Sample Job Description:
Vascular Access Manager (VAM)

Suggested Role

A Vascular Access Manager (VAM) should be prepared to provide dialysis facility staff and physicians serving patients with central venous catheters (CVCs) and long-term catheters (LTCs) >90 days with ongoing:

- Communication.
- Education.
- Access tracking (for timely intervention).

He or she should be able to provide leadership and collaborate with the Interdisciplinary Team (IDT) to improve vascular access-related outcomes and reduce the number of hemodialysis patients with LTCs.

Proposed Responsibilities

Communication

The ESRD VAM would be the facility staff member responsible for:

- Facilitating routine meetings of the IDT to identify opportunities for vascular access-related improvements and challenges.
- Communicating with patients regarding access-related care and planning.
- Communicating with surgeon in a timely manner regarding maturing fistulas and/or grafts and CVC removal.
- Ensuring that the number of patients with CVCs, LTCs, and maturing accesses is reported at the monthly Quality Improvement meeting.

Education

The ESRD VAM would stay up-to-date on all vascular access procedures and:

- Provide vascular access education to patients and families.
- Ensure facility staff receive ongoing education, including:
  - Collaborating with local vascular access centers and vascular surgeons to improve the staff's skills in identifying timely interventions for vascular access preservation.
- Promote and use the Fistula First resources found on the ESRD National Coordinating Center (NCC) website www.esrdncc.org.

Monitoring and Tracking

An important part of the ESRD VAM's responsibilities would be to ensure that all vascular access-related communications and tasks are up-to-date, including the monitoring and tracking of:

- All patients with maturing vascular accesses to ensure timely referral to surgeon for interventions and/or cannulation within 90 days.
- The tracking tool for appointments, rescheduling of missed appointments and patient hospitalizations.
- Directly communicate updates and changes in access use with the CROWNWeb user of the facility who can then make accurate changes to Vascular Access data for the month being reported. i.e. 1 needle used with CVC updated from CVC only will move a patient OFF the LTC list.