

DSI Scottsdale Dialysis Fistula First Project



We Are On The Move

Directed By

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The Problem

In 2006 Scottsdale had an increase in hospitalization due to infections.

The administrators got together to find the root cause of the problem.

After further review of our infection control

We found one common denominator;

All were catheter patients



The Solution

- In order to reduce our infection rate we had to reduce our catheter rate .
- 1. Setup an Action Plan
- 2. Educated our patient again and again on the benefits of a permanent access
- 3. Find and connect with a access center and vascular surgeon
- 4. Monthly access review with all team members



The Plan

All New patients with catheter referred

SVAC

(Southwest Vascular Access Center)

For

Venogram and Evaluation

**By Vascular Surgeon for Access
placement within 30 days**



The Plan (continuation)

Medical Doctors and Access coordinator are responsible for reviewing all patients with catheter on a monthly basis for a plan and /or to discuss the result of each specific patient's permanent access challenges.

Medical Director will review all catheter at CQI.

Who is the Nephrologists ?

What is their PLAN ?

What was the RESULTS ?



Team Members

- Medical Director
 - Nephrologists
 - CQI members
 - Vascular Surgeons
- Cannulation Team = Experience Techs and Nurses who will evaluate and cannulate new AV fistula



The Tools

- Monthly Infection Control Report
- Monthly Catheter Access Reports
- Monthly Catheter Plan Report
- Monthly Meeting with Cannulation Team
- All plans are reviewed by primary nephrologists for results and comments before monthly CQI meeting.



Patient Education

Your Access-Your Lifeline

- **AV Fistula**=Best overall performance, less chance of infections, may last many years and increased blood flow
- **Graft**=Can be readily implanted, can be used earlier than a fistula, does not last as long as a fistula, increase potential for infection.
- **Catheter**=Not ideal as a permanent access, high infection rates, difficult to obtain sufficient blood flow to allow for adequate toxin removal, swimming and showering is not recommended.



Continued Patient Education

- **Catheter Patients**
- 33% higher of mortality (DEATH) rate.
- 33 % higher hospitalization rate
- 60 % higher risk of sepsis due to access
- Sepsis= Bacteria infection in the blood stream-It can be deadly.



The Results

