

Going Home after Fistula and Graft Creation

This leaflet will give information on how to look after your new Arterio-Venous Fistula (AVF) or Arterio-Venous Graft (AVG) after its creation. This will explain some of the very important information of which you should be aware and contact information in case you need help and advice.

If you have any further questions or concerns, please speak to the staff member in charge of your care.

When can I leave hospital?

For fistula (AVF) creation under local anaesthetic you can go home the same day of the procedure after two to four hours or when you are safe to go home.

For graft creation or complex surgery under general anaesthetic and nerve block, you should expect to stay one to two nights in hospital or until it is safe to go home.

Do not drive a car post operatively until your access review in clinic. Ask someone to collect you from the hospital or we can provide transport for you to go home.

How do I take care of my wound?

- You will go home with a waterproof wound dressing. Keep the dressing on for three days after surgery. After three days, you can remove the dressing, wash the area with soap and water and gently pat the area dry with clean towel.
- You can shower as normal but not bathe for a week; this is to avoid water getting into the wound which could cause infection.
- Do not apply cream or lotion to the wound site.
- Dissolvable sutures will dissolve on their own in about ten days. If you see a scab on top of the wound leave it until it falls off by itself.
- Staples and stitches can be taken out 10-14 days after surgery. The access nurse will organise post-operative care, follow up and removal of stitches and staples.

Will I be in pain and discomfort?

- Pain and discomfort on the wound site is common. You can take simple pain relief as prescribed.
- Your arm may be cool and numb, this will reduce as your blood circulation gets used to the new fistula and graft.
- You may notice some swelling after surgery. This is normal and will go in a few weeks' time. You should keep your arm elevated above your chest level.

How do I care for my fistula or graft?

Your fistula or graft will be your access for haemodialysis. It is important for you to know how to look after this to keep it working.

- Try to move your arm as much as it is comfortable for you to do so.
- No blood testing and intravenous needles on the fistula arm.
- Do not use the fistula arm for blood pressure measurement.
- Do not wear tight fitting clothing and jewellery around the access arm.
- Do not carry heavy bags or lift anything that weighs more than 5kgs (10lbs) for the first three weeks.
- Do not sleep on your fistula/ graft arm and do not bend the arm for a long time.
- Do not do any activities such as gardening and playing contact sports until your doctor and access nurses confirm that you can.

What should I do if I have a problem?

If you experience any of the following, contact the Renal Vascular Access nurses for advice as soon as possible.

- Increasing pain and redness around wound area
- Fever (temperature higher than 37.5°C)
- Increasing swelling on the fistula arm
- Oozing fluid from the wound e.g. clear fluid or other discharges
- Loss of sensation on the fistula hand e.g. pins and needle
- Lump around wound area
- Increasing numbness and coldness on the new fistula arm and hand.

If you cannot get through to the access nurses please go to your local Accident and Emergency department (A&E).

Note: In case of heavy bleeding from the wound, apply manual pressure using a clean cloth, call 999 and go to the nearest A&E.

Do I have to restart blood thinning medication?

All blood thinning medication should be resumed as per doctors' advice after surgery. Aspirin and Clopidogrel as a single dose should not be interrupted unless it is indicated. Warfarin is usually restarted before your discharge from the hospital. The anticoagulation clinic will continue to monitor your blood and your Warfarin dose.

How do I know that my new fistula or graft is working?

For the fistula: Check your fistula for "thrill". A thrill can be checked by placing your fingers on top of your fistula. If it feels like vibration or pulse this means your fistula is working. The Vascular Access nurse will teach you how to do this.

For the graft: Check your graft for “bruit”. Bruit is the sound of the blood flowing inside your graft. This can be checked by placing a stethoscope on top of your graft and if you can hear a swishing sound, this means your graft is working. The Vascular Access nurse will teach how to do this.

Will I have a follow-up appointment?

Follow up clinic visits depend on individual needs. Normally you will be seen in the nurse access clinic two weeks after the fistula or graft creation.

Contact us

If you have any questions or concerns about your fistula or graft please contact the Renal Vascular Access nurses:

Annabelle Magdael and Anna Plesniak on 020 8725 0828 (Monday to Friday, 8am to 5pm). Out of hours, please contact Champneys ward on 020 8725 1080.

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough Wing (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk



Reference: REN_FGC_01 **Published:** July 2019 **Review date:** July 2021