

Overall Risk for a Serious Venous Needle Dislodgement Incident

Add up the scores for questions 1 to 4 to obtain the overall risk.

SCORE

0-2

The patient is at **Low Risk** for a serious VND incident.

- Continue with secure taping and maintain awareness of VND/ABLS.
- Ensure access and bloodline connections are uncovered.
- No further action is needed unless there is a change in the patient's condition.

SCORE

3-4

The patient is at **Medium Risk** for a serious VND incident.

Apply the ANNA recommendations to minimize the risks as indicated for SCORE 0-2 and in addition:

- Ensure the taping technique is secure.
- Consider adding a documented check of taping security after starting hemodialysis.
- If the patient is not fully aware of the risk of VND/ABLS, provide or reinforce education.
- Make it as easy as possible to observe the patient and their access and bloodline connections.
- Increase the frequency at which staff check the security of the needles and the bloodline connections.
- If appropriate, consider use of a device approved for detecting a VND.

SCORE

5-8

The patient is at **High Risk** for a serious VND incident.

Apply the ANNA recommendations to minimize the risks as indicated for SCORE 0-4 and in addition:

- Consider stabilizing the access limb.
- Consider one-to-one monitoring; if available, utilize family member, significant other, or care partner per facility policy
- Provide staff education on risk level and monitoring steps.
- Consider use of a device approved for detecting a VND.

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Assessment of the Risk for a Serious Venous Needle Dislodgement Incident

The risk for a serious venous needle dislodgement (VND) or access/bloodline separation (ABLS) incident depends on the likelihood of the needle becoming dislodged and the access/bloodline becoming separated, and the likelihood that the action necessary to stop the blood loss will not be taken in time to prevent serious harm.

The likelihood could be:

VERY LOW

The event is **very unlikely**.
It will probably never happen.

LOW

The event is **unlikely**, but it could happen.

MEDIUM

The event is **likely** to occur.

HIGH

The event is **very likely**.
It is almost certain to occur.

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1

What is the likelihood that the staff (or caregiver) will fail to observe an actual or potential VND/ABLS for this patient?

The likelihood of the staff (or caregiver) failing to detect VND/ABLS or condition that could lead to VND/ABLS if not corrected, will be **very low/low** if staff can observe the patient and access easily. The likelihood will increase to **medium** or **high** if there are too few staff to make regular checks of the needles and bloodline connections, and if the staff are unable to see the access clearly due to the patient's location, covers, poor lighting, etc. Using a device that alarms when a VND/ABLS occurs reduces this score to 0.

SCORE



2

What is the likelihood that the patient will fail to raise the alarm if they experience a VND/ABLS?

The likelihood of the patient failing to raise the alarm is **very low/low** if the patient understands the implications of a VND/ABLS and is sufficiently alert to take action if a VND/ABLS, or a problem that could lead to a VND/ABLS occurs. The likelihood will increase to **medium** or **high** if the patient sleeps during dialysis, especially if the patient is hard to wake up. It will also increase if the patient has impairments that could affect their ability to notice a VND/ABLS (such as lowered skin sensitivity or poor eyesight) or has communication difficulties. Using a device that alarms when a VND occurs reduces this score to 0.

SCORE



3

What is the likelihood of the patient behaving in a way that could lead to a VND/ABLS?

(Note: Do not consider the security of taping here; that is covered in question 4)

Ideally, the likelihood that a patient's actions during dialysis will lead to VND/ABLS will be **very low**. The likelihood will increase to **low** or **medium/high** if the patient suffers side effects (e.g., hypotension, hypoglycemia, cramps, itching) that could lead to unpredictable movement, if the patient is restless, is not fully aware of being on dialysis, or is known to tamper with the tape, needles, and/or bloodlines. Patients who have had more than one unexplained VND should score 2.

SCORE



4

What is the likelihood of the taping failing to ensure that the needle is secure throughout dialysis?

(Note: Do not consider tampering by the patient here; that is covered in question 1)

The likelihood of the taping failing to secure the needle will be **very low** if a standard taping protocol designed to prevent VND is used. The likelihood will increase to **low** or **medium/high** if the taping technique does not include measures to resist tugging on the needle tubing or has to be modified in a way that makes it less secure (due to allergy, steep needle angle, etc.), or if there are problems with excessive body hair or with seeping or oozing from the needle site.

SCORE

