## Instructions for the Denominators for Outpatient Dialysis: Census Form

Data Field	Instructions for Data Collection
Surveillance date	Write down Surveillance date using the format: mm/yyyy
Facility name	Write down the facility name
Facility code	Write down Facility code using <b>form A</b>
Location name	Write location as specified in patient file.eg. ward 2.
Location type	Check Adult or Pediatric to indicate Location type
Number of Chronic Hemodialysis Patients by Vascular Access Type	For each type of vascular access listed, record the number of patients who received maintenance hemodialysis at this location on the first two working days of the month, including transient patients. A patient must be physically present for in-center maintenance hemodialysis on one of these days to be counted on this form (exclude patients who are hospitalized). Record each patient only once. Consider ALL central vascular accesses present, not just those being used for dialysis). If a patient has more than one vascular access, record the access type with <b>highest risk for infection</b> .
	Lowest Risk - Fistula - Graft - Other access device (e.g., hybrid access device) - Tunneled Central Line - Non-tunneled Central Line
	For example, if a patient has a fistula and a tunneled central line, count this patient under the category of tunneled central line. If the patient has a fistula and a "jump graft" record the patient as having a graft. If the patient has only a catheter-graft hybrid or a port, record as "other access device".
Number of these Fistula Patients who	Conditionally required. Out of the fistula patients counted above,
undergo Buttonhole Cannulation	how many undergo buttonhole cannulation.
Total patients	The sum of all patients listed above