



## ATTENTION SURGEONS!

- Do you create great arteriovenous fistulas only to have them infiltrated, clotted, or just plain “messed up” by the dialysis staff?
- Are you frustrated because the staff at the dialysis center telephones you with incomplete patient information?
- Do you ask yourself – “What were they thinking at the dialysis unit!?”
- Would you like to have better communication with the physicians and staff at the dialysis and nephrology office?

If you answered ‘**YES**’ to any of the above questions, here are some suggestions:

- Educate the dialysis staff by:
  - Providing a drawing of the blood flow of a newly created or revised arteriovenous fistula. (Heartland Kidney Network has a template!)
  - Be specific about follow-up visit instructions, exercise, etc.
- Offer to host an in-service for the dialysis unit on the topics such as post-op care for new arteriovenous fistulas, maturation, cannulation, etc.
- Work on your image: Be approachable and willing to teach the dialysis care staff.
- Request that the dialysis facility use a standardized telephone communication tool that provides the patient information you need. (You develop the tool.)
- Provide suggestions for the cannulation of tricky accesses.
- Learn the names of the key staff members at the dialysis center and nephrology offices. These people may just become your greatest fans!
- Get involved in the monthly dialysis Continuous Quality Improvement (CQI) meetings when at all possible! If you are unable to attend the meetings, talk with the Nephrologist about current vascular access problems. This cultivates future referrals to you!
- Get to know the local Nephrologist and the Unit Administrator of the dialysis facility.
- Write clear orders and other communications.
- Treat others the way you want to be treated – on the telephone and in person.

The above suggestions were from dialysis staff members during **Project: Cath-Out!** held July 27, 2006 in St. Louis, Missouri and other communications with the Network QI staff.