

Renal Unit



Information about

# Caring for your Early Cannulation Graft





## Why do I need a Graft?

Before you start dialysis, there needs to be a way to clean your blood. A fistula provides easy and reliable access to your bloodstream and is considered the best access option for most people in the long term. However, you may not be suitable for a fistula, or your dialysis may need to start before the fistula will be ready. Therefore, the graft provides immediate access to dialysis within 24 hours of creation.

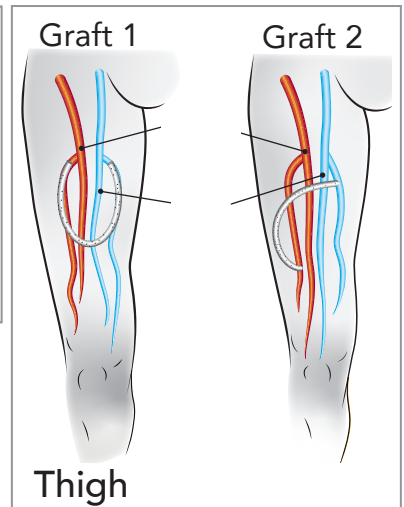
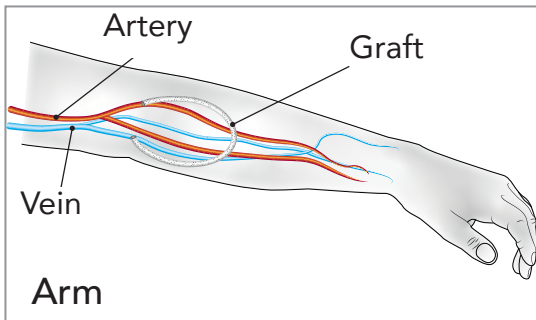
## What is a Graft?

A graft is a soft synthetic tube of artificial material that is connected at one end to the artery with the other end connecting to the vein. It can be placed in your arm or your leg. Your surgeon will discuss the best options for you.

The surgeon will insert the graft during a surgical procedure which can be done using regional local anaesthesia (block) although some people may need a general anaesthetic.

Once the graft is in position, it will be visible just under the skin. If you also have had a fistula created we will use the graft until the fistula is ready. The fistula cannot be used for 6-8 weeks.

## Arteriovenous Graft



## Care of your Graft

You must take care of your graft and it is important you understand how to do this. Your dialysis nurse will give you advice.

Always	Never
<ul style="list-style-type: none"><li>• Make sure you wash and clean your skin before each dialysis session. Your dialysis nurse will then cleanse the skin (disinfection) with sterile solution before inserting the needles.</li><li>• Make sure your dialysis nurse is varying the needle sites each session. It is helpful if you remember the last needle puncture site so that you work along the full length of the graft.</li><li>• Make sure your nurse checks your graft with a stethoscope before putting the needles in.</li><li>• Apply direct light pressure to the needle sites for 10-15 minutes after removing each needle at the end of the session.</li><li>• Check your graft every day. It is important that you listen to the whole length of your graft every day to detect any changes in the sound. If it becomes red or tender, contact the hospital.</li><li>• Protect your graft from bangs and bumps.</li><li>• Avoid lying on your graft for a few weeks after it has been put in.</li></ul>	<ul style="list-style-type: none"><li>• Allow anyone to take a blood pressure, bloods or insert and intravenous cannula into the graft</li><li>• The graft is for dialysis only</li><li>• Wear tight or restrictive clothing around your graft or a wrist watch on your graft arm.</li><li>• Carry heavy shopping or bags with your graft arm.</li></ul>

We will offer you 3 monthly surveillance of your graft to make sure that it is working well. This will either be an ultrasound or a special x-ray. Both are outpatient procedures.

# Potential Complications

You may experience some problems:

- Redness or swelling on the graft limb, or at previous needle sites can be a sign of infection - contact your dialysis unit or the phone numbers at the end of this booklet immediately.
- A swelling or spreading bruise may indicate bleeding under the skin - contact the phone numbers at the end of this booklet for advice.
- Clotting of the graft. It is not always possible to feel the buzz in a graft but you and your nurses should listen to it on a daily basis. It is important the nurse inserting the needles listens to the graft with a stethoscope before inserting the needles to make sure the graft is not clotted. A clotted graft is declotted through a small operation under local anaesthetic or nerve block and you may need an overnight stay in hospital.
- If you listen to it at home and cannot hear anything, please contact your Renal Dialysis Unit or the phone numbers listed at the end of this leaflet. Do not eat or drink anything until you have spoken to the vascular access nurses or the surgeon on call as they may ask you to attend hospital that day for a blood check and declotting procedure.
- A change in the sound or a whistle - this can suggest that there is a narrowing in the graft that needs to be treated. Please contact your dialysis unit or the phone numbers at the end of this booklet.
- Coldness, numbness or pain in the hand, arm or leg where the graft is may be a sign of poor blood flow. Please contact the phone numbers at the end of this booklet for further advice.

## Bleeding

Bleeding is uncommon, however if it occurs, **immediately apply direct pressure** on the bleeding areas using your thumb or finger - **hold for a minimum of 15 minutes**. Applying pressure anywhere else may only increase the bleeding from the site.

**After any episode of bleeding you must contact your dialysis unit for further advice.** If the bleeding stops within 15 minutes it is not likely that you will need any further action.

**Do not** ignore any sudden severe bleeding that does not stop as it can be life threatening. If this occurs, keep pressure on the graft as directed above and call **☎ 999**. Tell them that you are a **dialysis patient with a bleeding graft**.

## Further information

Haemodialysis unit phone number: \_\_\_\_\_

Vascular Access Nurses (Monday-Friday: 06.30 - 16.30)

Leigh Bainbridge                      ☎ 0141 452 2981

Louise McLeod                        ☎ 0141 452 3608

Kaye Travers                         ☎ 0141 452 3695

Ward 4C (Out of hours)              ☎ 0141 452 3302 or 3304

# Notes

