Preparation for the insertion of your Tenckhoff catheter
Information for patients and their families

What is a Tenckhoff catheter?
The Tenckhoff catheter is a long, narrow tube inserted into your peritoneal cavity. The peritoneal cavity is the space in your body that contains your stomach, bowel, liver, bladder etc. It is covered by a membrane that holds all the organs in place—the peritoneal membrane.

Principle of peritoneal dialysis

Once inserted the catheter lies between the organs. The tip of the catheter sits low in your pelvis between the bladder and the lower part of your bowel.

Preparing for the insertion of your Tenckhoff catheter
To ensure that your Tenckhoff catheter is inserted without a problem, a number of steps need to be followed prior to your operation and afterward.

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1. Catheter marking

- The catheter placement mark is a guide for the surgeons who are inserting your catheter.
- To ensure your catheter is placed appropriately, an experienced nurse will mark an appropriate site on your abdomen with a marking pen.
- To avoid potential irritation, the catheter should not be placed where your pants/shirt waistband lies. Please advise the nurse of where this is.
- Please let the nursing staff know if you have had any previous abdominal surgery or hernias.

2. Bowel preparation

For successful outcomes your bowels must be opened well prior to catheter insertion. You will be given a prescription for ColonLYTELY® to aid you to have a significant motion the day prior to surgery.

You will begin preparation for this the afternoon before surgery. You will need to prepare the ColonLYTELY®:

- mix one sachet of ColonLYTELY® in one litre of water
- refrigerate
- drink the litre over one, to one and half hours.

Some helpful hints:

- Add cordial to the ColonLYTELY®.
- Drink the solution through a straw.
- If you feel nauseated while taking the preparation stop for 1.5 hours, have a hot drink (e.g. peppermint tea), walk around. Resume drinking and continue as before.
- If you feel bloated, try walking around, suck some peppermints/drink peppermint tea.

3. Day of surgery

On the day of your operation:

- Attend the elective admissions department at the time specified to you.
- You will need to fast before your operation. Follow the instructions given to you at pre-admission clinic.
- If medically required some people stay in hospital for 24 hours. After review by your doctor and the peritoneal dialysis nurse you will be discharged home.
- On discharge an appointment will be booked for you to be reviewed in the Peritoneal Dialysis Unit seven days after your operation.

4. Ongoing follow-up care

Post operative instruction

Your dressing should remain undisturbed and intact for seven days after the operation. You are not to get it wet. It is preferable you do not shower; sponge baths only. Extra dressings will be given to you on discharge; these are to reinforce your dressing if it comes loose.

Never remove the dressing; simply apply more over the original dressing if it is needed. At your day seven appointment the peritoneal dialysis nurse will change the dressing and assess your catheter exit site. A new dressing is applied and this is to stay intact and dry for a further seven days. At your day 14 appointment the exit site will be reviewed again by the peritoneal dialysis nurse. You will be taught how to care for your catheter with daily shower and dressings. You will be given the supplies to do these dressings.

If at any stage during the 14 days after your operation your dressing becomes soiled, lifts off or becomes wet; you must immediately return to the peritoneal dialysis unit for a change of dressing.

To ensure that your wound heals properly

Do not pick up anything heavier than a three litre bottle of milk. Avoid abdominal strain e.g. straining to move your bowels. Before you get out of bed in the morning, lift your knees, roll towards the edge of the bed, swing your legs over and stand up. This puts less strain on your abdomen.

It is important that your bowels move regularly—an average of two to three soft movements a day is preferable. Start your individual bowel management plan on discharge, as discussed with your peritoneal dialysis nurse.

Exit site care

At day 14, if your ext site is healed, you will be taught how to properly care for the exit site. After one month the peritoneal dialysis nurse will flush one litre of warmed fluid in and out then lock off the Tenckhoff with heparin to stop it from blocking. This will be done on a monthly basis until you start dialysis.

Once your exit site is fully healed

You are able to go swimming in your own pool that has been well chlorinated, not in public pools. If you would like to go swimming please consult your peritoneal dialysis nurse who can provide appropriate covering and advice to ensure your catheter remains protected. It is preferable you do not have a bath.