

## Contact details

If you have any questions regarding your access, the **Dialysis Access Co-ordinator** is available Monday to Friday, 8am – 4pm and can be contacted on **01438 284624**.

A message can be left on the answer phone.

## Other Useful Numbers

Ward 6B, Nephrology (Renal) Ward, Lister Hospital	01438 285063
Renal Liaison Department	01438 285643
Lister Haemodialysis Unit	01438 284152
St Albans Haemodialysis Unit	01727 897588
Luton & Dunstable Haemodialysis Unit:	01582 497538
Bedford Renal Unit	01438 286750
Harlow Renal Unit	01279 278205

## Further information

[www.nhs.uk](http://www.nhs.uk)

[www.renal.org](http://www.renal.org)

[www.kidney.org.uk](http://www.kidney.org.uk)

[www.kidneypatientguide.org.uk/site/intro.php](http://www.kidneypatientguide.org.uk/site/intro.php)

[www.enherts-tr.nhs.uk](http://www.enherts-tr.nhs.uk)

You can request this information in a different format or another language.

Date of publication: November 2018

Author: J Cloran

Version: 1

Review Date: November 2021

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# Patient Information

## Having a Fistulogram

### Renal Department



## Introduction

This leaflet is intended to provide you with information about having a fistulogram .

## What is a fistulogram?

A fistulogram is a special X-ray procedure. It uses contrast (dye) to look at the blood flow in your fistula or graft (dialysis access).

A small needle, cannula or access sheath is placed in your fistula and contrast is injected - the contrast makes the fistula more visible (like a road map) on the X-ray. After the contrast has been injected, X-rays are taken using an image intensifier (this makes the images on the X-ray clearer to see). The procedure takes about 10-15 minutes. At the end of the procedure, needles are removed and light pressure applied to the fistula to stop bleeding. The X-ray images are then examined for diagnosis.

## Why do I need a fistulogram?

An arterio-venous fistula is the best means of access to the bloodstream for long-term haemodialysis. Your fistula or graft allows you to have effective dialysis. Your doctor feels that there may be a problem with your dialysis fistula (or graft), and this procedure is the best way to diagnose the problem associated with your fistula. You may already have had a Doppler ultrasound scan to assess the flow in your fistula.

## Who carries out the fistulogram?

A specially trained doctor called an interventional radiologist will carry out your procedure. They have special expertise in reading the images and using imaging to guide catheters and wires to aid diagnosis and treatment.

## Who makes the decision about my treatment?

Your kidney doctor, the vascular access nurse and interventional radiologist will have discussed your case and decided the most appropriate step to take next in your diagnosis and treatment. You will have the opportunity to discuss this and ask questions.

## What are the risks of a fistulogram?

A fistulogram is a simple diagnostic procedure. The same risks apply to when you have needles inserted to the fistula for dialysis.

- Minor bruising may occur where the needle or cannula is inserted but any more significant bruising or prolonged bleeding is very rare.
- Allergic reactions to X-ray contrast are extremely rare. **If you are allergic to X-ray contrast please let the nurses and doctors know.** You may need an alternative procedure to diagnose the problem with the fistula.

## What should I do before the procedure?

The fistulogram is performed as an outpatient procedure. You are able to eat and drink as normal before your appointment. Please try to arrive on time as there will be other patients booked to have procedures after you which take much longer, and if you are not on time you may have to wait (for a long time) while we treat them first.

## What happens after the procedure

You can usually go home after 30 minutes and can eat and drink.

## When can I use my fistula?

Your fistula should be ready for use immediately after the procedure.

## Aftercare

It is important for you to check daily for the 'buzz' in your fistula. If you can't feel it, call the renal department immediately for advice.