
2 Berman SS et al, “Predicting Arteriovenous Fistula Maturation with Intraoperative Blood Flow Measurements,” J Vasc Access. 2008 Oct-Dec;9(4):241-7. (Transonic Reference # 7710AH) Intraoperative blood flow measurements obtained at the time of autologous AVF construction can identify fistulas that are unlikely to mature; and therefore, that require immediate revision or abandonment which will ultimately expedite the establishment of a useful access in the HD patient. This is the first study to establish the minimal flow values uniquely needed for both radial artery and brachial artery AVFs to expect primary maturation to a functional access.


7 Saucy F et al, “Is Intraoperative blood flow predictive for early failure of radiocephalic arteriovenous fistulae?” Nephrol Dial Transplant 2010; 25(3): 862-867. (Transonic Reference # 9999AHM) Blood flow <120 mL has a good predictive value for early failure in RCAVF. During the procedure, this cut-off value may be used to select appropriately which RCAVF should be investigated in the operation theatre in order to correct in real time any abnormality.

7 Saucy F et al, “Intraoperative assessment of vascular access,” J Vasc Access 2014; 15 Suppl 7: S6-9. (Transonic Reference # 9989AHM) The blood flow measurement should be performed after the confection of the anastomosis. When blood flow is limited, fistulography is an essential step to assess patency.