

Save the Vein

Veins must be healthy to receive dialysis treatments. The following actions will help keep veins healthy:

- Select the arm to be used for a VA.
- On the Save the Vein wallet card, circle the arm to be used for access placement.
- Carry the Save the Vein wallet card to help alert others that the arm selected for placement of the VA (fistula/graft) should **not** be used for IVs and blood draws.
- Wear the blue Save the Vein wristband on the arm to be used for access as a reminder to health providers to do IVs and blood draws in the other arm/hand to protect the veins.



The following terms are used in describing VA:

Non-Dominant Arm: Arm/hand not used to write. This is the arm used for the VA typically.

Dominant Arm: Arm/hand used to write. If a person is right handed, then the right arm is the dominant arm.

Kidney Education



Vascular Access (VA)



UNC
KIDNEY CENTER

HEY DOC, HOW ARE MY KIDNEYS?™
Kidney Education Outreach Program



What is Vascular Access (VA)?

Vascular access (VA) is the opening or connection between 2 parts of the body that are not usually connected. This connection allows blood to be removed, cleaned and returned to the body (dialyzed).

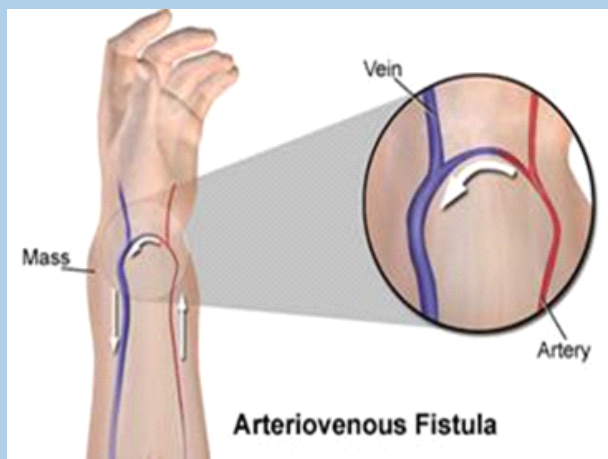
There are 3 kinds of vascular access (VA):

- Fistula
- Graft
- Catheter

1. Fistula (arteriovenous/AV fistula) is the best type of access.

Two things are necessary for a fistula:

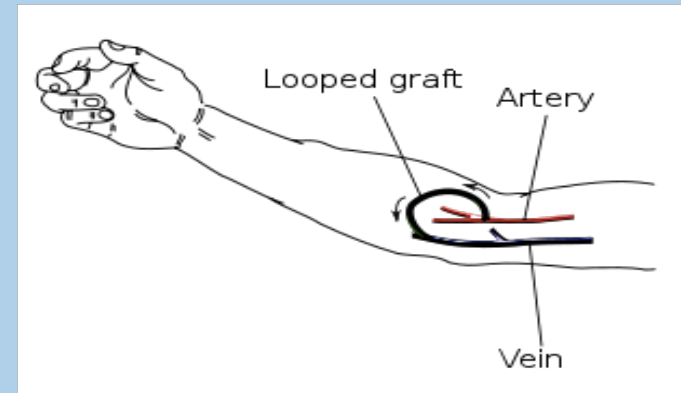
1. Veins must be large enough, and
2. There must be enough time for the fistula to develop before it is used.



What is Vascular Access (VA)?

2. Graft (arteriovenous)

If veins are too small to develop into a fistula, a VA can be created by connecting an artery to a vein using a tube or graft under the arm's skin.



3. Catheter

If CKD progresses quickly, there may not be enough time to establish a permanent VA. The temporary solution is to insert a tube into a vein in the neck or the groin area. This can work for several weeks.

