Your peritoneal dialysis (PD) training guide

This training guide is for people who have chosen PD as a treatment option, and it should be used as a basis for your PD training. It should be used together with the support, education and information given to you by the PD team.

You should have already been given our leaflet, *A guide to peritoneal dialysis* which explains about the different types of peritoneal dialysis, how they work and how you can fit the treatment into your lifestyle. If you do not have a copy of this leaflet, please speak to a member of staff caring for you or see the contact details at the end of this leaflet.

We will also give you:

- a copy of the PD procedure
- a competency-based training record
- peritoneal equilibration test (PET) and adequacy test information

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Hand washing

Effective hand washing is one of the most important ways of preventing infection.

**When should I wash my hands?**

You should wash your hands:

- before each fluid exchange
- before performing exit site care.

Before washing your hands please remember to:

- assemble all equipment and remove the catheter from clothing
- remove all watches and bracelets.

**What is the most effective method of hand washing?**

The most effective method of hand washing is to:

- apply liquid cleansing solution to wet hands
- follow the six steps on page 2
- dry them thoroughly with a disposable towel.

Remember to:

- apply moisturiser regularly to prevent chapped skin
- keep your fingernails clean and short.
Effective hand washing

Step one
Rub hands palm to palm.

Step two
Rub the right palm over the back of the left hand. Change hands and repeat.

Step three
Rub palm together with fingers interlaced.

Step four
Backs of fingers to opposing palm with fingers interlocked. Change hands and repeat.

Step five
Work into left thumb with right hand. Change hands and repeat.

Step six
Rotational rubbing, backward and forward with clasped fingers of right hand in left palm. Change hands and repeat.

'Clean Your Hands' photographs courtesy of Nottingham University Hospitals NHS Trust. © 2009.

General hygiene tips
The catheter in the abdomen is a potential source of infection, so the success of your PD depends very much on cleanliness. You will be taught the correct way to carry out a fluid
exchange and care for your catheter during your training. Please follow this routine strictly when you return home and do not be tempted to cut corners.

To reduce the infection risk we advise the following:
- make sure long hair is tied back and that any loose or flowing items of clothing are securely fastened or removed
- make sure you are not disturbed during the procedure and that pets are out of the way
- windows should be shut for the exchange procedure and fans turned off
- if you plan to do an exchange at work, talk to your employer in advance to arrange a suitable environment
- if you are not sure where to do your exchange, please ask us.

Only people who have been trained should do the exchanges. If you are unable to do the exchange for any reason, contact the PD team.

**Peritonitis**
Peritonitis is an infection of the peritoneal membrane (the lining of your abdomen). The most common signs of peritonitis are:
- cloudy drainage fluid
- abdominal pain
- temperature above 37C.

Occasionally people experience shoulder pain, feeling sick and vomiting.

**Cause**
The most common cause of peritonitis is the accidental introduction of germs during the fluid exchange procedure.

**Treatment**
Contact us immediately if you think you have peritonitis, and be prepared to come to hospital for assessment and treatment.

If possible, please save the first cloudy bag and bring it to the hospital with you.

If you are very unwell, go to your local Emergency Department (A&E). The staff there will seek advice from our doctors.

Peritonitis can usually be treated successfully with antibiotics but sometimes people need to be admitted to hospital for treatment. If the infection is very severe, peritoneal dialysis may be stopped and you will need to swap to haemodialysis. This may be temporary or permanent depending on the severity of the infection.

**Looking after your exit site**
The exit site is where the peritoneal catheter exits the body. It is another potential source of infection and should be thoroughly cleaned on alternate days or following a daily shower.
If you think you may have an exit site infection (shown by redness, soreness or discharge from around the catheter), contact the PD team. It may need to be treated with antibiotics. We will teach you how to dress your exit site during your training period.

The exit site dressing procedure is outlined below:

1. Collect supplies:
   - disinfection wipes
   - disinfection hand rub
   - self-adhesive dressing
   - tape to secure tube (if used)
   - clean scissors.
2. Tuck loose clothing away and make sure that the dressing site is accessible.
3. Wash and dry hands as advised on page 2.
4. Throw away the first wipe as it may not be clean.
5. Clean work surface with wipes. Wipe in one direction only.
6. Open dressing pack and place onto your newly cleaned work surface.
7. Remove old exit site dressing and observe dressing for signs of pus or wetness. The exit site should be clean and dry.
8. Apply hand rub solution to your hands.
9. Removing wipe from its canister, carefully fold it in half without touching the middle. Using the middle section of the wipe clean the skin close to the tube. Once this has been done, repeat four times using a new wipe each time. Only clean in one direction and only use each wipe for one sweep before throwing it away. Take one last wipe and clean along the catheter in an outward movement, taking care not to snag or pull the catheter too hard.
10. Apply a new dressing to the exit site – make sure that you do not touch the underside of the dressing. Make sure the catheter is lying comfortably before securing the dressing – this will avoid having to try and adjust it after you have finished.
11. Using either a second dressing or tape, secure the catheter firmly to skin.

If you notice any of the following, you should contact us immediately as you may have an infection requiring antibiotics:

- redness, pain or itching round the exit site
- bleeding, moisture or pus oozing from the exit site
- a discharge on the dressing when you remove it
- any unusual lumps or swelling under the skin near the tube.
**Fluid balance**
Most people on PD find that they gradually produce less urine as kidney function declines. PD will remove the excess fluid that your body does not need. We will ask you to weigh yourself each day, to monitor the amount of fluid in your body.

**Target weight**
We will advise you of your target weight – your weight when you are not fluid overloaded or dehydrated. Your weight should be close to this every day.

To monitor your weight please:
- check your weight daily, first thing in the morning (if you have PD fluid in, remember to subtract this volume).
- record your weight in the record book you have been given.

The amount of fluid removed during dialysis can be regulated by the type or ‘strength’ of the dialysis fluid used. The ‘stronger’ dialysis fluid has more sugar (glucose) in it which allows more fluid to be removed from your body.

We will advise you which ‘strength’ bags to use.

If you drink too much fluid, the extra fluid remains in the body. Your weight will go up and you may develop ankle swelling, breathlessness and high blood pressure.

Too much fluid is called fluid overload.

**Signs of fluid overload are:**
- increase in weight
- ankle swelling and breathlessness
- increase in blood pressure.

If your weight suddenly increases, it could be a sign of fluid overload. If your weight is going up slowly, you may be gaining flesh weight.

It is possible to become **dehydrated** if you do not drink enough, especially during hot weather when you sweat more.

**Signs of dehydration are:**
- thirst
- feeling dizzy or sick (or both) when you stand up
- rapid weight loss
- low blood pressure.

If your weight suddenly drops, it could be sign of dehydration. If your weight is dropping slowly, you may be losing flesh weight.

Please contact us for advice if your weight is changing.
How much fluid should I drink each day?
We will advise you how much fluid to drink daily so that your target weight can be maintained.

Restricting how much you drink can be challenging at first, but you will soon get used to it. Remember that some foods contain fluid, such as jelly, custard, gravy, ice cream, soup, yoghurt. Salty foods, for example soup, bacon or cheese, make you thirstier and are best avoided.

Some helpful tips to limit fluid intake:
- Limit yourself to small drinks at set times, for example with meals.
- Use a small cup, not a mug, or drink half a cup instead of a full cup.
- If you feel thirsty, rinse your mouth with water and spit it out.
- Suck a boiled sweet, or chew gum or ice cubes (ice cubes should be included in your fluid allowance).

Coming to clinic
You will need to come to clinic to see the PD nurses at least every 4-6 weeks for blood tests and assessment of your progress.

You will also be given an appointment to see the consultant. These clinics are held at Borough Kidney Treatment Centre (near Guy’s Hospital), Queen Mary’s Hospital, Sidcup, and Tunbridge Wells Kidney Treatment Centre. You can attend at whichever site is most convenient.

We will also arrange for you to have a routine PET and adequacy test to assess the efficiency of your PD, 6-8 weeks after starting PD.

What to do if…
Why is my PD fluid not draining out?
You probably have a blockage somewhere. Follow the guidelines below:
1. Make sure that the clamp on your catheter is open.
2. Check lines for twists and kinks.
3. Stand up or change your position.
4. Twist tubing tightly around your finger and then release.
5. If bag still refuses to drain out, please telephone the PD team.

Why is my PD fluid not draining in?
You probably have a blockage somewhere. Follow the guidelines below:
1. Make sure that the clamp on your catheter is open.
2. Squeeze bag firmly, check for air locks.
3. Stand up or change position.
4. Check for twists and kinks along the line.
5. Change bag for a fresh one.
6. If fluid still does not drain in or is taking longer than usual, phone the PD team for advice.

I can see white ‘bits’ in the fluid – what is that?
It may be fibrin. Fibrin is a substance that we all have in our blood. It helps us to stop bleeding when we cut ourselves. Fibrin in your dialysis drainage fluid may look like little strands of egg white or jellyfish. It is nothing to worry about, but if it is affecting the fluid draining out, please phone us for advice.
I can see blood in the dialysis fluid – is this normal?
Blood in the dialysis fluid may make the bag pink or it may be more obviously red due to a large amount of blood. In general, blood in the drained dialysis fluid is nothing to worry about. However, if the bag remains bloody for more than 24 hours or is accompanied by pain, or you are worried, please phone us.

Blood in the dialysis fluid can be caused by:
- heating the bags too much – this may cause a small blood vessel to burst in the abdomen, leaking blood into the dialysis fluid
- trauma, if you should pull your catheter or tube by accident
- heavy lifting or strenuous work, for example, gardening.

Women who still have periods may notice blood in their drained dialysis fluid a few days before their period is due.

Diabetic patients are often prone to fragile blood vessels and may find their bags sometimes take on a pink tinge because of this.

One of the new PD bags looks discoloured, is leaking or has passed its expiry date – what should I do?
If in doubt, do not use it. Phone us for advice and we can order a new supply, if necessary.

What do I do if I think I have contaminated (infected) my PD equipment?
Stop the procedure, close the clamps and use your emergency white clamp which you will be given during your training period. Contact us immediately and be prepared to come to hospital for advice and treatment.

These are some ways in which you could accidentally contaminate your PD equipment:
- by touching the end of the new PD bag
- by touching the ‘blue end’ of your catheter
- if the ‘blue end’ becomes disconnected
- if you notice a leak in the tubing.

Contact us
If you have any questions or concerns about PD training, please contact the PD team, t: 020 7188 5133, Monday to Friday, 9am-5pm. If the answerphone is in operation, please leave a message.

Contact Patience Ward, t: 020 7188 8838. If your query is urgent, please call Guy’s Hospital, t: 020 7188 7188 (ask for the PD nurse to be bleeped – bleep number 1053).

If you are very unwell, go to your local Emergency Department (A&E). The staff there will seek advice from our doctors. In case of an emergency, dial 999

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit w: www.guysandstthomas.nhs.uk/leaflets
Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
t: 020 7188 8748, Monday to Friday, 9am-5pm

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
t: 020 7188 8801 (PALS)  e: pals@gstt.nhs.uk
t: 020 7188 3514 (complaints)  e: complaints2@gstt.nhs.uk

Language and accessible support services
If you need an interpreter or information about your care in a different language or format, please get in touch.
t: 020 7188 8815  e: languagesupport@gstt.nhs.uk

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.
t: 111  w: 111.nhs.uk

NHS website
Online information and guidance on all aspects of health and healthcare, to help you take control of your health and wellbeing.
w: www.nhs.uk

Get involved and have your say: become a member of the Trust
Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, please get in touch.
t: 0800 731 0319  e: members@gstt.nhs.uk  w: www.guysandstthomas.nhs.uk/membership

Was this leaflet useful?
We want to make sure the information you receive is helpful to you. If you have any comments about this leaflet, we would be happy to hear from you, fill in our simple online form, w: www.guysandstthomas.nhs.uk/leaflets, or e: patientinformationteam@gstt.nhs.uk