

The important of chair assignment's for the development of av/fin center dialysis for the first 120 days

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Patients new to hemodialysis are subjected to an overabundance of new experiences ranging from new information, procedures, environments, procedures, and people which generates an onslaught of stimuli and added stress. Explored are alternative methods of integrating new patients into the outpatient hemodialysis setting and allows patients the opportunity for a period of transition and assimilation to their life on dialysis. Implementing a short period of time usually 120 days that patients can become familiar with staff, learn more about their disease process and life on dialysis allows for the building of a strong support system and collaborative approach to patient care; with the goal of empowering the patient and improving clinical outcomes and Fistula First AV fistula rate. In a recent study of AVFs, the failure rate of first time cannulation attempts in autogenous AVF was high at 37%; and 19% of patients with arteriovenous grafts (AVGs) having more than 10 mis-cannulations. Cannulation-induced hematomas resulted in patients undergoing both single-needle dialysis and dialysis with a catheter in 40% of the patients (van Loon et al., 2009). There is new research that has determined a minimal thickness of the AV fistula wall for successful cannulation using high frequency ultrasound. This could be just one strategy that could help prevent several common issues with new AVFs: Accesses that fail-to-mature; cannulation attempted before maturation is complete; inexperienced staff cannulation; and insufficient information regarding the access

Biography

Stuart Mott is a vascular access nurse for DCI Columbia Missouri. He has written and published 6 articles in Nephrology Nursing Journal. He graduated from the University of Nebraska. He has been in over 101 clinics where he trains staff as well as patients in cannulation techniques. He has two web pages Homedialysis.org and Homedialyzersunite.org where he helps patients as well as staff on problems associate with cannulation technique. He is a board member of ANNA chapter 318 Central Missouri. He is board member of Net-Work 12 Medical Review Board and work with Fistula First Breakthrough Initiative 2009.

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