

Greetings from the Community Education Task Force!

We look forward to reviewing your materials for their potential incorporation into the Fistula First Breakthrough Initiative. To help us streamline our review and assess your materials more efficiently, the Community Education Work Group has established submission guidelines (below). **Please complete and return this form with your materials.**

Guidelines

- **Communicate the message that fistulas are the best access, or a better access than grafts or catheters. Stating or implying that all accesses are equal or using negative messaging or scare tactics is not congruent with the purpose and goals of this initiative.**
- **Define all medical terms when first used in the materials.**
- **Ensure that content is clinically accurate and sound.**
- **With the exception of medical terminology, keep the reading level below 10th grade. The preference is for a reading level of 8th grade or below. Reading level can be assessed using the Flesch-Kincaid test built into MS Word Grammar Checker. Please indicate grade level with your submission.**
- **Avoid passive voice. Use the MS Word Grammar Checker to ensure that your materials use < 20% passive sentences (0% is best). Please indicate the percentage of passive sentences with your submission.**
- **Ensure that your submission has easy-to-find subheads and reflects a good use of white space. Information should be clear, with a minimum 12-point font (14 is preferred), line length not exceeding 40 characters, and use of bullets and line returns between paragraphs. Graphics and illustrations (labeled) also aid reader comprehension.**

Please complete the following information:

A. Point of Beneficiary Involvement

This material has the potential to be utilized to meet the following areas of beneficiary involvement: (check mark all applicable points of involvement)

1. Learn to preserve access blood vessels, limit blood draws, use (dominant) hand, etc.
2. Involve family in access and modality planning, surgical care/recovery
3. Discuss access; learn types, pros and cons, when to get it
4. Overcome denial and fears of ESRD, need for dialysis/transplant, need for surgery/needles
5. Self-advocate for fistula with nephrologist, vascular surgeon.
6. Choose a qualified vascular surgeon
7. Request vessel mapping
8. Schedule fistula surgery; deal with fear of needles, changes to body image
9. Request post-surgical instructions, perform post-op access care
10. Learn how to care for your fistula, monitor access for infection, clotting, stenosis, and reporting problems.
11. Know and self-advocate for own vascular access plan in case of access failure.
12. Deal with needle fear/pain, control/rights re: who cannulates in-center
13. Cope with body image concerns (appearance, short sleeves, sexuality, etc.)

Individual Submitting: _____

- 14. Consider/learn self-cannulation/buttonhole
- 15. Cope with complications e.g., infiltration, bleeding, nerve pain, steal syndrome, aneurysm, stenosis, access revisions procedures, etc.

B. Website Outline

If the material does not meet a specific Point of Beneficiary Involvement, please indicate the appropriate section in the Website Outline below: (check mark applicable sections)

- III-B Different types of procedures
- II-C Anesthesia
- II-D Post placement discomfort and/or pain
- V-F Other related issues: time off from work, mobility, etc.
- V-B When putting in needles goes wrong (infiltration, site rotation, needle direction, etc.)
- V-D Monitoring at the dialysis facility

C. Readability Statistics

Please indicate the following information: **(NOTE: Click on "Help" in MS Word, enter "readability statistics" and follow the directions provided.)**

- 1. Fleisch-Kincaid Grade level _____
- 2. % Passive sentences _____
- 3. Characters per line _____
(Word Count)

The Community Education Committee will evaluate your materials in accordance with these guidelines. Please answer the following questions:

- 1. Is the item or product related to selection of an AVF for hemodialysis access?
 Yes No **Com.Ed. Reviewer**
 Yes No
- 2. Was the item or product created by a professional organization with review by licensed healthcare personnel? (e.g. Medical Review Boards, physician)
 Yes No **Com.Ed. Reviewer**
 Yes No
- 3. Is the item or product clinically sound? (i.e. current practice guidelines or evidence based)
 Yes No **Com.Ed. Reviewer**
 Yes No
- 4. Is the item or product in use now?
 Yes No **Com.Ed. Reviewer**
 Yes No
- 5. Is this educational item free from commercial bias?
 Yes No **Com.Ed. Reviewer**
 Yes No

Thank you for your submission!

The Community Education Task Force appreciates your submission. Please submit this form and your material(s) to: Cristi Cousins, Fistula First Project Coordinator (ccousins@nw18.esrd.net)

Note: If this material requires formal permission, please list who we should contact:

Name: _____ Title: _____
Phone: _____ E-Mail: _____