



Tunneled Catheter Care

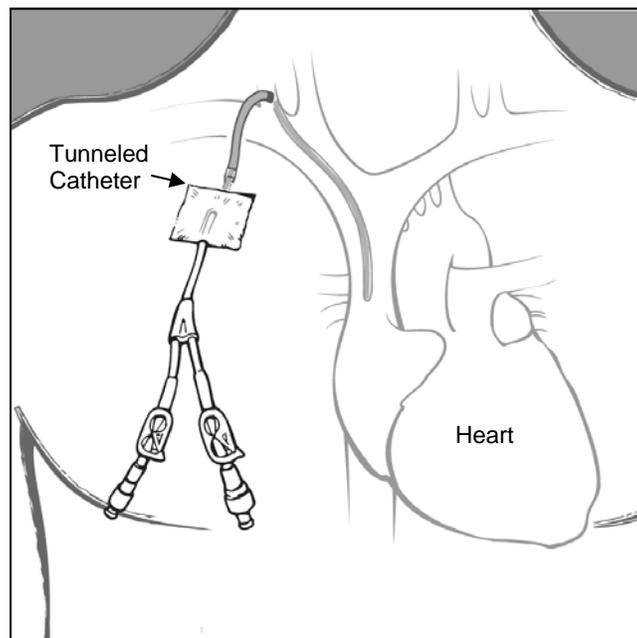
With flush instructions for hemodialysis and plasma exchange catheters

This handout gives step-by-step instructions on how to care for your tunneled catheter. Included are signs of infection to watch for and when to call the doctor.

You have a *tunneled catheter* for hemodialysis or plasma exchange. The tunneled catheter is a catheter that is fixed in place when scar tissue forms. It can be used for weeks or months.

The catheter is placed into a large vein in your neck that returns blood to your heart. It is then tunneled down your chest wall, coming out through your skin about 6 inches from where it entered your vein.

Follow the care instructions in this handout to keep the catheter from clotting and to prevent infection.



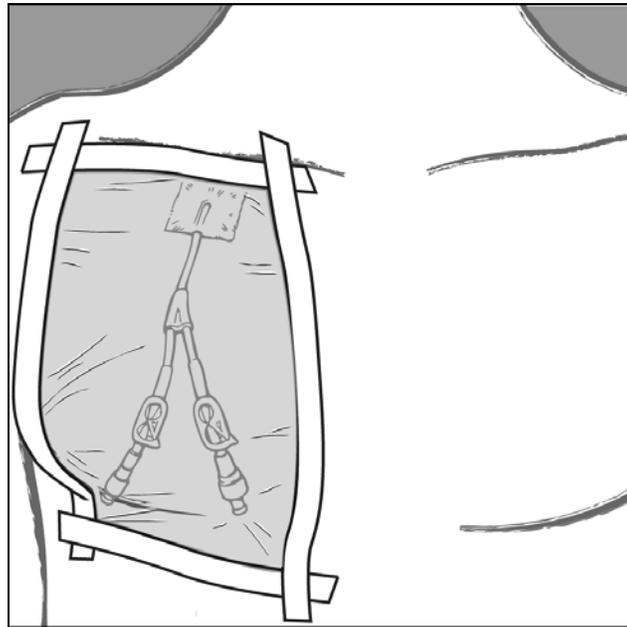
Placement of a tunneled catheter

When you change your dressing, check your site for any sign of infection or catheter damage. If these problems are found early, they can likely be resolved.

- Look for any redness, swelling, drainage, or moisture.
- Gently feel for any swelling or tenderness.
- The catheter should be intact, caps in place, and both ports clamped.

Basic Catheter Care

- Keep the catheter site as clean as possible to prevent infection.
- Keep both ports of the catheter **clamped at all times**.
- Do **NOT** pull on the catheter.
- Do **not** take a bath, soak in a hot tub, or go swimming.
- When you take a shower, cover the entire catheter and dressing site with a plastic sheet and tape the edges (see the picture below). Remove the plastic cover right after your shower. Change the dressing right away if it gets wet.
- If you are bleeding from the catheter site or if the catheter falls out, **apply pressure** at the site and go to an emergency room.



Covering the catheter with plastic

Catheter Dressing Change

- I need to change my dressing every 3 days *or* when it is wet or loose.
- I need to change my dressing *only* if it becomes wet or loose. Otherwise, the staff at University of Washington Medical Center (UWMC) or my dialysis center will change my dressing.

Follow these steps to change your dressing:

1. Prepare these supplies:
 - ChloroPrep
 - 2" x 2" gauze
 - Transparent dressing
2. Put on a mask.
3. Wash your hands with soap and water.
4. Remove the old dressing.
5. Clean the catheter site with ChloroPrep and let it dry for 30 seconds.
6. Apply 2" x 2" gauze and then the transparent dressing.

Catheter Flush

- I need to flush my catheter every 3 days.
- I do not need to flush my catheter or change my cap. The staff at UWMC or my dialysis center will flush my catheter.

Follow these steps to flush your catheter:

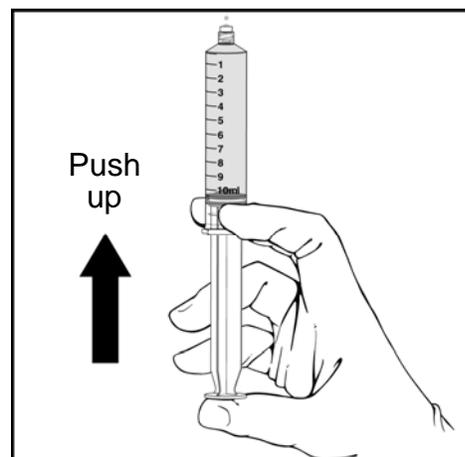
1. Prepare your supplies:
 - 4 alcohol pads, with packets open and ready to use
 - 2 prefilled 10 cc normal saline syringes with packaging removed, plunger pushed to remove any air in the syringes, and caps placed back on the syringes (see step 5 below)
 - 2 prefilled 3 cc heparin 100 units/cc syringes, with packaging removed
 - 2 caps (only when caps need to be changed)
 - Mask
2. Put on the mask.
3. Wash your hands with soap and water.
4. Make sure both catheter ports are clamped and the caps are on tight.
5. Push the plunger on the syringe to remove air.

When to Call Your Doctor

Infection is the most common complication of tunneled catheters. Germs from your hands, mouth, and surroundings can get into your catheter. This can make you very ill and cause your catheter to fail.

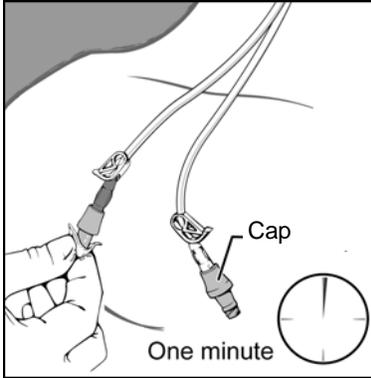
Call your doctor right away if you have any of these signs of infection:

- **Fever or chills**
- **Redness, warmth, drainage, or swelling at the catheter site**
- **New onset of pain**



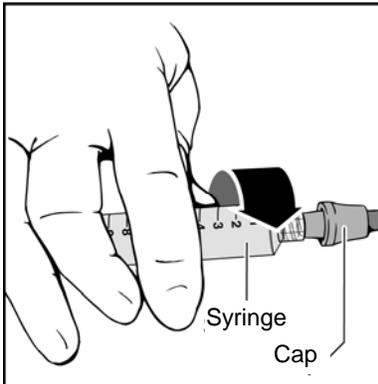
Step 5: Push the plunger on the syringe to remove air.

6. Use 1 alcohol pad and rub for 1 minute to clean the end of the cap.



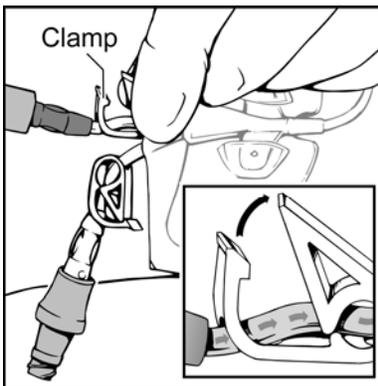
Step 6: Use 1 alcohol pad and rub for 1 minute to clean the end of the cap.

7. Connect the 10 cc normal saline syringe to the cap.



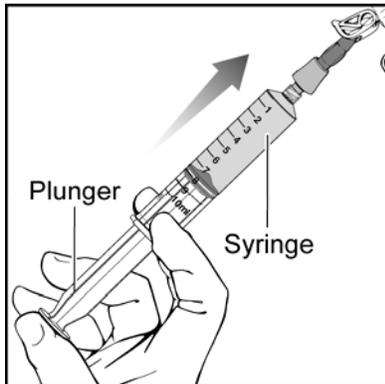
Step 7: Connect the 10 cc normal saline syringe to the cap.

8. Unclamp the catheter.

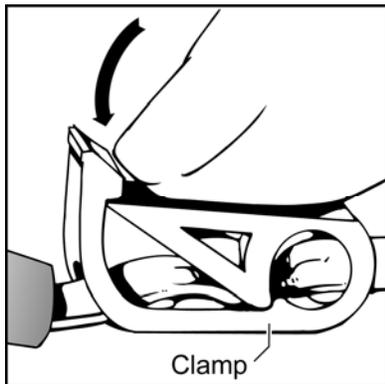


Step 8: Unclamp the catheter.

- Inject the normal saline into the catheter. Use positive pressure by using one hand to inject and the other hand to clamp right away as soon as all the fluid has been injected.

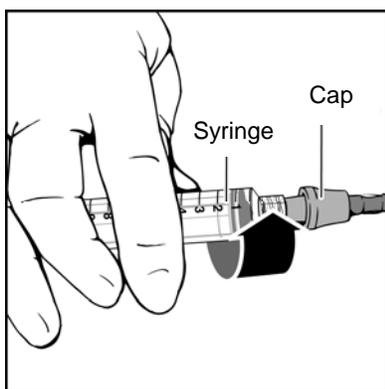


Step 9a: Inject the normal saline.



Step 9b: Close the clamp.

- Remove the 10 cc syringe from the cap.



Step 10: Remove the 10 cc syringe from the cap.

- Connect the 3 cc heparin-filled syringe to the cap. Unclamp the catheter and inject the heparin into the catheter. Use positive pressure by using one hand to inject and the other hand to clamp as soon as all the heparin has been injected.
- Remove and discard the syringes.
- Repeat steps 5 through 12 on the other port.

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff is also available to help.

- Renal Nurse:
206-598-2844
 - Neurology Nurse:
206-598-7688
 - Transplant Nurse:
206-598-4773
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Cap Change

Your clinic nurse will change your cap. ***Follow the steps below ONLY if your cap falls off.*** If the cap falls off, it becomes contaminated and cannot be used again.

Follow these steps to place a new cap:

1. Check that the ports are clamped.
2. Put on a mask.
3. Wash your hands with soap and water.
4. Use 1 alcohol pad and rub for 1 minute to clean the end of the port.
5. Lock the new cap on, and twist it on tightly.

UNIVERSITY OF WASHINGTON
MEDICAL CENTER
UW Medicine

**4-Southeast Transplant
Surgery/Renal Medicine**

Box 356086

1959 N.E. Pacific St. Seattle, WA 98195
206-598-4400