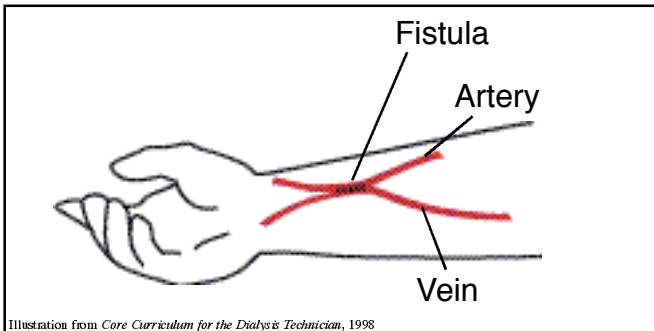




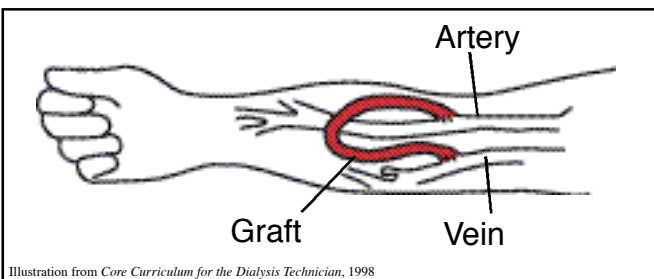
What is a vascular access?

A **vascular access** is a way to reach the blood vessels for hemodialysis. There are three types:

A **fistula** is your artery and vein sewed together. Blood from the artery makes the vein thicker so it can be used for dialysis. A fistula is often the longest-lasting access.



A **graft** is a piece of man-made blood vessel. It is used to connect an artery and a vein together.



A **catheter** is a plastic tube placed into a vein in the neck, chest, or groin. Catheters may be used for a short time while a fistula or graft is healing. In some patients with very poor veins and arteries, a permanent catheter may be placed in the chest.

Why is a vascular access important to me?

Your access is your dialysis lifeline. *You have only a few sites for vascular access. It is important to care for your access so it will last as long as possible.*

What happens in access surgery?

A fistula or graft is most often placed in an arm, but sometimes in a leg. Your doctor will decide which type of access will work best for you. Ask your doctor if a fistula will work for you.

Surgery for a fistula or graft is often done with local anesthesia on an outpatient basis. Medication may be needed for mild to moderate pain. Sometimes swelling of the arm may occur for a few days or weeks.

When can my access be used?

It is best to create an access before it is needed for dialysis. If a new access is used too soon after surgery, it can be damaged. A new fistula should ideally not be used for 3 to 4 months after surgery. A new graft should not be used for 3 to 6 weeks.

What should I do after surgery?

Exercise that brings more blood flow to the arm can help a fistula to work better. Squeezing a rubber ball many times a day can help the fistula *mature*, or become ready to use.

How can I keep my access working?

Problem	How can I prevent it?	What should I ask?
I want to avoid infection.	<ul style="list-style-type: none"> • Keep your access clean. • Be sure your access is washed with antibacterial soap <i>and</i> iodine or alcohol before it is used for dialysis. • Tell the nurse if your access is warm, red, has pus, or you have a fever. 	<ul style="list-style-type: none"> • How should I clean my access? • Do I need to cover my access in the bathtub or shower? • Can I swim in a pool or a lake? • Who should I call if I have an access problem?
I want to avoid blockage.	<ul style="list-style-type: none"> • Learn how to feel the <i>thrill</i> (vibration) and listen for the <i>bruit</i> (buzzing) in your access. Tell the nurse if the thrill or bruit changes. • Tell the nurse if your hand is cold, blue, numb, painful, or hard to move. 	<ul style="list-style-type: none"> • Can my doctor or nurse tell that my access is not working well? How do they know? • If my access is blocked, can it be fixed? How?
I don't want to injure my access.	<ul style="list-style-type: none"> • Learn how needle sites are rotated on your access. Be sure the right site is used at each treatment. • Do not carry heavy weights across the access. • Avoid pressure on the access during sleep. • Avoid tight clothing. • Do not allow blood pressure or blood draws from this arm. 	<ul style="list-style-type: none"> • What is the needle rotation pattern for my access? • How much weight can I carry safely after surgery? When can I carry more? • Can I wear a watch or hang a purse over my access arm? • How can I avoid sleeping on my access arm?

Where can I get more information about vascular access?

- Visit Kidney School™ Module 8: *Vascular Access: A Lifeline for Dialysis* at www.kidneyschool.org.
- *Focus on Fistulas/Your Access: A Choice for a Better Life, In Control* Vol. 1 #1, March 2004. For a free copy go to www.lifeoptions.org.
- *Understanding your hemodialysis access options.* To request a free copy, call the American Association of Kidney Patients (AAKP) at (800) 749-AAKP or visit their website at www.aakp.org.



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