



Understanding hemodialysis access options

If you're preparing for hemodialysis (HD), you will need an access site on your body for your blood to reach the dialysis machine for treatment. Your care team will help you choose the best access to make dialysis as effective as possible.

Access Type	Benefits	Things to consider
Arteriovenous fistula (AVF): A fistula is considered the best choice for HD access for most people. It's also the most natural because a surgeon creates it by connecting an artery and a vein in your arm, without need for any other materials.	 Lowest chance of infection Lasts a long time Allows for fast blood flow and cleaning 	 It takes six weeks to several months for a fistula to mature after surgery. Some fistulas will never fully mature. Not everyone is a candidate for a fistula.
Arteriovenous graft (AVG): To create a graft, a surgeon connects an artery and a vein using a piece of soft tubing.	 Easier placement than a fistula Faster healing time than a fistula (can be used days to weeks after placement) Allows for faster blood flow than catheters 	 Increased risk of clotting compared to a fistula Increased risk of infection compared to a fistula Does not last as long as a fistula
Central venous catheter (CVC): A catheter is a tube placed in a large central vein in your neck, chest, or groin.	 Easily inserted Can be used immediately following placement 	 Highest risk of infection and clotting Narrowing veins with long-term use Slower blood flow and less effective blood cleaning Getting wet not recommended due to infection risk





Preparing for access placement

When it is time to have your access placed, your nephrologist will refer you to a surgeon who specializes in your type of access. You will meet with your surgeon to schedule your access placement procedure.



Planning early

Since some access options take longer to heal, it's important to start the planning process early. If you think HD might be the best dialysis choice for you, then take steps for access placement so you have the proper healing time. Planning ahead also allows you to start your treatments outside of the hospital.

• Vein mapping

Vein mapping is a painless, non-invasive test that takes images of your veins and arteries. Your surgeon will most likely use vein mapping to determine the best location for your access.

+ Access placement

Your surgeon will provide instructions to help you prepare for the placement procedure. The procedure typically takes 30 minutes to one hour, and either local or general anesthesia will be used. You will spend most of the day recovering at the surgery center before going home. Once home, you will follow your surgeon's directions for caring for your access and taking any prescribed pain medication.

Taking care of your access

Always practice good hand hygiene when caring for your access. You should avoid having your blood pressure checked, having labs drawn, or having IVs placed in your access arm before and after surgery. These actions could cause complications like clotting or infection.

If you have a fistula or graft:

- Make sure your access site stays clean and dry.
- Avoid heavy lifting with that arm.
- Wear loose clothing and avoid jewelry on that arm.

If you have a catheter:

- Make sure your access site stays clean and dry.
- Avoid anything that submerges the site in water like baths or swimming.
- Do not open the dressing yourself.

Reach out right away if you have questions or concerns about your access. This can help you avoid any complications that could affect your dialysis treatment.



O+ We're here to help

We are here to support you along the way. Talk to your care team about the best access options for you.