

# EARLY CANNULATION GUIDELINES FOR THE HEMODIALYSIS UNIT

## (For the first three sessions within two weeks of implantation)

### GENERAL INFORMATION

Attention: \_\_\_\_\_

Patient name: \_\_\_\_\_

### EARLY CANNULATION RECOMMENDATIONS

- Adhere to aseptic technique
  - Sterile gloves
  - Face mask that covers mouth and nose
  - Gown
- Prevent graft movement during cannulation
- Perform a swift, clean puncture with a 17 gauge needle
- Maintain a blood flow rate of 200–250 ml / min
- Administer a low dose of heparin therapy
- **Hold pressure for 10–15 minutes to achieve hemostasis post needle removal**

Physician name: \_\_\_\_\_

Date: \_\_\_\_\_

Patient date of birth:

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Vascular graft implant date:

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Date to dialyze:

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### EARLY CANNULATION DIRECTIVES

1. Mark / draw location of graft  
(See back side) (Forearm / upper arm; loop / straight configuration)
2. Mark / draw direction of arterial and venous flow  
(See back side)
3. Mark / draw location of cannulation sites  
(See back side) (Arterial and venous needles)
4. Needle gauge:    
(17 gauge recommended during first week post implantation)
5. Flow rate:     
(200 – 250 ml / min for entire session during first week post implantation)
6. Heparin dose: \_\_\_\_\_
7. Comments: \_\_\_\_\_  
\_\_\_\_\_

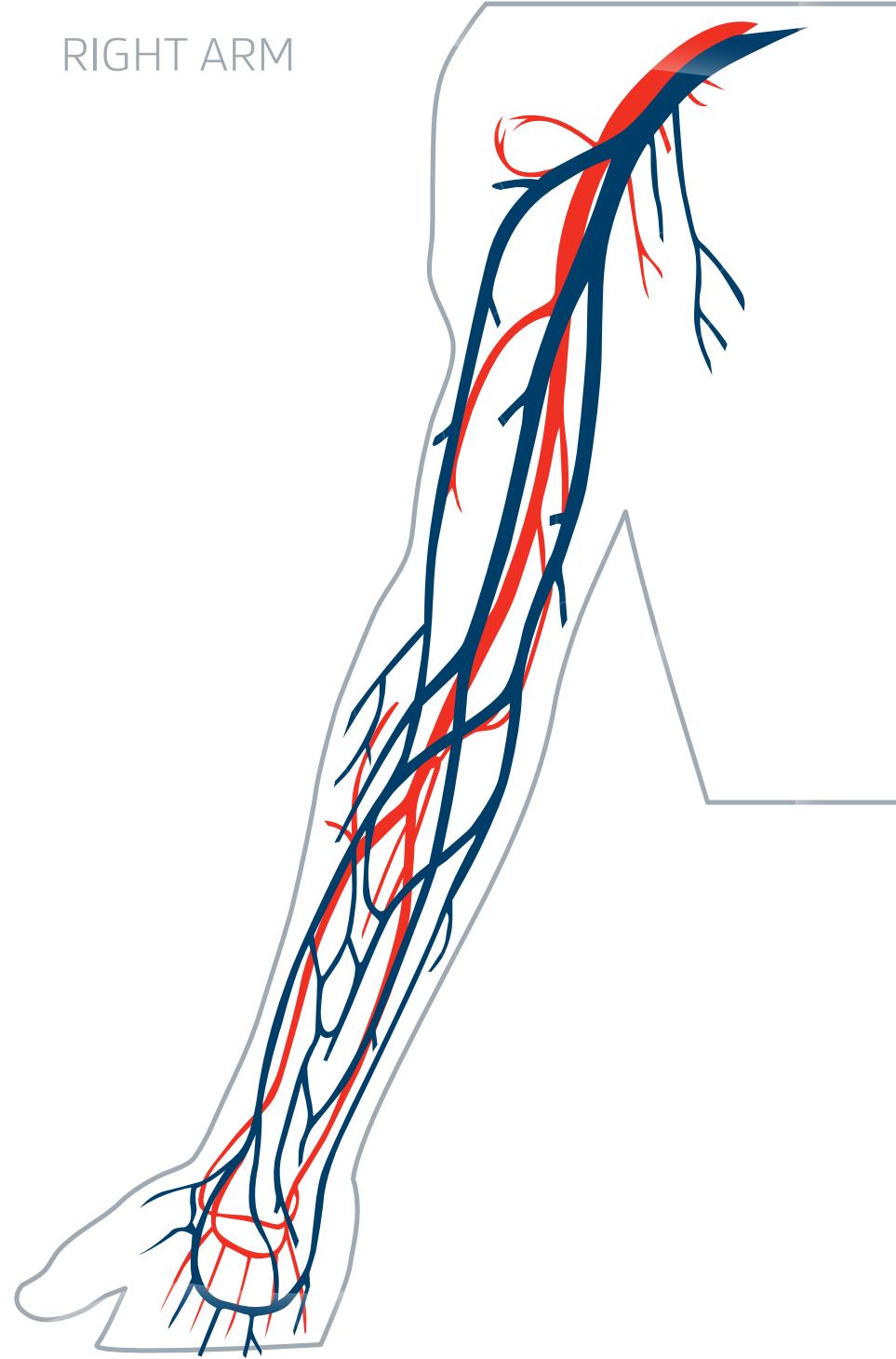
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RIGHT ARM



LEFT ARM

