

Caring for a Patient or Resident with a Hemodialysis Arteriovenous Fistula (AVF) or Arteriovenous Graft (AVG)

Just-in-Time Training Module



FACILITATOR GUIDANCE AND INSTRUCTIONS

Use this training module to provide just-in-time essential guidance to nursing assistants who are providing care to a patient or resident with a hemodialysis AVF or AVG. If this is the first time your facility is caring for a patient or resident with a AVF or AVG or for an individual receiving hemodialysis, review your Facility Assessment, add hemodialysis as a service, and evaluate additional training needs for all disciplines. Consider partnering with your contracted dialysis provider(s) to conduct education or to review your learning materials.

Prior to using this module, review and adjust content as needed to align this guidance with your facility policies and procedures including those that address:

- Hand hygiene
- Activities of Daily Living (ADL) care
- Infection prevention and control
- Staff competencies

Tips for Using this Training Module

1. Use a sign-in sheet to document education and retain the sign-in sheet as part of your Dialysis Critical Pathway documentation.
2. If teach-back responses are incorrect, provide additional guidance using different approaches, words, or scenarios and reassess understanding.
3. Connect the content to the circumstances in your facility to help your audience relate and apply the concepts confidently.
4. Consider providing written learning content in the preferred languages of your staff.
5. The teach-back questions can be used as a pre- and post-learning assessment to evaluate the effectiveness of education provided.



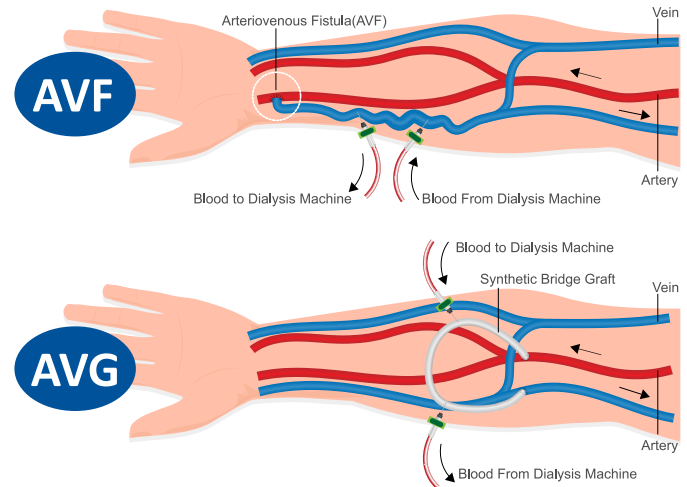
Remind your audience that any time they see a resident in distress or at risk of immediate harm they should respond to the emergency according to facility protocols.

Patients and residents with arteriovenous fistulas (AVFs) and arteriovenous grafts (AVGs) have specific care needs. They rely on you to keep them safe while you are providing care for or assisting with ADLs.

What are AVFs and AVGs?

Arteriovenous Fistula (AVF): An AVF is made by surgically connecting an artery and a vein, usually in the arm.

Arteriovenous Graft (AVG): An AVG is made by surgically using a synthetic tube to connect an artery and a vein.



Safety Precautions

- Always perform hand hygiene before and after touching the access site.
- Follow the care team's instructions on when to remove the pressure dressing following the dialysis treatment appointment.
- Do not leave the dressing in place overnight.
- Do not use the arm with the AVG/AVF for taking blood pressure or drawing blood.
- Advise patients or residents to avoid wearing tight clothing or accessories on the arm or wrist with the AVG or AVF (i.e. bracelets, watches).
- Any significant bleeding from AVG or AVF is a medical emergency. Apply firm, constant pressure to site and call for help immediately.



NOTIFY A NURSE IMMEDIATELY IF:

- The patient reports any discomfort or concerns about their AVG or AVF site.
- There are any signs of bleeding or bruising around the AVF or AVG site.
- Redness, warmth, swelling, pain, or pus is noted near the AVF or AVG site.
- The patient's or resident's behavior differs from their usual behavior.
- The patient or resident has chills, is warm to the touch, or has a fever as this could mean a systemic infection.
- Your patient or resident reports new or increased pain or discomfort

SAMPLE TEACH-BACK SCENARIO-BASED QUESTIONS

These questions can be used for individual staff training or as a group exercise during a shift huddle or training. Additional coaching guidance is provided in italic font in the answer guide below.

Questions	TRUE	FALSE
When repositioning a patient or resident, I see that the dressing to his AVG/AVF is soiled with blood and his skin is bruising. I don't need to report this to his nurse.		
A patient or resident tells me her skin is itchy. I see that her skin looks red and swollen around the AVF/AVG site. I should notify the nurse immediately.		
I am helping a patient or resident go to the bathroom and notice his AVG/AVF site has a small amount of yellow drainage. I clean the area, and I should tell the nurse during the shift change report.		
I check on the patient or resident and note that the AVF/AVG site scab has fallen off and a large amount of blood is on the bedding coming from the AVF/AVG site. This is a medical emergency. I should apply firm pressure to the site and call for help immediately.		
I am getting ready to assist a patient or resident with bathing and noticed the patient or resident is shaking with chills and warm to the touch. I should proceed with bathing because a warm bath or shower will warm him up.		
I am asked by the nurse to take the blood pressure of a patient or resident with AVG or AVF. I can use either arm to take their blood pressure.		
The patient or resident has a new watch on the wrist where the AVF or AVG is located and it appears tight. I should ask the patient or resident permission to move the watch to the other arm and I should report it to the nurse.		

ANSWER KEY AND RATIONALE

Questions	Additional Guidance	TRUE	FALSE
When repositioning a patient or resident, I see that the dressing to his AVF/AVG is soiled with blood and his skin is bruising. I don't need to report this to his nurse.	<i>Any signs of bleeding or bruising around the AVF or AVG site could indicate complications that need to be assessed by the nurse.</i>		False
A patient or resident tells me her skin is itchy. I see that her skin looks red and swollen around the AVF/AVG site. I should notify the nurse immediately.	<i>This could be a sign of infection that requires a nurse to assess.</i>	True	
I am helping a patient or resident go to the bathroom and notice his AVG/AVF site has a small amount of yellow drainage. I clean the area, and I should tell the nurse during the shift change report.	<i>Staff should not wipe off drainage and should notify the nurse immediately as it will require further assessment as it may be signs of infection.</i>		False
I check on the patient or resident and note that the AVF/AVG site scab has fallen off and a large amount of blood is on the bedding coming from the AVF/AVG site. This is a medical emergency. I should apply firm pressure to the site and call for help immediately.	<i>This is a medical emergency. The AVF or AVG pumps a lot of blood. If it leaks, it can cause a lot of blood loss quickly, which is very dangerous. The patient could die if someone doesn't act fast to stop the bleeding by applying pressure. (Discuss use of gloves and items to use for application of pressure.)</i>	True	
I am getting ready to assist a patient or resident with bathing and noticed the patient or resident is shaking with chills and warm to the touch. I should proceed with bathing because a warm bath or shower will warm him up.	<i>This could be signs of an infection; the patient or resident may have a fever. Report to nurse immediately for assessment.</i>		False
I am asked by the nurse to take the blood pressure of a patient or resident with AVG or AVF. I can use either arm to take their blood pressure.	<i>The arm with the AVF or AVG must not have blood pressure or blood draws, it must be protected from any potential injury as it is the patient or residents "lifeline" for dialysis.</i>		False
The patient or resident has a new watch on the wrist where the AVF or AVG is located and it appears tight. I should ask the patient or resident permission to move the watch to the other arm and I should report it to the nurse.	<i>No tight clothing, accessories, or other items should be placed on the arm with AVF or AVG as the area must be protected.</i>	True	