

Staff Can You See It? Patients - Won't You Let Them?

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Successful cannulation of a dialysis patient's vascular access takes good assessment and needle insertion skills. Once the needles have been placed, the vascular access requires monitoring for the entire dialysis treatment. How does staff do that? Staff monitor the arterial and venous pressures on the dialysis machine and instruct patients to let staff know if they experience tightness or pain at their needle sites.

The safest thing that can be done for monitoring vascular access is to **look** at the access every time staff document vital signs as well as when there is a machine alarm. In order to do this, ***the access needs to be visible at all times.***

Patients frequently complain of being cold and typically bring in a blanket to keep warm. We are not advocating that the blankets be eliminated; but there are two factors that need to be addressed. The first is patient **comfort** – providing a pillow, adjusting their dialysis chair, making sure the TV remote is within reach, and covering the patient with a blanket. A couple of suggestions for keeping patients warm while keeping their access visible include:

- using a secondary, smaller blanket to cover the exposed part of the arm or leg above or below the access,
- having the patient wear mittens (not gloves), or
- providing a glove filled with warm water for the patient to hold.

Patients should not be offered heating pads – many patients have decreased sensation and will not be able to tell if the pad is too hot for their skin. Some dialysis facilities are installing adjustable radiant heat panels above patient chairs.

The second, and overriding factor is patient **safety**. To assure safe treatment, staff may not be able to satisfy all patient comfort requests. There have been numerous, documented reports of patients' venous needles falling out - down into the chair or underneath it, while the patient is asleep, covered with a blanket and staff not responding to an alarm within 15 seconds. At pump speeds greater than 350 ml/minutes, the patient can lose a unit of blood in less than one minute.

Sentinel events do not usually occur from a single problem, but rather a cascade of errors. Setting tight alarm limits and responding quickly to machine alarms prevent adverse consequences. Proper taping and chevron placement play a major role in keeping needles secure during the patient's dialysis treatment. There are patients, however, who have allergies to tape or who sweat profusely making it impossible for tape to stick. Patients and staff can work together to find alternative ways to secure the needles.

Keeping patients safe is the primary goal and responsibility of the dialysis nurse and patient care staff. Education, of both the patients and the staff, plays a major role in how safe patients are during their dialysis treatment. All accesses need to be visible to provide safe patient care. With a little creativity, we can provide for patient comfort as well.

For more information contact Lynda at Northwest Renal Network – 206.923.0714 x 111.