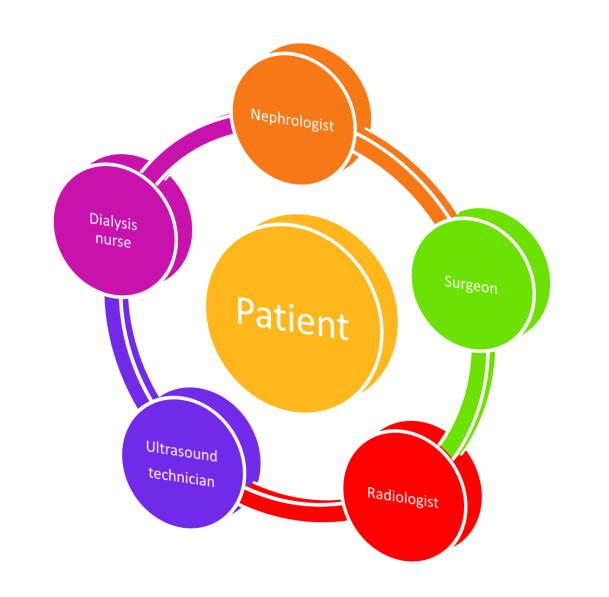
Nursing care for AV Fistula: pre-post creation

Magda van Loon, NP, PhD
University Medical Centre, Maastricht



Multidisciplinary approach

- Close collaboration
- Commitment
- Competency
- Communication





Successful Vascular Access Program

Preoperative care

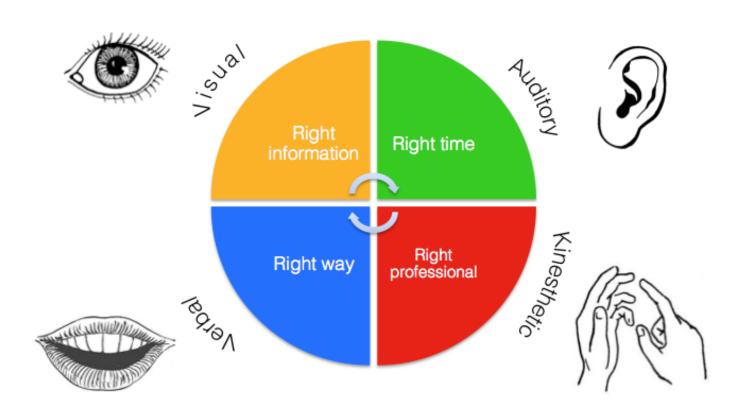
- Continuous information & education
- Assessment & surgical plan

Postoperative care

- Monitoring & Surveillance
- Cannulation
- Management & treatment of complications
- Multidisciplinary collaboration
- Data collection & Management

Patient education

Tailored to needs

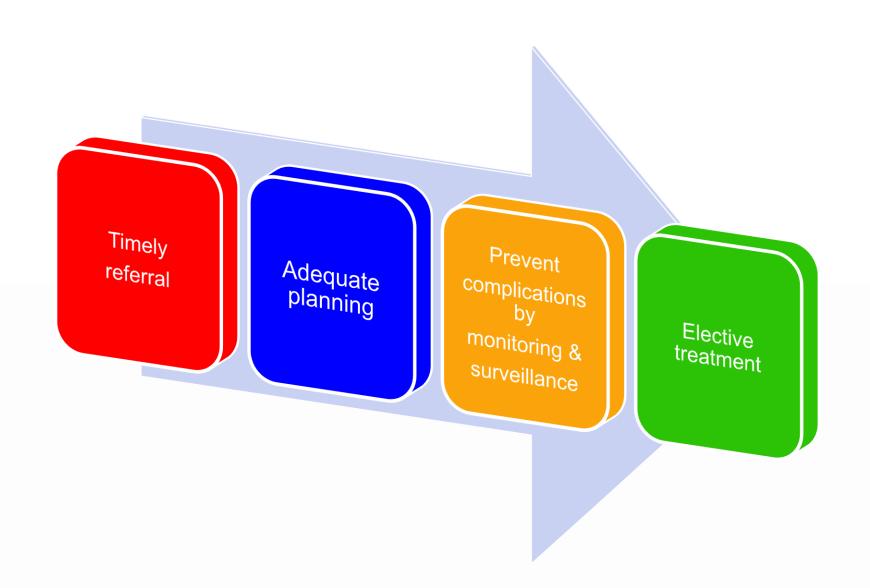


Education

- Knowledge and skills
- Follow procedures and protocols
- Cannulation, monitoring and surveillance
- Continue education programs



Streamlined the processes



Physical examination



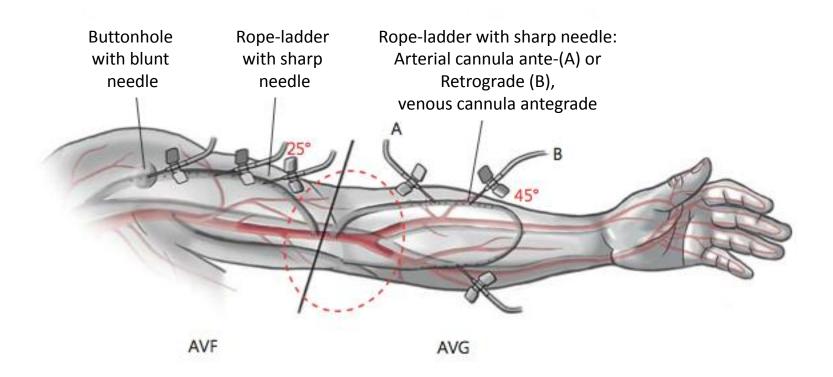
Inspection

- Palpation
 - ✓ Pulse augmentation
 - ✓ Elevation test
- Auscultation



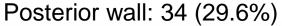
Cannulation technique

Rope-ladder & Buttonhole

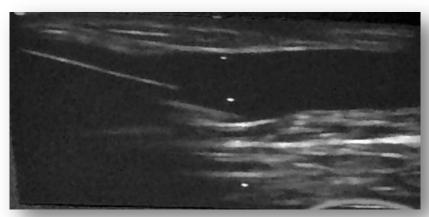


Surveillance study of intraluminal needle positioning: N=115

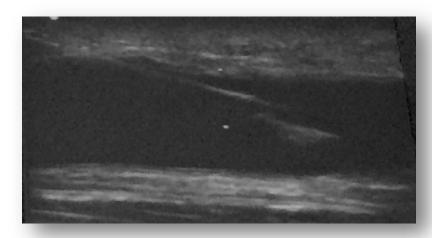
Anterior wall: 34 (29.6%)

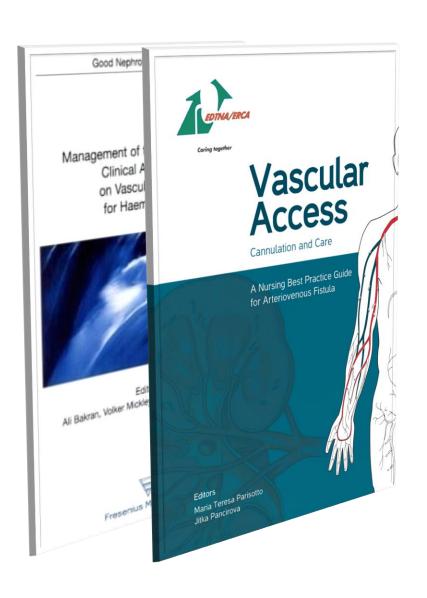






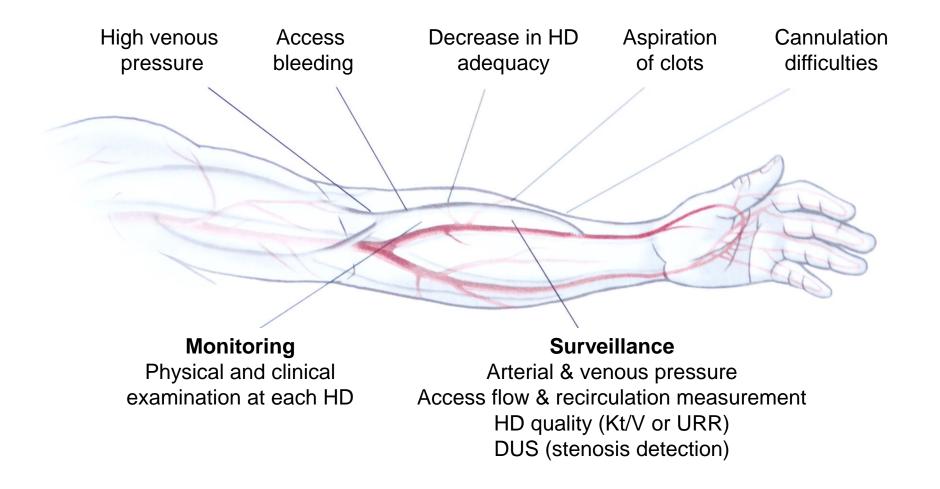
Centre of the vessel lumen: 12 (10.4%)





- Implement EBP protocols
- Report complications
- Open culture
- Share information

Signs & strategies of AVF malfunction



Referral for appropriate care of complications

- Timely referral of AVF problems
- Prolong patency and deliver uninterrupted HD
- Rely each day on surgeon or radiologist
- Thrombosis treated within 24 hours



Multidisciplinary meeting



Data collection & Management

- Number of infections & thromboses
- Central Venous Catheters
- Number & results of surgical and radiological interventions
- Waiting time

Conclusion

- Multidisciplinary effort
- Dialysis nurses play a key role
- Awareness, skills & knowledge
- Education
- Quality improvement program
- Collection of VA data

