We encourage talking with other donors, however since everyone's recovery is different, please avoid comparing your circumstances to other patients that you meet.

Your social worker will begin discharge planning during your pre-op visit and in the hospital. This involves assessing your needs during your stay, as well as resources you may need upon discharge from the hospital.

If you live more than an hour away from Ochsner you may be asked to stay locally in the New Orleans area for the first 3 to 4 days of your recovery, or longer if needed. This will be determined by your transplant surgeon.

Upon discharge from the hospital, you will be provided with a prescription for pain medication. This can be filled at any local pharmacy. Prescriptions are not be covered by the recipients insurance. If you have private insurance, this can be used or you will need to provide payment to the pharmacy.

The Ochsner Outpatient Pharmacy is located on the 1st floor of the hospital. The phone number is (504) 842-3205.

Please let your family/caregiver know you will leave the hospital 24 hours after surgery so they are aware and prepared.

After Donation

Recovery

Average length of recovery after kidney donation can take 6 to 8 weeks. You will experience pain and discomfort after the surgery, and medication will be prescribed. Over time, the pain will ease and become less severe, but it may linger for several weeks after the surgery. Some people may experience a temporary loss of appetite.

Donors can not lift anything heavier than 10 pounds (a gallon of milk) or engage in physically demanding activities for 4 to 6 weeks. You will also not be able to drive for at least 2 to 3 weeks. Driving can be resumed when pain medication is no longer required and you are able to comfortably move and twist as required to drive safely. Your doctor will let you know when you are medically cleared to return to work and resume exercise and heavy lifting.

A donor will need to take off about 2 to 3 weeks from work if you have a desk job, and approximately 4 to 6 weeks if you perform physical labor. If there are disability or leave of absence forms which need to be completed, please let us know as soon as possible.

A lab appointment and physician appointment will be scheduled in approximately 4 weeks to assure laboratory values have returned to normal and that all your incisions are healed. At this time, you will be released from our care and can return to your normal activity.

- If you live out of the state, you will be seen within 3 to 4 days after being discharged from the hospital, before you return home. An appointment with your local physician should be scheduled for 4 weeks after your surgery.

Before the surgery, most of the focus is on the living donor. After the surgery, the focus changes to the kidney recipient, helping them recover and making sure the body doesn't reject the new kidney. This shift in attention may be hard for the donor and the donor's family, causing a feeling of abandonment. This is natural, however, donors should remember that they have given the most precious gift that anyone can give, and this priceless gift may enhance someone's quality of life or, in some cases, even save their life.

It is important to have the proper emotional and physical support to help recover from surgery. A caregiver (family/close friend) for potential donors is required for post donation care. The availability of your support system to you after your donation could not be emphasized more! As with any major surgery or treatment, you will need help. You can not get through this recovery alone. (It is beneficial to have your support system available to you prior to the donation as well.)

What we mean by "SUPPORT" can take on several meanings... needing physical support when you are weak, needing emotional support when you are feeling discouraged, needing spiritual support, or needing assistance with concrete needs (grocery, meals, transportation). It may mean just a little TLC (tender loving care) from a special person. It can be anything or anyone who is reliable and will assist you in coping better with your recovery from donation.

It is helpful to be able to identify one person as your **primary caregiver**. This would be the main person that would be helping you, as well as interacting with the transplant team. Having one primary person provides continuity- they are aware of your needs, problems, medications, etc. Multiple family members and/or friends who would be able to alternate assisting you would also be appropriate.

Life with One Kidney

Living with one kidney does not generally cause long-term problems for a donor. However, there are some additional considerations which all living donors should be aware of, which may include:

- A slightly increased risk of high blood pressure
- A slightly increase incidence of kidney failure
- A slight risk of developing a disease in the remaining kidney
- A risk that you may become depressed or anxious after the surgery, requiring the use of prescription antidepressant and/or antianxiety medication for a period of time. Mental health counseling may also be recommended.

Donating a kidney does not affect a woman's ability to have a normal pregnancy and childbirth. In most cases, donation has almost no effect on the long term health of a donor.

Insurance after Living Donation

The ability to obtain health and life insurance coverage after you have become a living donor is not restricted by most insurance companies. However, there have been some instances in which living donors experienced difficulty changing insurance carriers after the donation, had higher premiums, were denied coverage, or had a pre-existing waiting period. It is important to talk to your insurance company before donation to assure your coverage will not be affected afterwards, and to obtain any forms of insurance you may need prior to surgery taking place.

Things to Think About

Financial Considerations

Finances are a major issue for most kidney donors. All donor testing, hospitalization, and post-op visits are covered by the recipient's insurance. **If you receive a bill from Ochsner, for donation related charges, please notify the donor coordinator immediately, so this can be handled.**

The following are expenses to plan for which are not covered by the recipient:

- Lost wages from time out of work
- Travel expenses
- Lodging and meals
- Child care costs
- Prescriptions (pain medication after surgery)
- Non-donor surgery issues which may not be covered

Donors need to make financial arrangements to ensure they have adequate funds to cover any unpaid time off from work. This is especially important if you are not covered by an employer who will help with the needed time off. You may also want to look into whether your short-term disability covers kidney donation. If you are a federal employee, there are laws that may compensate you for organ donation. Some states have tax breaks which you can investigate prior to surgery.

The National Living Donor Assistance Center is a nationwide system established to provide reimbursement of travel and other non-medical expenses, which may be authorized by the Secretary of Health and Human Services, to individuals being evaluated for and/or undergoing living organ donation. Priority will be given to those individuals who cannot otherwise afford the expenses. **Approval for funding is not guaranteed.** **Contact your transplant social worker to apply.**

National Living Donor Assistance Center (NLDAC)

2461 S. Clark Street, Suite 640

Arlington, VA 22202

Phone: 703.414.1600

Fax: 703.414.7874

Email: NLDAC@livingdonorassistance.org

Journal

Consider keeping a journal throughout your donation experience. This is a personal and private way to express your feelings about what you are going through and you will have these written memories forever. In addition, you may wish to share some of these thoughts with your family.

Pastoral Care Services

Ochsner has hospital chaplains that are available to you during your hospital stay to address your spiritual needs. In addition, there are also Eucharistic ministers that will bring Holy Communion to Roman Catholic patients daily. If you would like to see a chaplain, please ask your nurse to contact the Pastoral Care Department.

Making the Decision....Be Sure

The decision to become a living donor involves careful consideration. We realize that this can be a very stressful time for you and your family. Some of the information you have received may overwhelm you and provoke questions or concerns which need to be addressed. To help you through the process, consider reaching out to family members, close friends, someone who has gone through this process, or your social worker.

It may also be helpful to ask yourself these questions:

- How do I feel about organ donation?
- Can I afford being a kidney donor?
- What will my insurance cover?
- Do I know enough to make a logical and educated decision?
- Am I being psychologically pressured to be a living donor?
- Is there someone else who could possibly donate?
- Will donation have an impact on my relationship with the recipient?
- What are the medical risks involved?
- How does my religion view organ donation?
- Am I up to it physically? Are there current aspects of my health that I know should keep me from donating?
- Do I have a "support network" to help me through this process?
- How will I feel if I am rejected as a result of the screening process?
- Am I prepared to deal with the possible rejection of the organ?

Our goal is to make your donor experience positive. We hope this packet has provided you with a wealth of information for you and your family.

**Please contact your Transplant Team with any questions or concerns.
504-842-3925 or 800-928-6247**

Resources

On Donation

Today, there is more information for kidney donors than ever before. This information can be found at libraries, hospitals, patient support groups, and other organizations interested in health care.

One of the quickest and easiest ways to find the answers to your questions about organ donation is by looking on the Internet. You can access the Internet at many public libraries. The web sites below are excellent resources available to you.

www.transplantliving.org

www.lopa.org

This is the site for Louisiana's Organ Procurement Agency.

www.kidney.org

This is the site for the National Kidney Foundation.

www.livingdonors.org

www.astc.org

This site is for the National Living Donor Assistance Center who provides financial assistance for living kidney donors.

www.ochsner.org

In the Area

If you are not from this area you may need some assistance locating some of the following resources.

Grocery Stores: Winn-Dixie Grocery Store - 3623 Jefferson Highway (831-1840).

Rousse's Grocery Store - 2701 Airline Dr. - corner of Airline Dr. & Labarre Blvd.
(828-4101)

Wal-Mart Superstore: Located on Jefferson Highway just past South Clearview Parkway (733-4923)

Legal Services: Your social worker can assist you in obtaining legal services.

Shopping Mall: Lakeside Mall located on Causeway Blvd. and Veterans Memorial Blvd.

Movie Theater: Palace Theater is located at 1200 Elmwood Park Blvd. behind the Elmwood Shopping Center on South Clearview Parkway (734-2020).

Restaurants: multiple restaurants on South Clearview Parkway & Veterans Memorial Blvd.

Laundromat: Your hotel may have laundry machines which require quarters.

**LODGING OPTIONS FOR
OCHSNER ORGAN DONOR PATIENTS:**

(ask for special rate if available for OCHSNER TANSPLANT patients)

Housing:	
1.	<p>*Brent House Hotel (“transplant rate” is \$79 / night, plus tax, subject to change) Ochsner Main Campus 1512 Jefferson Highway New Orleans, LA 70121 (504) 835-5411 (800) 535-3986</p>
2.	<p>La Quinta Inn 3100 I-10 Service Road (I-10 & Causeway Blvd) Metairie, LA 70001 (504) 835-8511 (800) 531-5900</p>
3.	<p>Holiday Inn 3400 I-10 Service Road (I-10 & Causeway Blvd) Metairie, LA 70001 (504) 833-8201</p>
4.	<p>Hampton Inn & Suites (2 locations) -5150 Mounes St. (Off Clearview Pkwy) Harahan, LA 70123; (504) 733-5646 -2730 N. Causeway Blvd. Metairie, LA 70002; (504) 831-7676 -Any location: (800) HAMPTON</p>
5.	<p>Marriott Residence Inn 3 Galleria Boulevard Metairie, LA 70001 (504) 832-0888 (800) 331-3131</p>
6.	<p>Best Western Landmark Hotel 2601 Severn Ave. Metairie, LA 70002 (504) 888-9500 (800) 277-7575</p>
7.	<p>Ramada Inn Limited 2713 N. Causeway Blvd Metairie, LA 70002 (504) 835-4141 (800) 228-2828</p>
8.	<p>Boarding Homes Joy Kemp 212 Harding Street Jefferson, LA 70121 (504) 834-0245 Rachel Westerfield 333 Betz Avenue Jefferson, LA 70121 (504) 259-7878</p>
9.	<p>www.craigslist.com may provide additional information for short and long-term stay</p>

Support

*Support has a grip on life
It is vital to our needs,
Things explained, are made plain,
To relieve anxieties with ease!*

*Some daily pressures are great
Some pressures may seem small,
Support is so vital and needed,
It releases and embraces all!*

*Support is one way
Of showing how help soothes the mind,
Just knowing about feelings and attitudes,
Reveals solutions that one may find!*

*Support makes one feel real good
Just knowing, that all are together,
Sharing and caring about each other,
While making life much better!*

*Loving, caring and sharing
Is what life is all about,
Support is always needed,
Depression and regression stay out!*

*We have total support from others
It is a special plan,
Peace of mind and love,
Is secured for every woman and man!*

-adapted from a poem written and composed by Dorothy R. Bailey