

Buttonhole Technique

- For use with native AV fistulas only
- Has been used for over 25 years in Europe
- Fewer missed sticks, infiltrations and hematomas
- Scab removal is critical in preventing infection



Scab Removal Tips:

- Moistening scabs make them easier to remove.
- Tweezers can be used, but should be disinfected prior to scab removal.
- Use 2 x 2's and soak with saline, an alcohol-based gel, or whatever anti-microbial prep you use on the sites and place over sites until moist.


Have the patient tape an alcohol square over each site before coming to the dialysis unit.

- Track formation requires the same angle and depth of entry with every cannulation
- Requires the same cannulator until the track forms
- Changing to blunt needles after the track is formed prevents cutting of the track
- Non-diabetics will form a track in approximately 8 days; diabetics in approximately 12 days
- Not everyone is a candidate for buttonhole

Unlikely Candidates:

- ✓ Patients with heavily scarred fistulas
- ✓ Patients with large amounts of subcutaneous tissue in the upper arm

References - Buttonhole Technique

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