



MANITOBA RENAL PROGRAM

SUBJECT ▪ Peritoneal Catheter Flush	SECTION 40.10 Peritoneal Dialysis Procedures
	CODE 40.10.05
AUTHORIZATION ▪ Professional Advisory Committee, Manitoba Renal Program ▪ Nursing Practice Council, St. Boniface Hospital	EFFECTIVE DATE September 2003
	REVISION DATE August 2007 May 2012 October 2014 October 2016 May 2017

PURPOSE:

1. To check the patency of the peritoneal dialysis catheter PRN.

POLICY:

1. Routinely peritoneal catheters are flushed prior to the PD training
2. The catheter is flushed prn per volume ordered by physician.
3. All Registered Nurses (RN's) and Licensed Practical Nurses (LPNs) who have received education and training and who are competent may perform this procedure.

EQUIPMENT:

- MiniCap Disconnect Cap (MiniCap) (2)
- Warmed 1.5% 1.5 liter Twin Bag® dialysate solution
- 2 clean clamps
- IV pole
- Graduated cylinder/scale

KEY POINT:

- Check expiry date
- Second MiniCap in case of contamination

PROCEDURE:

1. Perform hand hygiene.
2. Collect supplies.
3. Hang 1.5% 1.5 liter Twin Bag dialysate on IV pole and lay drain bag on towel/incontinent pad located on the floor.
 - Ensure twist clamp on the transfer set is closed.
 - Ensure correct solution volume, dextrose concentration, solution type, temperature, and expiry date before opening outer wrap of dialysate solution bag.
 - Ensure clarity of solution, intact port cap and connector cover, and no leaks by squeezing bag

4. Perform hand hygiene.
5. Remove connector cover from the Twin Bag dialysate solution.
 - Maintain sterility of the luer lock connector. If contaminated, discard bag and use new bag of dialysate solution.
6. Holding transfer set securely, remove MiniCap from transfer set and discard cap. Maintain sterility of the exposed end.
 - If transfer set is contaminated apply a new MiniCap and refer to 70.30.05 *Peritoneal Dialysis Contamination Protocol*.
7. Connect Twin Bag dialysate solution to transfer set.
8. Open transfer set twist clamp to drain.
 - Expect little or no drainage (peritoneal cavity empty).
 - If catheter for ascites drainage, verify amount to be drained with Physician.
9. Once drain is complete, close transfer set twist clamp and apply **clean** clamp to drain line.
 - Document the characteristics of the drainage.
10. Break the green seal on the fill line.
11. Open clean clamp on drain line for 5 seconds. Reclamp clean clamp on drain line.
 - To flush air from the fill line. Do not allow more than 5 seconds to pass before clamping line, otherwise too much dialysate will be lost in the drain bag.
 - Flush before fill reduces the risk of contamination.
12. Open transfer set twist clamp to allow dialysate to flow into the peritoneal cavity.
 - Volume ordered per physician. Typically the amount varies between 500ml to 1000ml per flush.
13. Close transfer set twist clamp once dialysate volume infused.
14. Apply second clean clamp to the fill line.
15. Open the clean clamp on the DRAIN LINE. Open transfer set twist clamp to begin drain.
16. Once drainage complete, close transfer set twist clamp. Apply clean clamp to the drain line.
 - If inadequate drainage, try to reposition patient, verify bowel prep done, contact Nephrologist.
17. Open clean clamp on fill line and open transfer set twist clamp to begin second flush
Repeat steps 14. – 17.
 - To begin second flush with remainder of Twin Bag solution.
18. Perform hand hygiene.
19. Open the MiniCap package.
20. Ensure twist clamp on the transfer set is closed.
22. Disconnect the Twin Bag dialysate from the transfer set and apply sterile MiniCap.
 - Maintain sterility of transfer set end.
 - If transfer set is contaminated apply a new

MiniCap and refer to 70.30.05 *Peritoneal Dialysis Contamination Protocol*.

- 23. Anchor transfer set to abdomen.
 - Transfer set and catheter immobilization prevents trauma and infection to the exit site and promotes healing of the exit site.
- 24. Measure/weigh effluent. Dispose as per facility policy.
 - Note clarity, colour, and amount of effluent.

DOCUMENTATION:

- Document the date of the flush(es) in the patient health record
- Document the amount infused, the amount drained, the clarity, and colour of the effluent in the patient health record.

REFERENCES:

Baxter Corporation (1998), Twin Bag. The patient friendly, single connection (CAPD) system. Toronto, Ontario.

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Thomas, N. (Ed). (2002) *Renal Nursing* (2nd Edition). (p223, 249). London, England: Bailliere Tindall.

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