



Care of fistulas and grafts in dialysis patients: Information for care home staff

This leaflet is for care home staff. We hope you find it helpful. If any you have any concerns (however small), please feel free to contact us.

A **fistula** (arterio-venous fistula) or arterio-venous graft is a patient's life-line for dialysis and it must be looked after with special care. The fistula may be at the level of the wrist as shown in the picture below or it may be placed at the elbow.

A **graft** is an artificial vein inserted in the forearm or upper arm and is used in the same way as a fistula – see diagram below.

Day to day care of the fistula or graft

- The fistula or graft feels as though it is 'buzzing'. This is called a 'bruit' or 'thrill' and it shows that everything is working.
 - **Touch the area to check for the buzz every shift please.**
 - **If you feel that it is less powerful or is absent, call the dialysis unit / ward immediately.**
- Renal patients are prone to infections:
 - **If any area of the fistula or graft is infected, red, painful, or has scabbed oozing areas, ask a renal doctor to assess the patient.**
- During hot weather, the patient is more at risk from dehydration, especially if they are on a fluid restriction. Dehydration (for example because of diarrhoea and vomiting) or a drop in blood pressure can cause the fistula to stop working.
 - **Please monitor the fistula or graft strictly during this time. Call the dialysis team immediately if you think this is happening.**
- Do not take blood pressure or a blood samples or insert a cannula on the affected arm.
- Do not let the patient wear tight clothing or bracelets or wrist watches on the affected arm.
- On dialysis days, please make sure the patient wears loose clothing on their top half to give us easy access to the arm.
- If you notice anything unusual about the fistula or graft (redness / swelling / pain) please contact us on the numbers below.

Urgent care

Occasionally a fistula may bleed a little after removal of the plaster at home. If this happens apply pressure to stop the bleeding.

Although it is very rare, you need to know what to do if a fistula or graft bleeds heavily between dialysis sessions. This is a **medical emergency**.

- **Ask for help urgently from anyone who is around. The blood flow can be very fast, so do not delay in alerting others.**
- **Dial 999 and report “excessive bleeding from a dialysis fistula”.**
- **Apply firm pressure over the bleeding site. Use a milk bottle top or similar to localise pressure over the bleeding site. Always place the hollow side (inside) against the arm. See photo.**



A fistula or graft bleed is an arterial bleed so must be treated as an emergency.

If you have a problem or concern, please call:

- Your local unit on the numbers below or
- The Renal Vascular Access Sister on 0118 322 8526 or
- If the unit is closed call Victoria Ward on 0118 322 7476.

Benyon Unit	0118 322 8360
Bracknell Dialysis Unit	01344 662961
Enborne Dialysis Unit	01635 273640
Huntley & Palmer Unit	0118 322 8518
Windsor Dialysis Unit	01753 866008

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Please ask if you need this information in another language or format.

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