

## HUDDLE UP

# The One-Minute Check

Perform the vascular access assessment One-Minute Check before each treatment and whenever concerns arise.

**Use your senses—LOOK, LISTEN, FEEL, ASK.**

Step	What to Check	What to Look For
Feel	At the entire access site and limb	Redness, swelling, drainage, bruising, skin breakdown
Look	For thrill over entire length of fistula/graft	Should feel continuous—absence or change may mean thrombosis or stenosis
Listen	With a stethoscope for bruit	Decreased or no urine output
Ask	The patient about symptoms	Respiratory distress or low oxygen

### Huddle Objective

Reinforce consistent, thorough vascular access assessments using the “One-Minute Check” to detect complications early and protect our patients’ lifelines.

### Key Teaching Points

- The vascular access is the patient’s lifeline—its preservation is critical.
- Routine assessment helps prevent:
  - Access failure
  - Infections
  - Hospitalizations
- The One-Minute Check is a quick, standardized way to ensure nothing is missed.

### Team Discussion Prompt

Ask the team: What’s one challenge you’ve faced in access assessment—and how did you resolve it?

### Takeaway Message

One minute can save a lifeline—assess every access like it’s the only one they’ve got

### Red Flags – Report Immediately

- Absent or diminished thrill/bruit
- New pain, redness, or warmth
- Prolonged bleeding after needle removal
- Hardening or bulging of the access site
- Signs of infection (fever, drainage, chills)

### Documentation Tips

- Record thrill/bruit quality, skin condition, and any concerns.
- Note and report any changes from prior treatments.
- If access is compromised, notify RN/MD immediately—don’t attempt cannulation.

## Vascular Access Assessment - The One-Minute Check

Date: \_\_\_\_\_ Huddle Leader: \_\_\_\_\_

**Staff Signatures (Print & Sign):**

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