



Policy Name PERITONEAL DRAINAGE (USING COOK OR TENCKHOFF CATHETERS)	Policy Number: 0243
	Effective Date: October 20, 2010
Approved By: Management	Date Revised:
Classification: Pain and Symptom Management	Page No: Page 1 of 3

POLICY

Registered Nurses are able to drain peritoneal catheters using appropriated standards and procedures. A physician's order is required indicating the frequency of drainage and the maximum volume to be removed. Sterile technique shall be used for peritoneal drainage and dressing change procedures.

PROCEDURE

Check the physician's order, noting the frequency of drainage and the volume to be removed. When continuous drainage of the peritoneal catheter is required, the collection bag and dressing should be changed as necessary.

Required Equipment

- Litebag 600 deluxe drainage bag with tubing attached
- Injection cap
- Sterile gloves
- 2 sterile 4X4 gauze (used to pick up/hold tubing)
- 2 chlorhexidine and 4 alcohol swabs
- 1 sterile drain gauze
- 2 sterile 4X4 gauze
- 1 large occlusive dressing (tegaderm)
- Normal saline and 10 ml syringe **if flush is ordered**
- Plastic clamp

Drainage of peritoneal fluid

1. Prepare a clean surface.
2. Wash hands thoroughly.
3. Open packages to create a sterile field for materials.
4. Clamp drainage bag.
5. Place end of tubing on sterile surface.
6. Wearing non-sterile gloves, remove resident's peritoneal catheter dressing.
7. Place end of peritoneal catheter on sterile surface.
8. Remove non-sterile gloves, wash hands and put on sterile gloves.
9. Using a sterile 4X4 to pick up the tubing, cleanse around the cap of peritoneal drain, and then remove the cap.



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10. Cleanse the end of the peritoneal catheter before attaching the drainage connection tubing and drainage bag.
11. Open clamp on the peritoneal catheter and drain prescribed volume. If prescribed volume is >600mls, clamp the peritoneal catheter and empty the drainage bag when full so that continued drainage may occur if needed. Once bag is empty, reopen clamp and continue drainage.
12. When drainage is complete, clamp the peritoneal catheter, disconnect the connecting drainage tube and bag from the catheter.
If ordered, flush the peritoneal catheter with prescribed amount of sterile normal saline.
13. Cleanse the end of peritoneal catheter with alcohol swab for thirty (30) seconds and attach new sterile injection cap.
14. Record procedure in the resident's health record as noted below.

Dressing change

1. Cleanse peritoneal catheter insertion site with chlorhexidine swabs and the catheter with alcohol swabs. *Always cleanse from the site moving in an outwards direction.*
2. Assess site noting any changes or signs of infection, suture status and/or problems with the catheter. Report any concerns to the physician.
3. Apply sterile drain gauze over the insertion site.
4. Coil the peritoneal catheter on top of the drain gauze and cover with sterile 4X4 gauze.
5. Apply an occlusive dressing over the top of the 4X4 gauze insuring that the edges of the gauze are covered and sealed. Write the date on the occlusive dressing.

Disposal of Peritoneal Fluid

1. Drain the contents of the drainage bag into the toilet and flush.
2. Dispose of the used bag and tubing into a plastic garbage bag for disposal with the regular garbage.

Documentation

1. Document on the resident's health record including:
 - the amount and color of the drainage;
 - the appearance of the insertion site and sutures;
 - the dressing change;
 - how the resident tolerated the procedure.



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2. Note in the resident's care plan any specifics of dressing change, drainage procedures or resident's concerns as reference for other staff.

ATTACHMENTS

Gallini Medical Devices – Product Description Sheet – Litebag and Litebag DeLuxe.

REFERENCE

AHS, Calgary Health Region, Home Care Policy and Procedure, Peritoneal Drainage (using Cook or Tenckhoff catheter), Policy Number VI.G.10
Alberta Health and Wellness, Continuing Care Health Service Standards, July 2008



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