

Training in dialysis access – charting future success

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Abstract

Purpose: Medical education and training in dialysis access skills remains complex and inadequate as learners come from diverse backgrounds and from various specialties so that appropriate training is limited. As a result, a system of progressive education including live lectures, and hands-on training has emerged, but there is controversy as to what constitutes the best educational model.

Methods: Presently there is no recognized or structured training in vascular access during residency or fellowships. Here we present a model of dialysis access training for beginners to advanced surgeons.

Results: A structured hands-on and didactic surgery training certification course consisting of a one-week curriculum with 49 hours of ACCME credit hours have been in effect for one year. The learning impact and the performance outcome are high but with limited attendance capacity. Pre- and post- training test results attest to training effectiveness. To increase access, an off-site training curriculum has been initiated, entailing 1-2 days (8-15 credit hours) consisting of didactic lectures and surgical training. This teaching module has moderate learning impact for 50-100 attendees. Finally, a tiered, web-based training curriculum (10 ACCME credit hours) can accommodate an unlimited number of learners, but has a lower skills learning impact.

Conclusions: The future dialysis access training must also accommodate learners with diverse individual backgrounds, and different levels of professional (skill) development. To be effective and accessible, a variety of educational systems, for example on site or

web based is needed. Collaborative initiatives for global dialysis access training are currently underway.

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