

💡 Key Policy Change: Antiseptic for Cannulation – ICHD Only

Old Standard:

- **Chlorhexidine** as the *primary antiseptic* for all patients.

New Standard:

- **Primary Antiseptic: 70% Isopropyl Alcohol** a circular 60-second scrub, cannulate immediately without drying.
- **For patients with alcohol allergies:** Use **Betadine Swabsticks** (scrub with friction, allow to dry for 3–5 minutes). A separate swabstick per site.
- **If allergic to both Alcohol and Betadine:** Use **Chlorhexidine** (gentle back and forth strokes for 30 seconds, allow to dry for 30 seconds). Repeat with fresh swabstick for second site.

👉 This update ensures proper site disinfection while accommodating patient sensitivities to Chlorhexidine.

✓ Site Preparation & Cannulation Steps

1. Patient Hygiene:

- Ask if the patient has washed their access. If not, direct them to do so at the handwashing sink.
- If unable, clean the access using the appropriate **Sani-Hands wipe**.

2. Physical Assessment:

- Assess the full length of access.
- Assess access appearance and check for **bruit and thrill**.
- Select cannulation using the rope ladder method.

3. Skin Antisepsis:

- Use **two alcohol pads** per site, scrubbing one site at a time in circular motion for a total of **60 seconds**.
- **Cannulate while the alcohol is still wet.**
- **Repeat for the second site.**

Patients with alcohol allergy: Use **Betadine swabsticks** with friction. Allow **3–5 minutes drying time**.

If allergic to alcohol and Betadine: Use **Chlorhexidine** and follow the formulary exception process.

4. Needle Insertion Guidelines:

- Tourniquet use: **Fistulas only** (not grafts).
- **Stabilize vessel**, insert at 20–35° for shallow fistulas; 45° or longer needle for deep fistulas/grafts.
- **Bevel up**.
- Venous needle: **Antegrade (in blood flow direction)**.
- Arterial needle: **Antegrade**, 1" from venous needle, 1.5–2" from anastomosis.

5. Cannulation Best Practices:

- **Thread carefully.** If pulsation stops, stop, realign, then proceed.
- **Monitor for infiltration** during flushing.
- If infiltration occurs:

- Classify (minor/major/severe), remove needle, apply pressure.
- Apply **ice packs in 20-min intervals** (not directly on skin) for 24 hours.
- **Notify charge nurse, document, and notify MD** if treatment is interrupted.

6. Additional Safety Protocols:

- **Do not flip needles.**
- Only use one clamp at a time on an AVF. Do NOT use clamps on AV Grafts.
- Adhere to **two-stick rule**—ask for help if needed.

Staff Acknowledgment

I have reviewed the updated **Site Preparation for Cannulation** protocol, including the revised antiseptic policy, and understand the required changes in practice.

Printed Name: _____ Date: _____
Signature: _____