



**NEPHROLOGY PROGRAM  
DEPARTMENT POLICIES AND PROCEDURES**

**Home Dialysis - Section 09 - Peritoneal Dialysis - HDU 9-01  
Exteriorization of the Embedded Peritoneal Catheter  
No.: 01486 (TOH Standardized Policy Number)**

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**ISSUED BY:**

Home Dialysis Unit Clinical Practice  
Committee

**DATE OF APPROVAL:**

2007/11

**APPROVED BY:**

Program Clinical Director and Division  
Head

**LAST REVIEW/REVISION DATE:**

2016/06

**CATEGORY:**

Peritoneal Dialysis

**IMPLEMENTATION DATE:**

2007/11

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**PURPOSE:**

- To exteriorize the embedded peritoneal dialysis catheter for the initiation of peritoneal dialysis

**POLICY STATEMENT:**

- The peritoneal dialysis catheter is inserted via laparoscope by the surgeon and is left buried subcutaneously until peritoneal dialysis is required. Preferably, the catheter is left buried for a minimum of 4 weeks. It may be exteriorized earlier if the patient needs to commence PD sooner than planned. The catheter is withdrawn from the subcutaneous tissue by the nephrologist at the bedside. Peritoneal dialysis may be initiated immediately after exteriorization
- Post exteriorization care includes keeping the dressing dry and minimizing movement of the catheter. Instruct patient not to shower or bathe until the exit site is well healed and to avoid any tugging on the catheter
- An occlusive dressing is required for 6 weeks post exteriorization
- This procedure can be done in the Home Dialysis Unit (HDU) or on the in-patient nephrology unit (7NW)

## **Infection Prevention and Control:**

### **Hand Hygiene:**

1. Refer to [Corporate Policies and Procedures - #00014 Hand Hygiene](#)
2. Refer to [Corporate Policies and Procedures - #00233 Hand Hygiene Products and Materials](#)

Before initial patient/patient environment contact

Before an aseptic procedure

After body fluid exposure risk

After patient/patient environment contact

### **Personal Protective Equipment:**

1. Refer to [Infection Prevention and Control Policies and Procedures - #00023 Routine Practices](#)

**DEFINITION(S):** N/A

**ALERTS:** N/A

### **EQUIPMENT:**

Quantity	Product	Order #
<b>Step 1: Exteriorization of the embedded PD catheter</b>		
1	Major procedure tray	
2	Masks with face shield	
1	Surgical mask for patient prn	
1	Sterile surgical gloves	
1	10 mL syringe	140515
1	18g blunt fill needle	155645
1	25g needle	
	Alcohol swabs	
1	1 vial 2 % Lidocaine with Epinephrine. Epinephrine can be used for 3 days post opening	
1	Stainless steel surgical blade # 11	
1	Sterile gown	
1	Bottle of CHG 2% aqueous solution in 4% alcohol	230265
2-3	OR Swabstick, CHG 2%, alcohol free	230865
1	OR Bottle of 10% proviodine if allergic to CHG	230380
	Hospital grade surface cleaner	
<b>Step 2: Adding the adaptor and connecting the transfer set</b>		
1	Major disposable dressing tray	
1	Beta cap adaptor (resin connector)	
1	10ml syringe	
1	18g blunt fill needle	
1	10 mL pre-filled 0.9% Sodium Chloride syringe or vial of 0.9% Sodium Chloride 10 mL	
1	Transfer set tubing	120225

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Quantity	Product	Order #
1-2	Keyhole dressing	210335
	Transparent dressing ported 9cm x 12cm (IV 3000) OR	230125
	Transparent IV advanced securement dressing 8.5cm x11.5 (i.e. 3MTMTegaderm™ IV advanced securement dressing) if IV 3000 not available OR	210961
1	Gauze dressing 9cmx15cm(i.e. Mepore® ) if drainage	
1	Sterile scissors	
1	mini- cap	<b>320810</b>

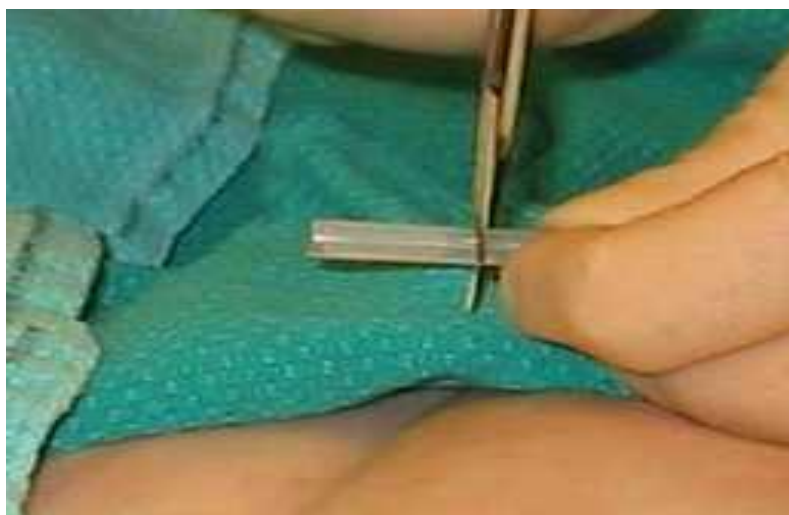
## PROCEDURE:

### PART 1: Exteriorization of Catheter

1. Explain procedure to patient. MD to obtain consent. Assess Vital Signs
2. Patient to wear a hospital gown
3. Wash table surface with hospital grade surface cleaner
4. Patient to don mask prn
5. Nurse and physician to wear mask with shield
6. Wash hands
7. Assist physician to add items needed to the procedure tray
8. Cleanse top of Lidocaine bottle with an alcohol swab
9. Assist physician in withdrawing the Lidocaine in the 10ml syringe
10. Assist physician as needed
11. Once the catheter has been exteriorized, the nurse will continue with Part 2

### PART 2: Adding the Beta Cap (Resin) adaptor and connecting the transfer set

1. Wash hands
2. Don mask if not already on
3. Prepare tray
4. Put on sterile gloves
5. Draw up 10ml of 0.9% NaCl
6. Flush transfer set with the 0.9% NaCl
7. Close transfer set clamp. Remove 10ml syringe and put the mini-cap on transfer set using 10 x 10cm gauze saturated with Chlorhexidine and cleanses the end of the catheter and the tubing ½ way down towards the exit site. Repeat x 1
8. Place clean catheter on the sterile drape
9. Fold a 2x2 around the catheter and clamp with a disposable clamp
10. Examine the end of the catheter for the presence of a hard plastic piece inside the tubing (plug). Using the sterile scissors, cut the plug from the end of the catheter ensuring that the entire plug has been removed



11. Attach the Beta Cap (Resin) adapter; ensure the catheter is tight against the end of the adapter



From Covidien: A BETA-CAP™ Adapter is a male, adapter for the end of a peritoneal dialysis catheter. The adapter provides a tight closure when used with a standard CAPD transfer set. It is made of ULTEM™\* resin material to maximize durability and resist cracking and breakage during repeated catheter cleaning or use.

Connecting to Transfer set

Connecting to PD catheter



12. If the Physician has not attempted to aspirate the catheter, attach transfer set then aspirate with a 10 ml syringe with of 0.9% NaCl, open the twist clamp and attempt to aspirate to remove any fibrin or old clot in the catheter. If unable to aspirate, attempt to flush. Close twist clamp
13. Apply minicap
14. Apply sterile occlusive dressing as per procedure [Neph Corp Policy 1-01](#)
15. Proceed with PD flush(s) as ordered by Physician
16. Then proceed with PD exchanges or Heparinization and capping of the catheter [Neph Corp Policy 1-01](#) as ordered by the Physician
17. Inpatient units to notify the HDU of catheter Exteriorization at ext. 88193

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## **DOCUMENTATION:**

### **1. For HDU**

- Document the exteriorization and results of aspiration, flushing and appearance of effluent
- Indicate due date for the next transfer set change in NephroCare, Nurses Worksheet, access info

### **2. For Inpatient Units**

- Document the exteriorization and results of aspiration, flushing and appearance of effluent on the Integrated Progress Notes. Fax a copy of these notes to the HDU fax # 613-738-8334

## **RELATED POLICIES / LEGISLATION:**

1. [Corporate Policies and Procedures - #00014 Hand Hygiene](#)
2. [Corporate Policies and Procedures - #00233 Hand Hygiene Products and Materials](#)
3. [Infection Prevention and Control Policies and Procedures - #00023 Routine Practices](#)
4. [Nephrology Policies and Procedures - Section 01 - Nephrology Corporate - Neph Corp 1-01 Peritoneal Dialysis Catheter Care](#)

## **REFERENCES:**

1. Expert opinion of Nephrologist and Surgeon
2. Contemporary Nephrology Nursing: Principles and practice, Second Edition

## **COMMENTS / SIGNIFICANT REVISIONS: N/A**