

RISKS ASSOCIATED WITH ACCESS CREATION: FISTULA

Before the Operation

After the Operation

Welcome!
A good access is vital for receiving good haemodialysis. Fistulas, Grafts and Perm Cath's are created or placed in theatre.



A high urea and or creatinine before the operation increases the chances of bleeding after the procedure.



A high potassium before the operation can cause serious damage to your heart and even death, potassium control is of utmost importance

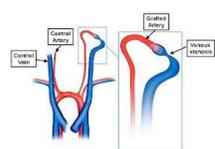


Do not let anybody take your blood pressure on the operated arm, the flow restriction can damage your fistula

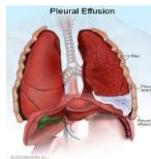


Remove the dressing after 48 hours and leave open. Remove sutures after 7 – 10 days. As soon as the wound has healed properly ask your renal nurse about the exercises you need to do in order to develop the fistula

Dialysis a day before the operation is advisable as a drop in blood pressure can cause irreparable damage to your new fistula



Fluid overload before the operation causes difficulty in breathing that might lead to serious complications or even cancellation of procedure



Report any bleeding and severe swelling to the attending nurse immediately



Only take pain medication as prescribed and check for any signs of infection: puss, redness, warm to the touch, fever



Wash you hand before you feel for a "bruit". This should be done hourly for the first 24 hours and then at least 3 times a day. Report absence of "bruit" immediately to doctor/surgeon

Elevate your arm on a pillow for 24 hours/ if any swelling at home, this will reduce the swelling



Advise the surgeon if you use any blood thinning products. Stop taking the medication before the operation if advised



You must wash with *Triclosan* antimicrobial soap daily for 2 days before the surgery, this will help to reduce risk of infection after the procedure

Patient Tutorial