

Pre quiz

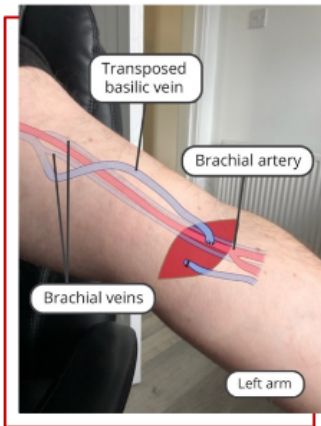
Completion provides

- a pass or fail
- Provides a baseline of knowledge

Module 1 - Vascular Access for Haemodialysis

Brachio-Basilic Fistula

Section 1: Vascular Access for Haemodialysis



The brachio-basilic fistula is normally explored if the brachio-basilic fistula is not possible or fails.

This involves joining the brachial artery to the basilic vein at the elbow.

The basilic vein is large vein that often provides a good vessel for a fistula. However the basilic vein often runs deeply on the inside (proximal side) of the arm.

Sometimes the basilic vein will be raised nearer to the surface (superficialisation) to allow needles to be inserted for haemodialysis. Sometimes without superficialisation the basilic vein is too deep to use for haemodialysis.



Resources

Learning Point

Section 1: Vascular Access for Haemodialysis



The Renal Association Guidelines provide guidelines on vascular access management for haemodialysis for the UK. These can be accessed by following this link:

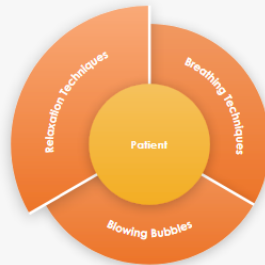
[View](#)

Please read these guidelines and then reflect on your practice by answering the following questions

Distraction Techniques

Relaxation Techniques

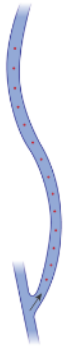
These are helpful for children, young people or adults who are particularly worried or anxious about having their AV fistula accessed. These should be started before the procedure begins to allow the patient to engage and begin to relax.



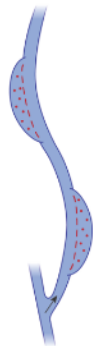
The three cannulation methods

Section 3: Cannulation of AV Access

To learn more about the three cannulation methods, please click on the images



Rope ladder



Area puncture



Buttonhole

Module 3 - Cannulation

Rope Ladder Cannulation

Non-needling hand stabilises the vessel



Importance of Vascular Access

Section 4: Complications associated with AV Access

Some of the complications associated with AV access for use for haemodialysis include:

Cannulation Problems

Stenosis

Thrombosis

Aneurysms

Infection

Life Threatening Bleed

Steal Syndrome

Module 4 - Complications

Management of LTB



Once help from the emergency services has been initiated, patients should apply direct pressure to the bleed.



Post Quiz

- Need 80% to pass
- Passing provides a certificate