Some instructions during filling of the dialysis denominator form:.

1. Count each patient only once. If a patient has more than one vascular access, count that patient by their vascular access type with the highest risk for infection(even if the access is not used for dialysis and even if it is abandoned and/or are non-functional), using the following hierarchy.

Lowest Risk



- Fistula
- Graft
- Other access device {e.g., hybrid access device (HeRo),port(Porta cath)}
- Tunneled Central Line
- Non-tunneled Central Line

Highest Risk

Some instructions during filling of the dialysis event form:

- 1. In the risk factor section of the dialysis event form:
 - ✓ If a patient has more than one vascular access, record the access type with <u>highest risk for infection</u> (even if the access is not used for dialysis and even if it is abandoned/non-functional).

Lowest Risk



- -Fistula
- Graft
- **Other access device** {e.g., hybrid access device (HeRo),port (Porta cath)}
- Tunneled Central Line
- Non-tunneled Central Line

Highest Risk

- ✓ For the other type of vascular access(which is not chosen as the risk factor)write the name at the bottom of the event form.
- ✓ If you select tunneled or non-tunneled central line as a risk factor write the name of the catheter (e.g. Perm cath).
- 2. If there are multiple events reported on the same form, write the date of each specific event.
- 3. If you tick "Yes" for Hospitalization or Death, write the cause of hospitalization or death.