



# Newsletter

Southern California Renal Disease Council, Inc. • ESRD Network 18

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*According to the latest Dashboard (February 2005 data), ESRD Network 18 has an AVF rate of 41.7% which exceeds the initial AVF goal of 39.7%. Center of Medicare and Medical Services (CMS) established a new AVF goal for AVF – 66% by June 30, 2009. The Medical Review Board set new internal AVF rate goal – to achieve 45% prevalent AVF rate by June 30, 2006.*

## CHAMPIONS CORNER:

*Top facilities with the highest AVF rate in the Network 18 are:*

- FMC - FMC Irwindale (81% AVF)
- DaVita - DaVita Mission Dialysis Center of San Diego (64.7%)
- Gambro - Gambro - Tower (58.5%)
- Independent - Mountain View Dialysis (69.4%)

## SUCCESS STORIES: “WHAT WORKS”

“The staff at the Kidney Center of Thousand Oaks have been very excited to initiate our Fistula Cannulation and Buttonhole training. Following the Network training on Fistula Cannulation held in January, our group underwent mass training of all of our facility staff.

At Thousand Oaks we have assigned two of our best fistula cannulators on each day to start cannulations on ALL new fistulas and continue with the patient until they assess that the patient is cleared for anyone to cannulate. These technicians are given a title of ‘Fistula Managers’ in the facility, and will also serve as the monitors for all fistulas awaiting use, as well as a resource for the other staff in fistula management.

Several of the technicians have also identified patients and proceeded to begin the

Buttonhole technique of Cannulation. One technician already has four patients under the ‘tunneling’ phase, and has progressed to blunt needles on one! We decided to have each technician identify at least one patient they can cannulate with this technique, so all staff will become very familiar with developing the tunnel and with cannulating using a blunt tip needle. In asking for each technician to pick one patient, it turns out they are finding even more patients as good candidates.

Coincidentally, the Kaiser program of performing color ultrasound in the center began. This was an additional reinforcement to the staff, as they went in with those patients and visualized the fistulas while the tech explained what they were seeing, pointing out problem areas. Our thanks to Kaiser for this service!

A couple of other positives, aside from fistula preservation, is the fact that the risk of needlestick injury will decrease, and the cost of the blunt tip fistula needle is actually less than the safety needles! So delivering better care and increasing safety actually costs us less! How often does that happen?”

Sandra Wilson, RN, CNN

Clinical Coordinator/Education Director, KCI

At this time, 14 patients in the facility are utilizing buttonhole technique for the cannulation! Great Job!

We welcome your input and feedback – it helps all facilities in Network 18!