

# DaVita's commitment to quality care.

At DaVita®, we are committed to helping our patients live the very best lives they can. This commitment shows in how well our patients do on dialysis. DaVita has consistently demonstrated clinical outcomes that are among the best, or are the best, in virtually every category when compared to national averages. Quality care ensures patients feel their best and are able to do the things they enjoy. Not all dialysis care is the same.



## Fistula Access Management and Mortality Rates

The arteriovenous fistula is the preferred access to deliver the best dialysis treatment. The fistula is the safest and longest-lasting type of access, and is associated with lower rates of infection, clotting and hospitalizations than other access types. Patients who receive dialysis with a fistula, as opposed to other access types, have a 30% to 80% greater chance of survival in the first year of dialysis.

At other providers, 51% of patients have a fistula access.<sup>1</sup>

At DaVita, 53% of patients have a fistula access.

DaVita is 4% better.

<sup>1</sup>Other providers defined as the national average less Large Dialysis Organization

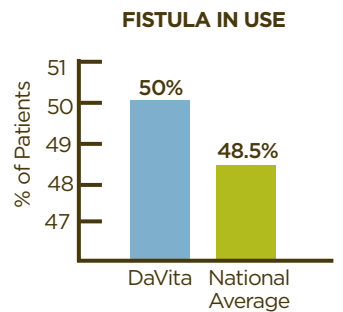
## Mortality Rates

A recent study compared the mortality trends for the major dialysis providers. It found that DaVita had a significant improvement in survival compared to non-chain centers.<sup>2</sup> Outcomes data confirms that the risk of mortality faced by patients at DaVita centers may be 8.6% lower than the national average.

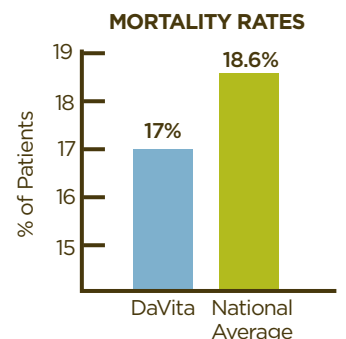
<sup>2</sup> Duong, Uyen, Kalantar-Zadeh K; Kovesdy, G; Mehrotra, R. Mortality Trend of Hemodialysis Chains in the USA: 1996-2004. National Kidney Foundation Spring Clinical Meeting 2008

Mortality rates at DaVita are 17%, lower than the national average of 18.6%.

BUSINESS DESCRIPTOR  
1-800-400-8331 | DaVita.com



Source: Fistula First Vascular Access



Source: CMS Clinical Performance Measures Report, USRDS Annual Report



## Anemia Management - Hct (Hematocrit)

Anemia treatment is evaluated on Hct (Hematocrit). When kidneys fail, anemia (a shortage of oxygen-carrying red blood cells) is common. The hematocrit measures how much (what percent) of the blood is made up of red blood cells. National guidelines say that people on dialysis should have hematocrits of at least 33%.

\*\*\*NEED UPDATE\*\*\*

In DaVita centers, 85% of patients had an Hct of at least 33%.

## How Well Dialysis Treatment Removes Waste - Adequacy or Kt/V

Kt/V is used to measure adequacy, or how effective a dialysis treatment is in removing wastes. National guidelines recommend a Kt/V of at least 1.2 for each dialysis treatment. At other providers<sup>1</sup>, 92% of dialysis patients reach this number. At DaVita centers, 95% of patients had a Kt/V of at least 1.2.

DaVita is 37% better than other providers when it comes to providing effective dialysis

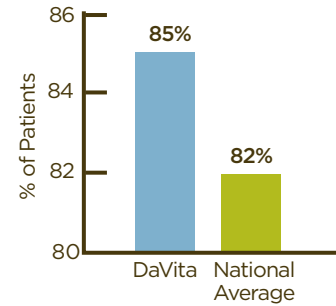
## Good Nutrition Level For Dialysis Patients - Albumin

Nutrition is evaluated by albumin levels. Albumin is a form of protein in the blood that is a measure of good nutrition in people on dialysis. Albumin levels greater than 3.5 g/dL are linked with better survival.

At DaVita dialysis centers, 82% of patients had albumin levels greater than 3.5 g/dL.

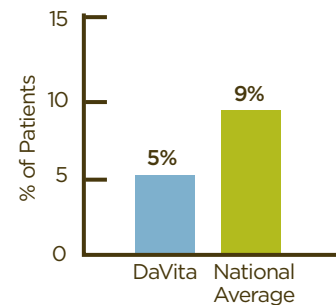
**At DaVita, our clinical outcomes reflect our commitment to quality care.**

HCT > 33% HD PATIENTS



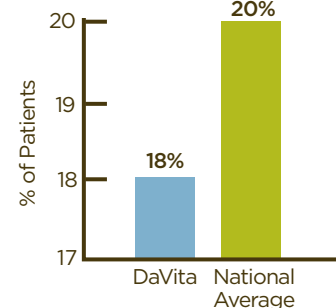
Source: CMS Clinical Performance Measures Report, USRDS Annual Report

KT/V < 2



Source: CMS Clinical Performance Measures Report, USRDS Annual Report

ALBUMIN < 3.5



Source: CMS Clinical Performance Measures Report, USRDS Annual Report

