

TAKE ACTION WITH YOUR SURGEONS

- Refer to surgeon early for 'AVF only' evaluation and timely placement, *if appropriate for patient.*
- Select surgeon based on best outcomes, & ability to provide access services.
- Provide education on full range of appropriate surgical approaches to AVF evaluation and placement to surgeons. (DVD/CD set as resource)
- Educate all patients how to care vessels prior to fistula placement. Encourage them to tell their other health care providers as well.
- Partner and talk often with your surgeons and nephrologists. Encourage your medical director and nephrologists to develop a partnership.
- Educate surgeons on new reimbursement guidelines, including 'G codes'.

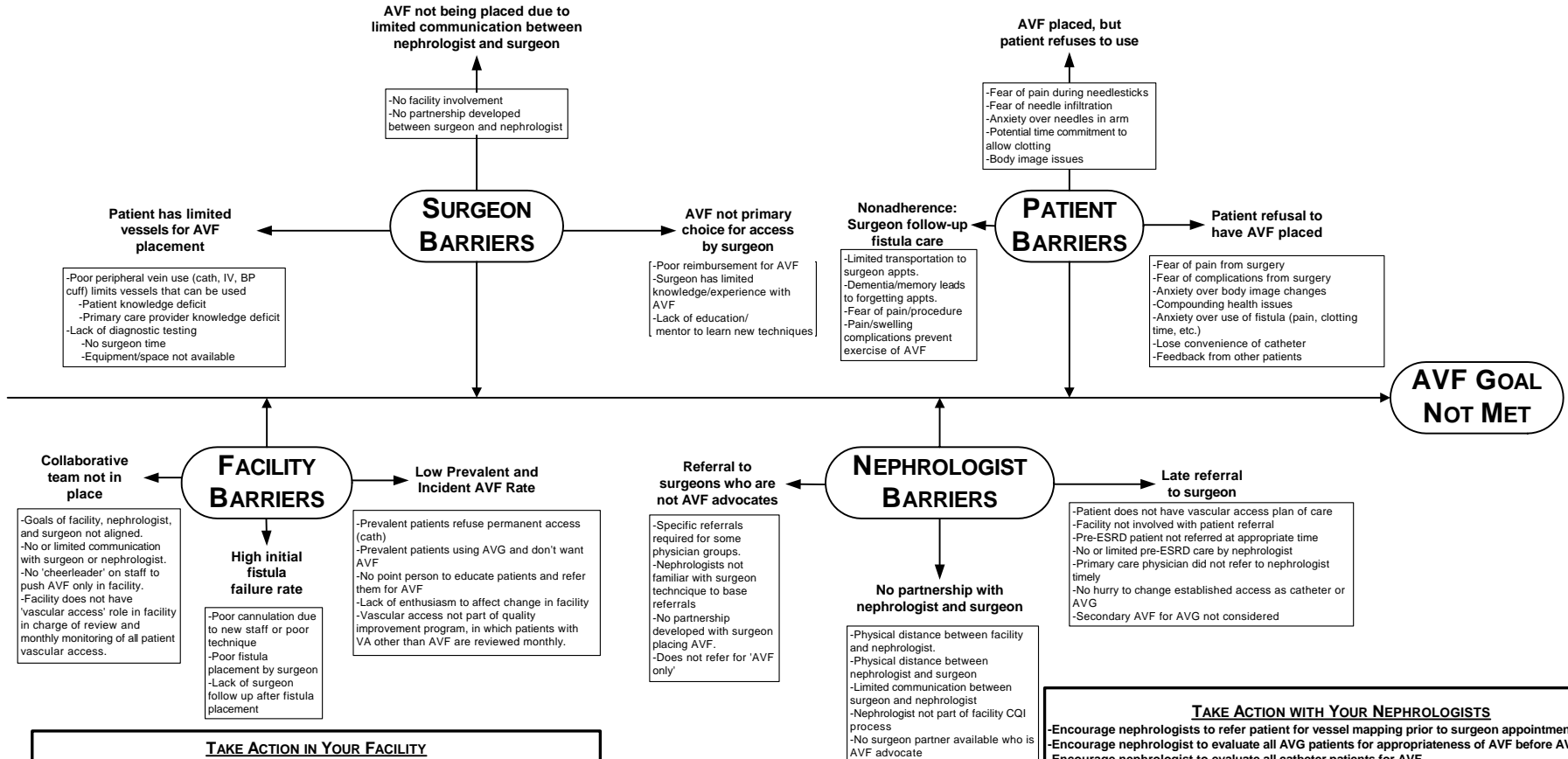
ROOT CAUSE ANALYSIS

FACILITY AVF RATE < DESIRED GOAL

FACILITY GOAL = AVF > _____ %

TAKE ACTION WITH YOUR PATIENTS

- Refer patients to surgeon early, within the first month of treatment at your facility.
- Educate patients on advantages and disadvantages of vascular access types.
- Educate family or caregiver on vascular access.
- Assign facility staff to follow patient through process of having AVF placed, including appointment reminders, facilitate scheduling and transportation, follow up education, etc.
- Talk with each indicated patient who is not dialyzing with AVF monthly to re-educate and recommend AVF.
- Encourage patient to know access and where needles are placed at last treatment.
- Dispell AVF patients myths through education and encouragement.



TAKE ACTION IN YOUR FACILITY

- Make AVF part of your CQI program and review each patient not dialyzing with AVF monthly.
- Appoint a staff to be a 'cheerleader' for AVF and monitor patient access and follow up with surgeon and nephrologist when problems arise.
- Perform routine access monitoring.
- Talk with your medical director about starting partnership with surgeons.
- Educate and empower staff on Fistula First program.
- Implement cannulation training program (See resources)
- Refer patients to nephrologist and surgeon for secondary AVF if using AVG.

TAKE ACTION WITH YOUR NEPHROLOGISTS

- Encourage nephrologists to refer patient for vessel mapping prior to surgeon appointment.
- Encourage nephrologist to evaluate all AVG patients for appropriateness of AVF before AVG failure.
- Encourage nephrologist to evaluate all catheter patients for AVF.
- Encourage nephrologist to write referral to surgeon for 'AVF only eval and placement *if appropriate*'.
- Encourage nephrologist to take part in CQI discussions of vascular access.
- Talk with your surgeons and nephrologist and assist them to develop a partnership to place AVF first.
- Collaborate with nephrologist to implement vascular access plan of care for each patient.
- Encourage nephrologist to refer to surgeon who is able and willing to place AVF first.
- Request assistance from nephrology and corporate resources to collaborate with nephrologists.



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