



Identifying dialysis access dysfunction

ALL CLEAR No action required	CAUTION Consider a referral to Azura Vascular Care	ACCESS EMERGENCY Call Azura Vascular Care immediately
<ul style="list-style-type: none"> • Normal bruit and thrill • Cannulation without difficulty • Able to achieve prescribed blood flow rates • Venous and arterial pressures within normal limits • Access flow rates: Grafts > 600 mL/min Fistulas > 400 mL/min¹ Kt/V > 1.2 and/or URR > 70% 	<ul style="list-style-type: none"> • Change in bruit and/or thrill • Pulsatile • Poorly functioning catheter • Difficult cannulation • Pulling clots • Infiltration • Recirculation • Prolonged bleeding (> 15 min post HD) • Steal syndrome • Arm or hand swelling • Increased arterial and venous dialysis machine pressures • Access flow rates: Grafts < 600 mL/min Fistulas < 400 mL/min >2000 mL/min or > 25% change from baseline for grafts and fistulas¹ Kt/V < 1.2 and/or URR < 70% • Low blood flow rates during dialysis • Aneurysm or pseudoaneurysm 	<ul style="list-style-type: none"> • Absent bruit • Absent thrill • Clotted access • Three unsuccessful cannulations in 1 HD tx • Broken or clotted catheter • Thin skinned, shiny, hyperpulsatile aneurysm <hr/> <p>For access emergencies or referrals, call:</p> <h2>866.996.9729</h2> <hr/>

1. These measures have been obtained from access flow testing.



For more information, visit
AzuraVascularCare.com/DialysisAccess