



Kidney Solutions Double Lumen Hemodialysis Vascular Catheter Accessing Procedure Assessment Form

Employee Name: _____

Assessor Name: _____

Date of Assessment: _____

This form is designed to assess the competency of Registered Nurses (RNs) and Enrolled Endorsed Nurses (EENs) in performing double lumen haemodialysis vascular catheter accessing procedure, as per Kidney Solutions (KS) policy HHD03-05-32.

Instructions: Observe the RN/EEN performing the procedure and mark "Satisfactory" or "Needs Improvement" for each step. Provide comments for any "Needs Improvement" ratings.

Section A: General Requirements and Preparation

Step	Criteria	Satisfactory	Needs Improvement	Comments / Observations
1	Confirmed accredited RN or EEN			
2	Adhered to aseptic technique throughout the procedure			
3	Applied standard precautions			
4	Informed patient of procedure			
5	Positioned patient for easiest access to catheter limbs			
6	Exposed catheter ends and placed blue protective sheet under the vascular catheter limbs			
7	Cleaned work surface with "Isowipe"			
8	Performed social hand-wash			
9	Prepared all necessary equipment:			

	<ul style="list-style-type: none"> ○ Basic dressing pack ○ gauze squares ○ 10ml syringes x 2 ○ 3ml syringes x 2 ○ drawing up needle x 1 ○ Normal Saline ampoules 10ml x 2 ○ Heparin 5000u/5ml x 1 ampoule ○ blue protective sheet ○ sterile gloves ○ disposable plastic apron ○ goggles or full-face shield ○ Cleansing solution- Chlorhexidine 0.5% with alcohol 70% ○ Anti bactericidal wipe (Isowipe) ○ Adhesive tape 			
10	Opened two ampoules of normal saline and one ampoule of Heparin, and placed beside the sterile field			
11	Opened sterile gloves and put on personal protective equipment (disposable plastic apron and protective eye wear)			
12	Turned off blood pump, clamped the arterial, venous and normal saline infusion lines			
13	Placed the blood lines in an accessible position			
14	Performed aseptic hand wash			
15	Donned sterile gloves			
16	Used sterile gauze to handle all aspects of the catheter and lines			
17	Placed sterile dressing towel under the catheter limbs			
18	Cleaned the catheter limbs with Chlorhexidine 0.5% with alcohol 70% using sterile gauze, paying attention to the connection between the limbs and luer-lock cannula cap, and allowed to dry (<i>DO NOT wipe dry</i>)			
19	Drew up 10ml Normal Saline in one 10ml syringe and set aside			
20	Drew up the required loading dose of Heparin (<i>excluding patients on Low Molecular Weight Heparin</i>) into another 10ml syringe and then filled with Normal Saline to 10ml mark			

Section B: Accessing the Arterial Lumen

Step	Criteria	Satisfactory	Needs Improvement	Comments / Observations
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1	Checked that the clamps on both catheter limbs are closed			
2	Held red arterial limb with a piece of sterile gauze			
3	Removed and discarded the luer-lock cannula cap or the arterial limb with additional sterile gauze			
4	Connected to a 3ml empty syringe			
5	Used a piece of sterile gauze to open the clamp on the arterial limb			
6	Withdrew 2mls of blood (<i>containing heparin lock or Duralock</i>)			
7	Re-clamped the arterial limb			
8	Disconnected the 3ml syringe and discarded onto the side of the sterile field			
9	Connected the first 10ml syringe (<i>Normal Saline only</i>)			
10	Opened the clamp, aspirated and then flushed the lumen repeatedly to ascertain patency			
11	Clamped the lumen and left the 10ml syringe attached to the arterial lumen			

Section C: Accessing the Venous Lumen

Step	Criteria	Satisfactory	Needs Improvement	Comments / Observations
1	Repeated accessing procedure (<i>steps 1-6 from Section B</i>) for the venous lumen			
2	Connected the second 10ml syringe with heparin and Normal Saline			
3	Opened the clamp, aspirated and then flushed the lumen repeatedly to ascertain patency or resistance			
4	Clamped the lumen and left the 10ml syringe attached to the venous lumen			

Section D: Connecting the Vascular Catheter to the Dialysis Blood Lines and the Machine

Step	Criteria	Satisfactory	Needs Improvement	Comments / Observations
1	Used sterile gauze to separate the arterial and the venous blood lines			
2	Connected the arterial line to the arterial lumen of the vascular catheter limb			

3	Disconnected the recirculate connector and connected the venous blood line to the venous lumen of the vascular catheter limb			
4	Unclamped the arterial and venous limbs of the vascular catheters and the arterial and the venous blood lines			
5	Started blood pump at 180 ml/minute			
6	Established the patient's individual target blood flow rate, ensuring acceptable venous and arterial pressure			
7	Secured the dialysis blood lines to the patient with adhesive tape			
8	Commenced dialysis as prescribed			
9	Disposed of the equipment used appropriately as per Infection Control and Occupational Health and Safety guidelines			
10	Removed gloves and washed hands			
11	Documented the heparin loading-dose, arterial and venous pressure, and blood flow rate in the dialysis flow chart			

Section E: Troubleshooting and Risk Management

Step	Criteria	Satisfactory	Needs Improvement	Comments / Observations
1	Demonstrated understanding of actions if unable to aspirate heparin lock (<i>DO NOT FLUSH LUMEN, notify KS Clinical Service Director</i>)			
2	Demonstrated understanding of actions if problems persist (<i>e.g., blood flow rate < 180ml/min; venous pressure greater than blood flow rate, return blood, disconnect patient and notify KS Clinical Service Director</i>)			
3	Took measures to prevent accidental dislodgement of catheter (<i>blood lines always secured to the patient properly</i>)			
4	Demonstrated understanding of actions if infection is suspected (<i>presence of two of the following: fever, inflamed or red exit site, presence of discharge on exit site, and pain over the exit site – notify Renal Consultant/Nephrologist & KS Clinical Service Director and document on KS HHD Flowchart App</i>)			

5	Demonstrated knowledge of troubleshooting poor blood flow: lowering patient's head, turning patient to opposite side of catheter, applying external pressure to exit site, flushing lines with normal saline (<i>re-accessing catheter following aseptic technique</i>), reversing blood lines if better patency in venous lumen			
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Overall Assessment: **COMPETENT** / **NOT COMPETENT** (Please circle)

Assessor's Signature: _____

Date: _____

Employee's Signature: _____

Date: _____

Feedback/Recommendations:
