

Feedback is important! Tell us about ...

YOUR *Vascular* *Access* Experience



Introduction

We want to know more about your personal experiences as a dialysis patient and dealing with your vascular access (the place on your body that the dialysis machine connects to clean your blood through the hemodialysis process). Please share with us your experience so that we can improve. Your answers will be kept confidential! Thank you.

Part 1: Vascular Access General Information

1.	What type of dialysis access do you currently use for dialysis? (Instructions: Place a check mark next to your selection. Pick only one.)
	<input type="checkbox"/> Catheter
	<input type="checkbox"/> Fistula
	<input type="checkbox"/> Graft
2.	WHO did your dialysis access surgery (doctor) and WHERE it was done (hospital)? (Instructions: Write in your responses below.)
	Who/Doctor:
	Where/Hospital:
3.	Do you have regular, reliable transportation to get to and from doctor appointments? (Instructions: Place a check mark next to your selection. Pick only one.)
	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input type="checkbox"/> Sometimes
4.	Would it be helpful to have your family involved in your education about vascular access? (Instructions: Place a check mark next to your selection. Pick only one.)
	<input type="checkbox"/> Yes
	<input type="checkbox"/> No