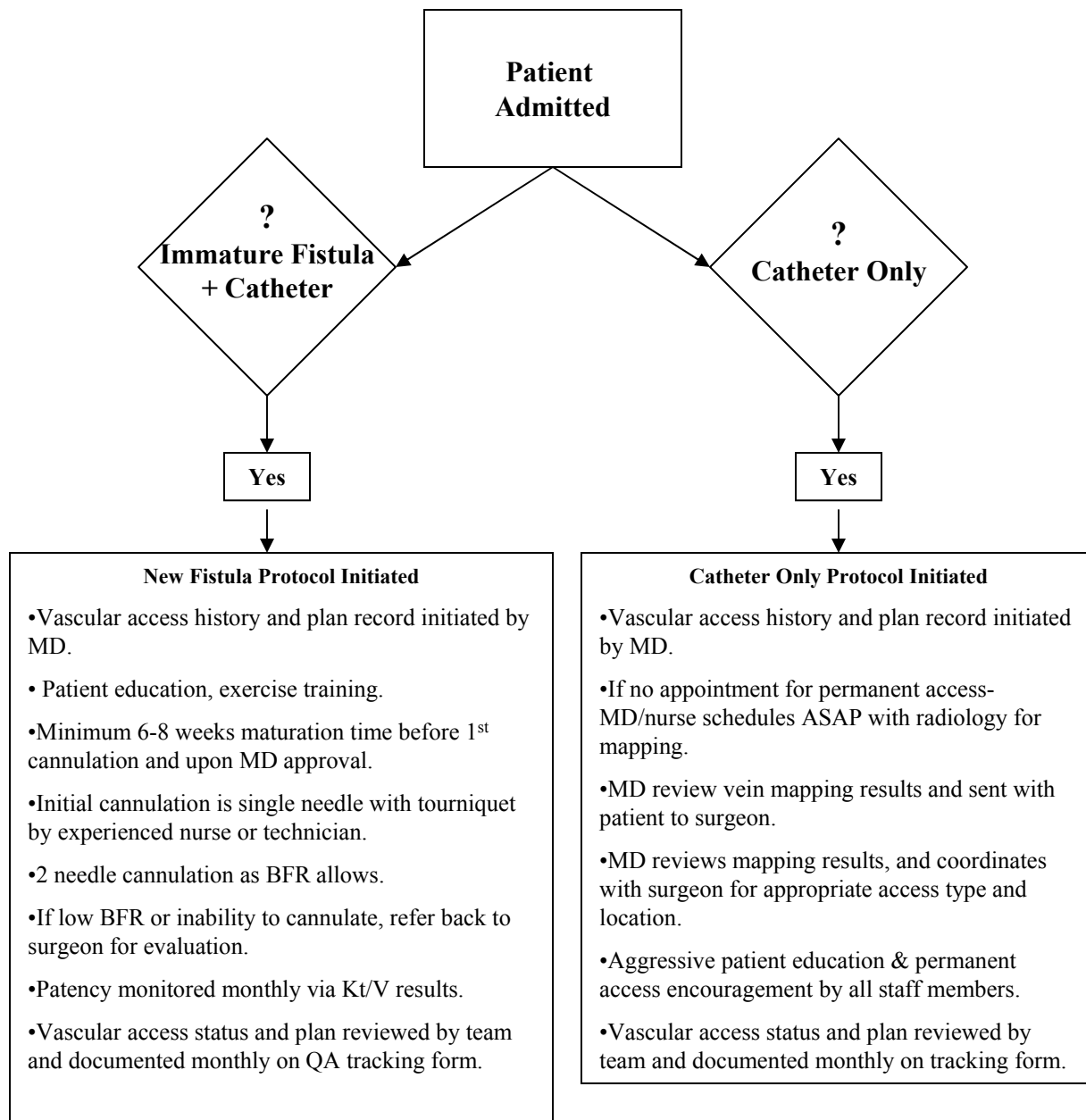


Example Facility A: Fistula Management Process & Strategies



Example Facility A: Facility Information

Facility Specifics

#99 HD Patients / 25PD patients
20 stations
Corporate facility
Urban unit
3 physicians
Utilization of OP VA clinic

Vascular Access Information (5/03)

- **47% Fistulas**
- **34% Grafts**
- **16% Catheters**
 - 8 (50%) *fistula maturing*
 - 1 *graft maturing*
 - 4 *awaiting graft or fistula placement*
 - 2 *patients with no AV options*
- **0.6 clotting episodes per patient - per month thrombosis rate.**

Strategies and Processes to Increase Fistula rate

- Medical Director (s) and nurses recognize the importance of fistulas as 1st choice for vascular access and have implemented QI activity to meet the K/DOQI fistula targets
- Medical Director (s) have excellent working relationship with a small group of surgeons who work in collaboration to provide their patients the best access option.
- Medical Director(s) is very proactive with referring pre-ESRD patients to radiology for vein mapping.
- MD reviews vein mapping results and send patient to surgeon
- MD reviews mapping results, and coordinates with surgeon for appropriate access type and location.
- Documenting patient vascular access status and plans in medical record and in QI provides an ongoing stimulus to team to focus on vascular access.
- Facility maintains a vascular access record for each patient that includes access type, procedures, dates, and physician
- About 40 % of patients that start in unit with fistula
- CKD program details?