

The Royal Wolverhampton NHS Trust
Specialist Clinical Practice Renal sub-committee

Practice Reference:	SNCP 07
Title:	Taking off Procedure – Tunnelled and temporary Dialysis catheter.
Date of Implementation:	October 2012
Version:	Version 2
Date of review:	March 2015
Date of next review	March 2018
Author:	Renal Advanced Nurse Practitioner
Practice Location:	Renal Specialist Clinical Practice Folder/ Trust Intranet

1.0 Practice Statement:

1.1 To prevent infection and terminate the dialysis session safely.

1.2 To be undertaken by a registered nurse with a renal qualification, or an RN with training from a renal nurse who has been assessed and has evidence of competence.

2.0 Equipment:

- Dressing trolley
- 2 x sterile towel
- Sterile gauze
- 1 x needle (blue 23g)
- 2 x 10ml syringes
- 1 x 5ml syringe
- 2 x injection caps
- Citra lock 30%
- Personal Protective Equipment (PPE) - non sterile gloves, plastic apron, visor.
- Sharps box
- 2 x 10mls 0.9% saline for injection
- Recirculation connector

3.0 Detailed Action:

3.1 Provide patient with explanation of the procedure and ensure patient is comfortable and to gain consent.

3.2 Wash hands with soap and water and dry thoroughly

3.3 Prepare sterile equipment onto clean trolley.

3.4 Draw up 10mls 0.9% saline into each 10ml syringe.

3.5 Dispose of needle in sharps box.

3.6 Decontaminate hands with alcohol gel allowing to dry thoroughly. Apply PPE.

3.7 Place sterile dressing towel under the catheter.

3.8 Disconnect patient from dialysis as per SNCP 15.

3.9 Following ANTT flush catheter with 10ml 0.9% saline.

3.10 Instil the required volume of Citra lock 30% lock solution into each lumen of the catheter ensuring no air bubbles are present.

3.11 Clamp each catheter limb, remove syringe and attach injection cap.

3.12 Remove PPE and dispose of into the appropriate waste bag

3.13 Dispose of relevant equipment in appropriate waste bag

3.14 Decontaminate hands and dry thoroughly.

4.0 Financial Risk Assessment

4.1 Following a Risk assessment of this clinical practice no financial risks have been identified.

5.0 Equality and Diversity Risk Assessment

5.1 Following an Equality and Diversity risk assessment of this clinical practice, no equality and diversity risks have been identified.

6.0 Maintenance

6.1 This clinical Practice will be reviewed and kept up to date by the Renal ANP and the Specialist Clinical Practice Renal Sub- Committee workgroup will recommend changes and amendments.

7.0 Training

7.1 All staff undertaking this practice must have received training to include:

Demonstration of practice

Supervised practice

All staff undertaking the procedure must have been competency assessed and deemed competent in the procedure by a competent practitioner.

8.0 References:

Thomas N Renal nursing 4th Edition 2014 Bailliere Tindall

Levy, J. Morgan, J. Brown, E. Oxford handbook of Dialysis 3rd Edition 2009. Oxford University Press.

Nolan JP Reducing catheter related bacteraemia in haemodialysis. Vascular access society 5th Int. Congress Nice 2007

Saving Lives: reducing infection, delivering clean safe care. Revised edition: October 2007 Department of Health.

9.0 Bibliography:

Daugirdas, J.T. et al. Handbook of Dialysis fifth edition. 2014 Lippincott New York.

Davies A.H, Gibbons, C.P, Vascular Access simplified. March 2003 tfm Publishing.
Levy, J. Morgan, J. Brown, E. Oxford handbook of Dialysis 2001. Oxford University Press.