

# DaVita

## Columbus East Dialysis

### Catheter Reduction: Performance Improvement Initiative

Brandi Ross, Nurse Manager

# Access Rates at Columbus East

## Fistulas In Use:

- February 2011 – 63.4%
- November 2011 – 72.6%



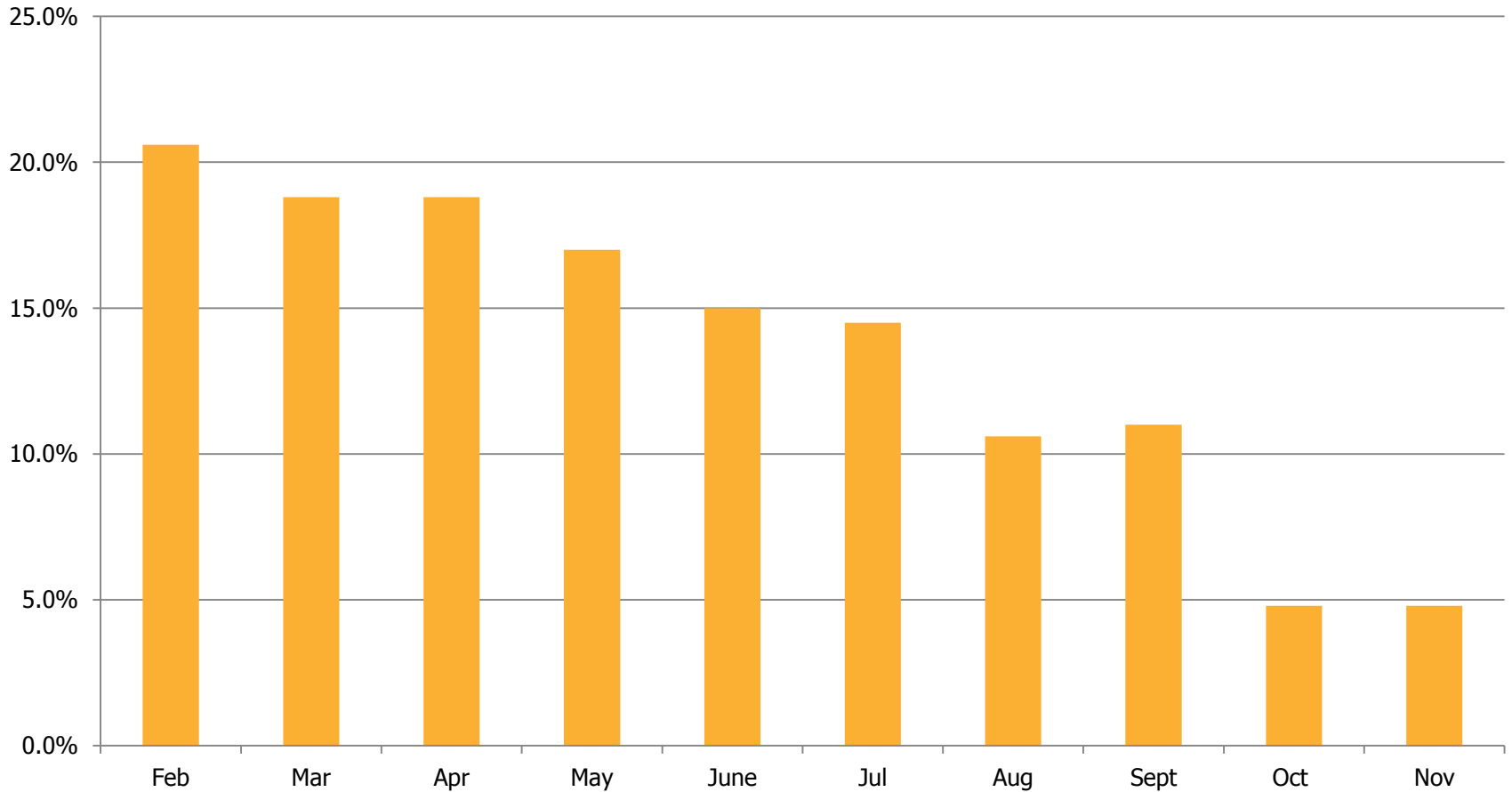
## Catheters:

- February 2011 – 20.6%
- November 2011 – 4.6%



# 10 Month Catheter Trend

**All Catheter Rate**



# Columbus East's Keys to Success

- Teammate and Physician Involvement
  - Share Data and Trends
  - Develop Processes
  - Relentless Follow-up and Education
- Initiation of 7 Step CVC Removal Process
- Celebration of Accomplishments with Teammates and Patients

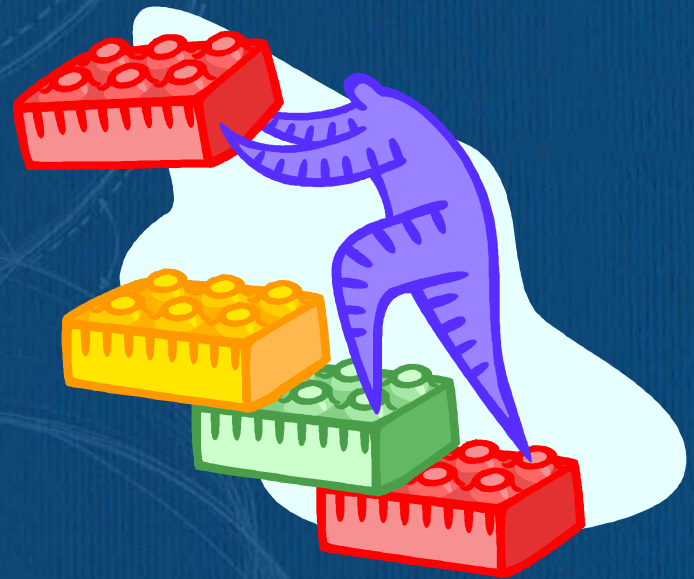
# Teammate Involvement

- All teammates should provide education and support
  - Dedicated Access Manager:
    - Analyze data and collaborate with IDT
    - Facilitate access removal process and scheduling of appointments
    - Develop educational initiatives and activities for patients and teammates
- \*Note: It is vitally important that the access manager is capable, organized and motivated!



# 7 Step Process

1. Education
2. Pre-Op Referral
3. Vessel Mapping
4. Access Surgery
5. Post-Op Evaluation
6. Cannulation
7. Catheter Removal



# Step 1: Education

- Patient education begins during first week of treatment.
- Involve patient, family members, physician and teammates
- Develop a plan of care
- Relentless follow-up

# Step 2: Pre-Op Referral

- Obtain physician order for vessel mapping or utilize a catheter removal protocol
- Refer to surgeons with the best outcomes and highest quality performance

MEDICAL CENTER

NAME \_\_\_\_\_ AGE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

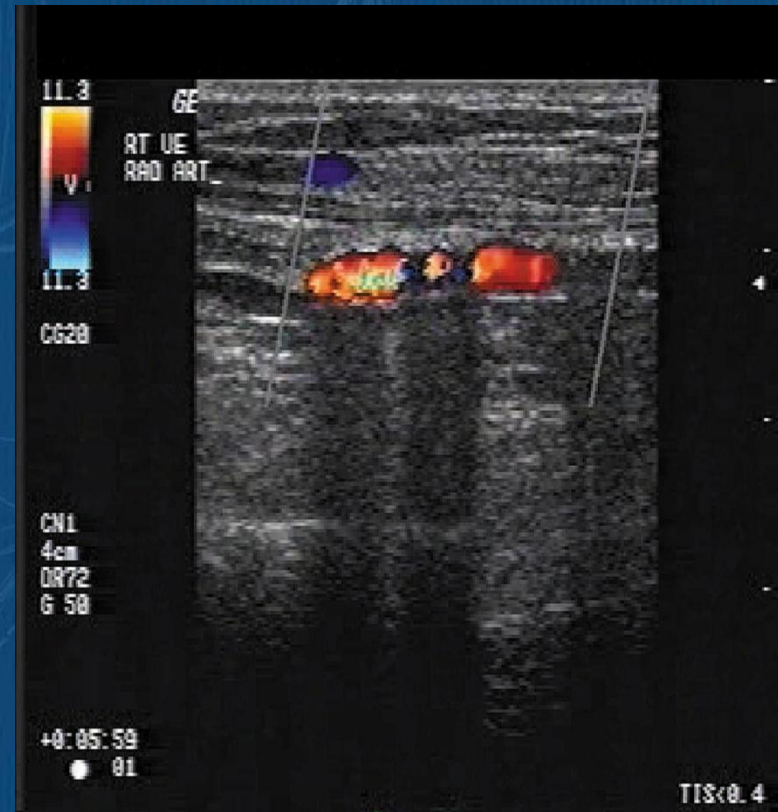
Rx

LABEL      SIGNATURE \_\_\_\_\_

REFILL 0 1 2 3 4 5 PRN NR

# Step 3: Vessel Mapping

- Complete within 2-3 weeks of admission
- Refer patient for an "AV Fistula Only" evaluation
- Give patient "Protect my Veins" bracelet



# Step 4: Access Surgery

- Ideally within 4-6 weeks of admission.
- Give patient stethoscope, exercise ball and balloons



# Step 5: Post Op Evaluation

- Rule of 6's - Is the access mature:
  - <0.6 cm deep
  - >0.6 cm wide
  - >600 ml/min



Note: An intervention should be scheduled if Rule of 6's not met at 4-6 weeks post surgery.

# Step 6: Cannulation

- Vessel must be mature
- Utilization of first stick team or an expert cannulator
- Rotate needle sites
- Document development and issues as they occur. Early intervention is critical.



# Step 7: Catheter Removal



# And Don't Forget...

## Keep that Fistula Working!

### Quick Access Check Performed Every Treatment:

- **Look**
  - From inflow back to the heart and for signs of maturation .
  - Elevate – raised area should flatten. If it doesn't flatten then could be signs of a stenosis.
- **Listen**
  - For continuous bruit. A pounding pulse at inflow or a whistling outflow = stenosis.
- **Feel**
  - For continuous thrill and for maturation. Compare both hands (color, temp and grip).

# Questions

