Focus on our patients – always.

Cure kidney diseases through innovative research.

Prepare the next generation of nephrologists.

Arjang Djamali, MD, MS, FASN
Chief, Division of Nephrology

“Our team’s commitment is simple:
Focus on our patients – always.
Cure kidney diseases through innovative research.
Prepare the next generation of nephrologists.”

Arjang Djamali, MD, MS, FASN
Chief, Division of Nephrology
As nephrologists at UW Health, we provide a complete range of consultative, diagnostic and treatment services for patients with kidney diseases.

Cornerstones of our Division

- **PATIENT FOCUS**
  Exercising the highest level of clinical value to achieve the triple aim of better care, lower costs and healthier populations

- **INNOVATION**
  Developing and executing unique programs and services that go beyond routine care by keeping patients at the forefront of all decisions

- **PROFESSIONAL GROWTH**
  Creating an environment recognized nationally and internationally for its commitment to faculty personal and professional development and satisfaction

- **TEAMWORK**
  Recognizing that strong communication within multidisciplinary teams lead to value-based care for our patients
# Nephrology Division Faculty and Staff

## Division Chief

Arjang Djamali, MD, MS, FASN  
Professor;  
Chief, Nephrology Division  
TX

## Faculty

<table>
<thead>
<tr>
<th>Name</th>
<th>Title &amp; Positions</th>
<th>AKI, CKD, ESRD, GN, ON, PKD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brad Astor</td>
<td>PhD, MPH Associate Professor; Director of Research, Nephrology Division</td>
<td></td>
</tr>
<tr>
<td>Gauri Bhutani</td>
<td>MD Clinical Assistant Professor; Director, Polycystic Kidney Disease Program</td>
<td>AKI, CKD, ESRD, GN, ON, PKD</td>
</tr>
<tr>
<td>Micah Chan</td>
<td>MD, MPH Associate Professor (CHS); Clinical Chief, Nephrology Division; Director, Meriter Nephrology; Associate Director, Interventional Nephrology</td>
<td>AKI, CKD, ESRD, IN</td>
</tr>
<tr>
<td>Neetika Garg</td>
<td>MD Assistant Professor (CHS); Transplant Physician TX</td>
<td></td>
</tr>
<tr>
<td>Jonathan Jaffery</td>
<td>MD, MS, MMM, FACP Professor (CHS); Chief Population Health Officer, UW Health AKI, CKD, ESRD</td>
<td></td>
</tr>
<tr>
<td>R. Allan Jhagroo</td>
<td>MD Assistant Professor (CHS); Medical Director, ESRD Program; Director, MSD Program; Director, Outpatient Clinic AKI, CKD, ESRD, ST</td>
<td></td>
</tr>
<tr>
<td>Didier Mandelbrot</td>
<td>MD Professor (CHS); Medical Director, Kidney and Pancreas Transplant Program TX</td>
<td></td>
</tr>
<tr>
<td>Laura Maursetter</td>
<td>DO Assistant Professor (CHS); Director, Nephrology Fellowship Program AKI, CKD, ESRD, ST</td>
<td></td>
</tr>
<tr>
<td>Maha Mohamed</td>
<td>MD Assistant Professor (CHS); Director, Transplant Fellowship TX</td>
<td></td>
</tr>
<tr>
<td>Sarah Panzer</td>
<td>MD Assistant Professor AKI, CKD, GN</td>
<td></td>
</tr>
<tr>
<td>Sandesh Parajuli</td>
<td>MD Assistant Professor (CHS); Director, Delayed Graft Function Clinic TX</td>
<td></td>
</tr>
<tr>
<td>Tripti Singh</td>
<td>MD Assistant Professor (CHS); Director, Glomerular Disease Clinic AKI, CKD, ESRD, GN, ON, PKD, TX</td>
<td></td>
</tr>
<tr>
<td>Sana Waheed</td>
<td>MD Assistant Professor (CHS); Director, Home Dialysis; Associate Director, Nephrology Fellowship AKI, CKD, ESRD</td>
<td></td>
</tr>
<tr>
<td>Alex Yevzlin</td>
<td>MD Professor (CHS); Director, Interventional Nephrology; Director, Acute Dialysis AKI, ESRD, IN</td>
<td></td>
</tr>
</tbody>
</table>

## Subspecialty Key

- **AKI**: Acute Kidney Injury  
- **CKD**: Chronic Kidney Disease  
- **ESRD**: End Stage Renal Disease  
- **GN**: Glomerular Disease  
- **IN**: Interventional Nephrology  
- **MSD**: Metabolic Stone  
- **ON**: Onco-nephrology  
- **PKD**: Polycystic Kidney Disease  
- **TX**: Transplant
Advanced Practice Providers

Justin Blazel, NP
Advanced Practice Provider
TX

Valerie Carroll, PA-C
Advanced Practice Provider
AKI, CKD, ESRD

Eliza Harrold, PA-C
Advanced Practice Provider
AKI

Jen Larson, NP
Advanced Practice Provider
AKI, CKD, ESRD

Brenda Muth, NP
Advanced Practice Provider, Supervisor, APP Program
TX

Debra Schrader, PA-C
Advanced Practice Provider
AKI, CKD, ESRD

Jen Turk, NP
Advanced Practice Provider
TX

Maureen Wakeen, NP
Advanced Practice Provider
AKI, CKD, ESRD

Staff

Audrey Nelson, MHA
Associate Director, Nephrology Division

Dana Clark, MA
Assistant to the Division Chief

Meghan Crain, BS
Research Coordinator, Nephrology Division

John Paulson
Program Assistant, Transplant Nephrology

Shannon Reese, MS
Associate Researcher

Samantha Strennen, BS
Fellowship Coordinator

Nancy Wilson-Schlei, PhD
Senior Scientist
Nephrology and Department of Medicine Initiatives

Faculty development is critical to the Nephrology Division as well as all departments within UW Health. Our objective:

- Establish a system for individualized learning opportunities to maximize personal and professional growth and to foster creativity and innovation
- Establish standard practice for feedback (both giving and receiving) to address performance and satisfaction
- Increase collegiality among all division members past, present, and future

Examples of faculty and staff development in the Nephrology Division:

- **Mentorship**
  All faculty members on the Tenure and Clinical Health Sciences (CHS) tracks have a carefully selected mentorship committee that aids in guiding career choices to maximize growth and promotion. In addition, all junior faculty members have the support and mentorship of senior members of the division for their research, educational and clinical activities.

- **Education**
  Through changes in curriculum and training, we have increased the amount and quality of direct observation of all learners and improved the effectiveness of delivered feedback. The commitment to faculty training builds superior trainees, improves teamwork and ultimately enhances patient care.

- **Leadership and Subspeciality Training**
  The division, department, and medical school at UW Health have been instrumental in supporting faculty members for the development of their skills and interests in key areas of leadership and subspecialty. Specific examples include:
  - UW Health Physician Leadership Development Program (PLDP)
  - Robert Wood Johnson Foundation Health Policy Fellowship
  - Harvard School of Public Health Leadership Strategies for Evolving Health Care Executives
Kidney Transplant Program

The UW Health Transplant Program has performed more than 13,000 organ transplants since the program was established in 1966. Solid organ transplants play an important role in academic and clinical activities for UW Health which consistently ranks among the top 10 most active transplant programs in the country. In 2015, UW Health performed 271 kidney transplants and 118 live donor kidney transplants surpassing the numbers from all recent years.

Kidney Transplant Program (608) 263-1384

Unique Features of the Program

- We are an integrated team of physicians, surgeons, clinicians and professionals with expertise in transplant nephrology, histocompatibility and organ and tissue donation services.
- Transplant nephrologists manage the long-term follow-up care for pancreatic patients as well as kidney transplant patients.
- The kidney transplant program has one of the largest, oldest and most comprehensive databases in the country. It provides an excellent resource for faculty research and fellowship training.
- UW Health devotes significant resources to the efficient functioning of a large academic transplant program. Resources are provided for quality assurance, finance, regulatory and administrative support throughout the organization to assure a quality program.

Additional Program Highlights

- Transplant Nephrology Fellowship Program: a one-year comprehensive training program for two fellows
- Large volume solid organ transplant program
- Desensitization program
- Kidney Paired Exchange Program
- Care of non-renal solid organ transplant recipients with chronic kidney disease
- High volume outpatient clinic with more than 1,000 outpatient visits per month
- Rich academic transplant environment conducive to the development of clinical and translational research projects including ongoing clinical trials

Outcomes

<table>
<thead>
<tr>
<th></th>
<th>Median Time to Transplant for Waitlist Patients*</th>
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<tbody>
<tr>
<td>Kidney</td>
<td>20.4 months</td>
</tr>
<tr>
<td>Pancreas</td>
<td>16.2 months</td>
</tr>
<tr>
<td>Kidney/Pancreas</td>
<td>16.2 months</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>UW</td>
</tr>
<tr>
<td>Kidney</td>
<td>&gt;72</td>
</tr>
<tr>
<td>Pancreas</td>
<td>16.2</td>
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<tr>
<td>Kidney/Pancreas</td>
<td>14.8</td>
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</tbody>
</table>

* Data source: Scientific Registry of Transplant Recipients (SRTR), includes data from adult deceased and living donors for transplants performed at UWMC between 01/01/2010 and 06/30/2015

Exceptional outcomes with exceptional resources have led UW Health to become a nationally-recognized transplant program.”

Didier Mandelbrot, MD
Medical Director,
Kidney and Pancreas Transplantation

Continued on back
Adult Overall Kidney Transplant Graft Survival and Patient Survival – June 2016 Release

<table>
<thead>
<tr>
<th>Kidney Transplant Graft Survival</th>
<th>UW</th>
<th>Expected</th>
<th>National</th>
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</thead>
<tbody>
<tr>
<td>1 Month Survival (n=617)</td>
<td>98.70%</td>
<td>98.38%</td>
<td>98.37%</td>
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<tr>
<td>1 Year Survival (n=617)</td>
<td>95.49%</td>
<td>95.08%</td>
<td>95.08%</td>
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</table>

<table>
<thead>
<tr>
<th>Kidney Transplant Patient Survival</th>
<th>UW</th>
<th>Expected</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Month Survival (n=497)</td>
<td>99.80%</td>
<td>99.52%</td>
<td>99.51%</td>
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<tr>
<td>1 Year Survival (n=497)</td>
<td>97.52%</td>
<td>97.44%</td>
<td>97.42%</td>
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</table>


Living Donor Kidney Transplants

<table>
<thead>
<tr>
<th>Year</th>
<th>Total LD Transplants</th>
</tr>
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<tbody>
<tr>
<td>2012</td>
<td>89</td>
</tr>
<tr>
<td>2013</td>
<td>97</td>
</tr>
<tr>
<td>2014</td>
<td>88</td>
</tr>
<tr>
<td>2015</td>
<td>118</td>
</tr>
</tbody>
</table>

Paired Kidney Exchanges*

<table>
<thead>
<tr>
<th>Year</th>
<th>Total PKE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>18</td>
</tr>
<tr>
<td>2013</td>
<td>18</td>
</tr>
<tr>
<td>2014</td>
<td>22</td>
</tr>
<tr>
<td>2015</td>
<td>36</td>
</tr>
</tbody>
</table>

*Includes Internal, National Kidney Registry (NKR) and UNOS paired exchange kidney transplants

Directors

Didier Mandelbrot, MD
Medical Director, Kidney and Pancreas Transplantation

Dixon Kaufman, MD, PhD
Surgical Director, Kidney Transplantation

Maha Mohamed, MD
Director, Transplant Fellowship

Sandesh Parajuli, MD
Director, Delayed Graft Function Program

Learn more and contact us at:
transplant@uwhealth.org or uwhealth.org/transplant
The UW Health Interventional Nephrology program started in 2004 when this field was in its infancy. As a result, the University of Wisconsin program was at the forefront of developing this specialty and continues to pioneer new techniques and training programs that improve patient care and outcomes.

**Program Highlights**
- The UW Nephrology Division provides a year-long training program specifically in Interventional Nephrology providing significantly more in-depth training than most programs that are traditionally three months in length.
- The advanced techniques developed and utilized at UW Health lead the Nephrology Division’s standing as a tertiary care center for the region.
- The Interventional Nephrology faculty at UW are internationally known as speakers and for publishing more than 250 papers, lectures, manuscripts and book chapters including the first three textbooks on the topic of Interventional Nephrology.
- The UW Health Interventional Nephrology program is responsible for training academicians throughout the country at leading universities and health care institutions.

**Interventional Nephrology Procedures**

Phone (608) 265-7094

Since Interventional Nephrologists work to create, maintain and improve vascular access for hemodialysis patients, the common interventional nephrology procedures performed include:

- Insertion and removal of tunneled hemodialysis catheters
- Insertion and removal of peritoneal dialysis catheters
- Fibrin sheath removal from chronically indwelling central catheters
- Mechanical thrombectomies of clotted hemodialysis catheters
- Angiograms
- Angioplasties
- Mechanical thrombectomies of clotted AVFs and AVGs
- Diagnostic sonography
- Renal biopsies
- Accessory vein ligation
- Peritoneal dialysis catheter insertion/manipulation

The UW Health Interventional Nephrology program was recently featured in *Clinical Journal of the American Society of Nephrology*.

**Directors**

Alexander Yevzlin, MD
Director, Interventional Nephrology

Micah Chan, MD
Associate Director, Interventional Nephrology

*It has been a great privilege to be at the forefront of this young discipline. Dr. Chan and I have been blessed by the opportunity to contribute at a fundamental level to the emergence of our specialty with the publication of our three textbooks.*

Alexander Yevzlin, MD
Medical Director, Interventional Nephrology
The Nephrology Fellowship Program at UW Health is a comprehensive and nationally renowned training program. For over 50 years we have been producing outstanding nephrologists for the academic and private sectors. The two-year clinical program offers fellows direct involvement in all aspects of patient care, research, and education in a highly collegial environment. This prepares the next generation of nephrologists to enjoy success in clinical care, investigative methods and teaching. We also have the option of additional years of training in research, interventional nephrology or transplant nephrology for qualifying candidates.

**Fellowship Program**
- Training period: Two-year clinical training period (July cycle with three fellowship openings yearly)
- Number of trainees: Six
- ACGME Accreditation: Maximum cycle
- Assigned rotations in acute nephrology consultation, chronic inpatient dialysis, outpatient dialysis, kidney transplant, ambulatory care and rotations in a private practice setting
- Elective rotations in interventional nephrology, renal pathology, hypertension, pediatric nephrology and kidney imaging

**Program Highlights**
- Robust didactic schedule (see table on reverse side) with highly-involved faculty
- Practice experience in both university and private practice settings
- Diverse patient populations
- Independent clinic experience
- Exposure to a large transplant population
- Opportunities to participate in interventional nephrology procedures
- Ability to conduct meaningful clinical research

**Advanced Fellowships Offerings**
- ASN/AST Certified Medical Transplant Fellowship (1 additional year)
- ASDIN Certified Interventional Nephrology Fellowship (1 additional year)
- Research through a T32 program co-sponsored with the Division of Transplantation

**Applying to the Fellowship Program**
Applicants must have completed residency training in internal medicine before beginning this fellowship. Applications must be submitted through Electronic Residence Application Service (ERAS) and all positions will be filled in the National Residence Matching Program (NRMP). Further information about requirements is found on our website at: [medicine.wisc.edu/nephrology/fellowshipmain](http://medicine.wisc.edu/nephrology/fellowshipmain)

**Contact Information**
Laura Maursetter, DO, Program Director
Sana Waheed, MD, Associate Program Director
Samantha Strennen, Program Coordinator
Phone: (608) 265-7593
E-mail: sjthomps@medicine.wisc.edu
**Weekly Conference Schedule**

Each week, Fellows have opportunities to engage with Faculty and other Fellows to gain additional knowledge and insights into a variety of aspects of kidney diseases through conferences and learning opportunities.

<table>
<thead>
<tr>
<th>DAY</th>
<th>TITLE</th>
<th>DISCUSSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Transplant Grand Rounds</td>
<td>Leading topics in the field of transplantation covering novel surgical and management strategies</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Stone Conference</td>
<td>Important concepts in metabolic stone disease</td>
</tr>
<tr>
<td></td>
<td>Nephrology Grand Rounds</td>
<td>Innovative topics in nephrology provided by invited speakers and division members</td>
</tr>
<tr>
<td>Thursday</td>
<td><em>Tough Beans</em></td>
<td>Information discussion covering complicated nephrology diagnosis and management</td>
</tr>
<tr>
<td>Friday</td>
<td>Fellows Curriculum:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Journal Club</td>
<td>Current manuscripts reviewed and presented by Fellow with Mentor</td>
</tr>
<tr>
<td></td>
<td>Biopsy Conference</td>
<td>Combines pathology and a discussion about glomerular diseases</td>
</tr>
<tr>
<td></td>
<td>Core Topics</td>
<td>General and transplant nephrology topics provided by faculty members</td>
</tr>
<tr>
<td></td>
<td>Board Review</td>
<td>Review of topics that are frequently found on examination</td>
</tr>
</tbody>
</table>
The Nephrology Division has a strong interest in pursuing clinical, translational and basic research questions in nephrology and transplantation with ongoing studies in many aspects of kidney diseases.

**Clinical and Epidemiological Research**
Division faculty and fellows, in collaboration with colleagues from the School of Medicine and Public Health and around the University, are engaged in four primary areas of clinical research: Transplantation, Interventional Nephrology, Chronic Kidney Diseases and Metabolic Stone Disease.

- **Transplantation**
  The University of Wisconsin maintains one of the most active kidney transplant centers in the nation, with approximately 300 kidneys transplanted annually. Detailed data on donors and recipients, with over 15 years of follow-up for many patients, is available for research projects. This data allows researchers to explore a wide variety of clinical questions related to outcomes associated with putative risk factors and treatments. Examples include: the impact of renin-angiotensin system inhibitors on patient survival; outcomes associated with treatment of antibody mediated rejection; desensitization; establishment of an outpatient clinic for delayed graft function; and effectiveness of immunosuppression regimens for humoral tolerance. In addition to these observational studies, the large population allows efficient recruitment for single-center and multi-center clinical trials.

- **Interventional Nephrology**
  The Interventional Nephrology group is at the cutting edge of developing new techniques and devices and testing new medications for the prevention and treatment of vascular access complications. Our active research portfolio includes studies investigating causes of vascular access complications and numerous industry-funded randomized trials of endovascular grafts and other devices.

"The ongoing research projects in the Nephrology Division vary from basic research on the molecular and cellular level to animal studies of immune processes to clinical trials of devices and interventions to analyses of nationwide data on clinical outcomes in individuals with kidney disease. This wide range of perspectives provides the Division opportunities to directly translate cutting edge research to clinical practice to improve patient outcomes."

Brad Astor, MD
Director of Research, Nephrology Division
• **Chronic Kidney Diseases (CKD)**
  Research on CKD within the Nephrology Division focuses on identification of risk factors for CKD and outcomes associated with CKD, particularly cardiovascular disease (CVD). Much of this research has focused on biomarkers of kidney function and the association of these biomarkers with clinical outcomes including incident CKD, CVD and mortality. These topics have been explored in a variety of populations covering the full spectrum of kidney disease from the general population to individuals with end-stage renal disease (ESRD). Ongoing studies are making use of clinical data from dialysis patients treated at UW as well as analyses of national datasets of CKD and dialysis patients.

• **Metabolic Stone Disease**
  Research focuses on the identification of risk factors and interventions for kidney stone prevention. Involvement of multidisciplinary staff including nephrology, nutrition and urology, creates unique research opportunities. Outcomes focus on patient satisfaction and modification of urinary markers of risk. These topics have been studied in focused trials and national collaborations with applicability to the general public.

**Translational Research**

The Translational Research program in the Division of Nephrology and the UW Institute for Clinical and Translational Research (UW-ICTR) has helped investigators obtain competitive extramural grants while simultaneously enhancing research education for all members of the division. Key studies include:

- Monitoring kidney diseases in patients with native and transplant diseases.
- Noninvasive monitoring of renal oxygenation, perfusion, and metabolism with MRI through collaboration with the Departments of Radiology and Medical Physics
- Development of immune assays to monitor humoral and T cell tolerance
- Understanding mechanisms of humoral rejection following kidney transplant

• Determining the role of HLA and non-HLA Donor Specific Antibodies in antibody mediated processes
• Defining the role of plasma cell, B cell, and T cell phenotypes in antibody mediated rejection

**Basic Science**

The Nephrology Division uses traditional and state-of-the-art techniques in immunology, molecular biology, non-invasive imaging and biochemistry to determine the molecular and cellular mechanisms of kidney fibrosis. Our goal is a better understanding of the pathogenesis of glomerular, endothelial and tubular cell injury in kidney fibrosis. Animal models in use include kidney transplantation, chronic calcineurin inhibitor (CNI) induced fibrosis, unilateral ureteral obstruction and ischemia-reperfusion injury in wild-type and genetically defined mice and rats. Recent studies focus on the role of IgM antibodies in the pathogenesis of native and transplant kidney disease.
Glomerular Disease Program
(608) 270-5656 or (800) 323-8942
The UW Nephrology Division’s glomerular disease program is characterized by:
- Three nephrologists, a renal pathologist and a nurse dedicated to the care of patients with glomerular disease
- Patients with glomerular disease who require kidney transplantation are followed by the same team of experts pre- and post-transplant to ensure continuity of care
- Students and fellows from other divisions within the UW School of Medicine and Public Health that rotate through the Glomerular Disease program as part of their training
- A large volume of clinic visits dedicated to this specific group of patients, as described below:

| Number of patients with glomerular disease followed in the pre-transplant clinic |
|----------------------------------|-----|-----|-----|-----|-----|
|                                   | 2011 | 2012 | 2013 | 2014 | 2015 |
| Crescentic Glomerulonephritis     | 17   | 18   | 25   | 27   | 34   |
| Membranous nephropathy            | 37   | 44   | 59   | 57   | 86   |
| Focal segmental glomerulosclerosis| 28   | 43   | 57   | 57   | 55   |
| Minimal Change                    | 12   | 15   | 14   | 15   | 25   |
| IgA nephropathy                   | 51   | 69   | 95   | 87   | 132  |
| Lupus nephritis                   | 45   | 62   | 283  | 271  | 135  |

| Number of patients with glomerular disease followed in the post-transplant clinic |
|----------------------------------|-----|-----|-----|-----|-----|
|                                   | 2011 | 2012 | 2013 | 2014 | 2015 |
| Crescentic Glomerulonephritis     | 26   | 25   | 29   | 49   | 30   |
| Membranous nephropathy            | 25   | 30   | 49   | 74   | 50   |
| Focal segmental glomerulosclerosis| 55   | 102  | 123  | 204  | 110  |
| IgA nephropathy                   | 70   | 166  | 167  | 212  | 200  |
| Lupus nephritis                   | 111  | 136  | 310  | 461  | 250  |
| Membranoproliferative glomerulonephritis | 337  | 406  | 453  | 549  | 471  |

Directors
Tripti Singh, MD
Director of the Glomerular Diseases Program
Gauri Bhutani, MD
Associate Director of the Glomerular Diseases Program

General Nephrology
(608) 270-5656
Two clinics that support the outpatient needs of patients with kidney disease: the Chronic Kidney Disease Clinic and the Advanced Hypertension Clinic.

Chronic Kidney Disease Clinic
The Chronic Kidney Disease (CKD) Clinic is a fully functioning clinic providing point-of-service care for patients (including lab services) for prompt and patient-centered care. Unique features of the CKD Clinic include:
- Shared medical appointments. This program was established for patients with CKD. The group visits for patients who select this option include a multidisciplinary team of physicians, nephrology fellows, nurses, dietitians, pharmacists and social workers. This program has improved wait times and enhanced the opportunity to provide multidisciplinary patient care. Patients and families engage in a large support network of shared experiences.
- Regional services. The CKD Clinic offers outreach in several surrounding communities to support physicians and patients.
- Research. The CKD Clinic is participating in active clinical trials through the UW Health system.

Director
R. Allan Jhagroo
Medical Director, Chronic Kidney Disease Clinic

Advanced Hypertension Clinic
(608) 890-7300
The services of the Advanced Hypertension Clinic are provided by a multi-disciplinary team of hypertension physician experts that include nephrologists, cardiologists and endocrinologists.
- The services are delivered in collaboration with a team of nurses, nutritionists, exercise physiologists and a psychologist that specialize in the diagnosis and treatment of hypertension and the prevention of kidney, heart and blood vessel disease.
- The Advanced Hypertension Clinic is a Designated Comprehensive Hypertension Center by the American Society of Hypertension (ASH).

Clinical Chief
Micah Chan, MD
Metabolic Stone Clinic
(608) 263-4757 or (800) 323-8942

The prevention of recurring kidney stones is the focus of this unique program at UW Health. Using a multidisciplinary team approach headed by nephrology with support from a PhD nutritionist and urology, the weekly, one-half day clinic provides metabolic evaluation and treatments that are highly effective for preventing future stones. Approximately 600 patients are seen through the course of a year at the Metabolic Stone Clinic.

- The Metabolic Stone Clinic uses a 24-hour urine collection method to determine the specific causes of recurring kidney stones for each individual participating in the clinic.
- Twice monthly, up to eight new patients participate in a group, new patient appointment. The published outcomes of the group appointments show clinical efficiencies are gained; wait times are lowered; and patient satisfaction is increased.
- The clinic manages 30-40 patients at any given time, a significantly higher number compared to other programs due to its unique structure and management.
- Extensive, advanced research for kidney stone prevention is an outcome of this specialized clinic resulting in more than 100 published papers.
- Kidney diseases from monoclonal gammopathy is a particular area of expertise which our providers are actively studying in collaboration with other centers.

Directors
R. Allan Jhagroo, MD
Joint appointment with Division of Nephrology and Department of Urology

Polycystic Kidney Disease (PKD)

Polycystic Kidney Disease (PKD) is a rapidly advancing field with disease modifying treatments on the horizon. The UW Nephrology Division is actively engaged in creating a multi-disciplinary PKD clinic to provide comprehensive and state-of-the-art care for PKD patients.

- The PKD Clinic at UW Health includes experts in nephrology, radiology, genetics and surgery – all the necessary pillars to establish the foundation for excellent care in PKD.
- The Nephrology Division has laid the groundwork for upcoming new treatments in this field once they are commercially available. As an example, the PKD Clinic has the capability to obtain total kidney volumes on three-dimensional reconstructions of CT/MRI scans, pertinent to individualized care for PKD on upcoming treatments.
- The PKD program at UW Health is committed to research and development of a PKD Registry to further advance care in this area of kidney diseases.
- The UW Health Nephrology Division has formed ties with the PKD Foundation to advocate for continued research and need for specialized patient care.

Directors
Gauri Bhutani, MD
Director of the PKD Program
Tripti Singh, MD
Associate Director of the PKD Program

Onco-Nephrology

Onco-nephrology is a new but increasingly important area of nephrology that cares for patients with kidney diseases from cancer or as a result of cancer treatment. The UW Nephrology Division is at the forefront of establishing a specialized clinic and expertise for the complex care management required in this field.

- The Nephrology Division has partnered with the Hematology-Oncology Division for close collaborative care of these complicated and life-threatening disease conditions.
- The UW Nephrology Division is working closely with the experts in renal pathology to develop and utilize modern and optimal techniques for renal biopsies to best diagnose the histology of kidney tissue seen in these multifaceted diseases.
- Kidney diseases from monoclonal gammopathy is a particular area of expertise which our providers are actively studying in collaboration with other centers.

Directors
Gauri Bhutani, MD
Director of the Onco-Nephrology Program
Tripti Singh, MD
Associate Director of the Onco-Nephrology Program

"We routinely encounter patients that have suffered from dozens of kidney stones in their lives. We assure proper testing and treatment of these patients to prevent future kidney stones. Prevention requires specialized training to interpret 24-hour urine studies. These studies are used to guide therapy that prevent future kidney stone occurrences. The UW nephrology team is one of the few groups in the state with this advanced training."

R. Allan Jhagroo, MD
Joint appointment with Division of Nephrology and Department of Urology
The Nephrology Division encompasses all facets of high acuity kidney care at UW Health including a comprehensive inpatient dialysis unit and services to all inpatient units. As a Level 1 Trauma Center, the Nephrology Division cares for patients with acute kidney injuries and illnesses from Wisconsin and the surrounding states. The Nephrology Division provides:

- Point of care urine microscopy testing and kidney biopsy services for acute kidney injury to determine the quickest and most efficient method of treatment.
- 24/7 renal replacement therapy coverage

**Renal Replacement Therapy**
(July 2015 – June 2016)

- Continuous Renal Replacement Therapy (CRRT) days: 1,141
- Hemodialysis Treatments: 4,780

- Plasmapheresis for glomerular disease and acute kidney injuries.
- Comprehensive consultation and inpatient dialysis services at other locations:
  - The William Middleton Veterans Hospital
  - Meriter Hospital
  - Select Specialty Hospitals
  - The American Center
  - The Rehabilitation Hospital

- **Research**: The Nephrology Division participates in ongoing clinical trials in Acute Kidney Care including:
  - Binding and deactivation of WBCs in the setting of CRRT
  - Acute start peritoneal dialysis for ESRD and AKI
  - Development of percutaneous novel access devices for HD

**Director**
Alexander Yevzlin, MD
Director of Acute Kidney Injury Services

**Acute Inpatient Dialysis (608) 263-8748**
The Nephrology Division provides extensive approaches and options for patients with End Stage Renal Disease (ESRD). The University of Wisconsin Dialysis Program was started in 1974 and now includes two hemodialysis units, peritoneal dialysis and home dialysis services. In 2016, more than 280 patients with kidney failure are managed by the Nephrology Division. Of this total, 220 receive in-center dialysis at WDI (Wisconsin Dialysis Inc), and the remaining are treated through home hemodialysis or peritoneal dialysis.

- Interventional nephrologists and vascular surgeons are part of the ESRD team and work closely with the dialysis staff to bring unique expertise to the ESRD program.
- The primary dialysis unit shares space with the UW Nephrology Division offices and the Kidney Clinic. This provides physician presence in the same facility for quick responses to patients and staff as needed.
- The Nephrology Division is conducting innovative research on home dialysis patients and their outcomes.
- All dialysis shifts for the in-center units have additional coverage by advance practice providers.
- The ESRD program works closely with the Nephrology Transplant team achieving close to a 20 percent transplant rate.

Directors
R. Allan Jhagroo, MD, Director of the ESRD Program
Sana Waheed, MD Director of Home Dialysis Program

Wisconsin Dialysis, Inc.
WDI Fitchburg (608) 270-5638
WDI East (608) 243-3003
WDI Home Dialysis (608) 270-5643

“Our close integration with the UW health system enables us to provide holistic care and to coordinate patient needs outside of nephrology.”

R. Allan Jhagroo, MD
Medical Director,
Wisconsin Dialysis