

# A nurse led clinical pathway for dialysis vascular access dramatically improves outcomes

**PROBLEM:** The use of tunneled central venous catheters for dialysis access is common and is associated with excess mortality and morbidity primarily due to sepsis.

**AIM:** To reduce the reliance on central venous catheters and promote native arteriovenous fistulae as the dialysis access of choice.

## INTERVENTION:

- Appointment of a team of vascular surgeons to work across all hospital sites
- Establishment of a multidisciplinary vascular access team (Surgeons, nephrologists, nurses)
- Appointment of a vascular access nurse specialist
- Establishment of a nurse led vascular access clinical pathway

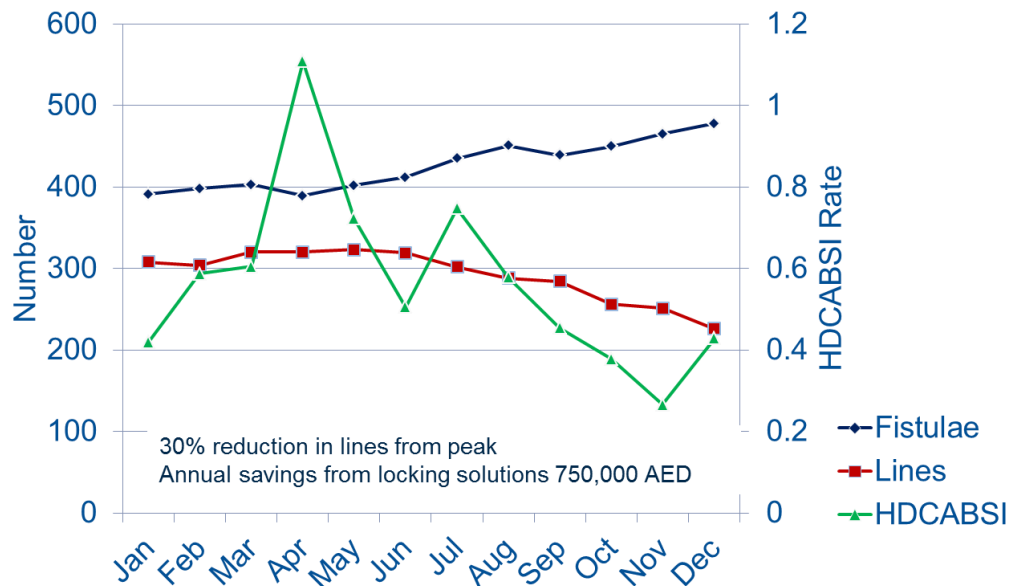
## TEAM:

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- Marie Richards
- Dr Mohamed Baguneid
- Dr Mousa Al Shehhi
- Dr Zubaida Al Ismaili

## PROJECT SPONSOR:

- Dr Nick Richards, CEO SEHA Dialysis Services

## RESULTS:



## CONCLUSIONS:

- The introduction of the clinical pathway in June led to a dramatic fall in the number of dialysis catheters and an increase in the number of fistulae from 50 to 70% of the total
- There was a fall in the number of catheter related bacteraemia (HDCBABI)
- The HDCABSI rate fell by 62%

## NEXT STEPS:

- The programme continues with the aim of achieving a fistula in 85% of patients
- To have a fistula as the first line of vascular access