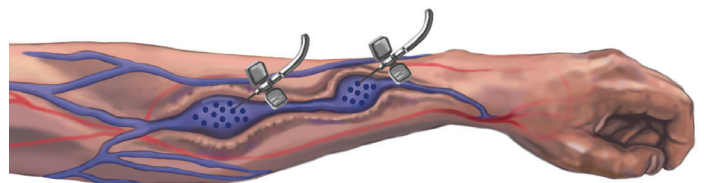
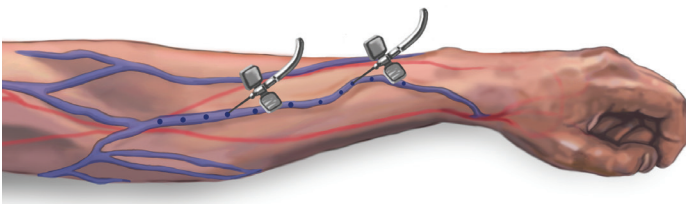


DIALYSIS CANNULATION

BEST PRACTICES FOR AVF/AVG CANNULATION



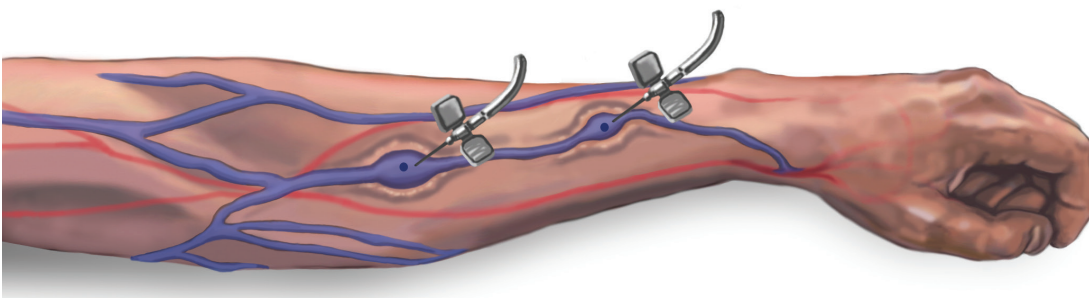
✓ **GO:** Rope Ladder Cannulation Technique is the recommended best practice for AVF or AVG

- Help prevent serious complications.
- Preserves access longevity.

✗ **STOP:** Repeatedly Cannulating the Fistula in the same place causes direct harm to your patients AVF or AVG

- Accelerates access failure and **Risks Fatal Vascular Access Hemorrhage.**
- Weakens the vessel walls (AVF) or creates large holes in graft material (AVG). Increases risk of aneurysm and pseudoaneurysm formation.
- Leads to scar tissue formation, increasing resistance to needle insertion.

BUTTONHOLE DIALYSIS CANNULATION



✓ **GO:** Used only for AVFs

- It involves repeatedly inserting the needle into the same spot at the same angle, which creates a tunnel of scar tissue (called a buttonhole).
- This tunnel lets a blunt buttonhole needle go into the fistula along the same path each time.
- It's best to have two spots for the artery and two for the vein to allow for rotation.
- The buttonhole technique should only be used if the doctor has included it in the patient's care plan.