

Current Vascular Access History

To be filled out with each new access and used as a face sheet in the Vascular Access Section of the chart.
A separate page should be used for each new access whether permanent or temporary.

Patient: _____ **DOB:** ____ / ____ / ____ **Dialysis Start Date:** ____ / ____ / ____
Primary Nephrologist: _____ **Phone:** _____ **Fax:** _____
Primary Access Surgeon: _____ **Phone:** _____ **Fax:** _____

Current Access: (when filled out for new access, add abandoned access to "Prior Accesses" list)

Check all that apply:

Type: <input type="checkbox"/> Graft <input type="checkbox"/> PTFE <input type="checkbox"/> Bovine <input type="checkbox"/> Other (specify): _____			<input type="checkbox"/> Fistula	<input type="checkbox"/> Catheter
Location of graft or fistula: <input type="checkbox"/> Arm <input type="checkbox"/> Leg		<input type="checkbox"/> Left <input type="checkbox"/> Right	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
If Catheter:	<input type="checkbox"/> Temp <input type="checkbox"/> Permanent	<input type="checkbox"/> Left <input type="checkbox"/> Right	<input type="checkbox"/> IJ <input type="checkbox"/> SC	<input type="checkbox"/> Cuffed
			<input type="checkbox"/> Femoral <input type="checkbox"/> Other	<input type="checkbox"/> Non-Cuffed

Graft/Fistula Insertion Date: ____ / ____ / ____ **First Use Date:** ____ / ____ / ____

Access Surgeon: _____

Facility Inserted: _____

Access intervention History (also to be included as face sheet with Procedure Reports/ Diagrams)

Interventions (Current Access):

Date	Procedure	Reason	Facility IP/OP	Surgeon/Interventionist
	Results of Procedure		Findings of Radiologist	
	Results of Procedure		Findings of Radiologist	
	Results of Procedure		Findings of Radiologist	
	Results of Procedure		Findings of Radiologist	