Steps to take in emergency situations with your hemodialysis catheter:

If the dressing becomes non-intact (meaning it has lifted past the edge of the dressing into the clear center window of dressing):

→ Cover the site with tegaderm™ and contact the dialysis unit immediately.
→ If it is afterhours, page the on-call nephrologist. You will need to come in to have the dressing changed to reduce chances of infection.

If the tego cap comes off the catheter:

→ Cover the end of the catheter with an alcohol pad then wrap with sterile gauze and place tape around to hold in place. Call the Dialysis Unit or Nephrologist on call.
→ You may be advised to come to the ER so that the Dialysis nurse can draw blood cultures and begin antibiotics.

If the catheter gets pulled out: This is an emergency!

→ Apply pressure to the site with sterile gauze and call 911 immediately

Monitor for signs and symptoms of a potential catheter infection:

These symptoms include:

→ Temperature greater than 38 degrees Celsius (100.4 degrees Fahrenheit)
→ Rigors (Shaking/chills)
→ Unusual irritability
→ Low blood pressure
→ Unexplained high blood pressure
→ Soreness, redness, or drainage around the catheter site
If you suspect a catheter infection:

Call the dialysis unit. If it is afterhours, page the Nephrologist on call and go to the Emergency Room.

→ Pediatric Dialysis Unit: (734) 232-7373
→ Paging Operator: (734) 936-4000, ask to page the on-call Pediatric Nephrologist

Everyday care for your hemodialysis catheter

Dialysis staff are the only people who should access a hemodialysis catheter. It is to be used only for dialysis (not for blood draws or IV infusions that are not monitored by dialysis staff) unless it is a life-threatening emergency or explicitly authorized by your nephrologist.

• Treat your catheter with care.
  
  Avoid:
  
  o Twisting
  o Pulling
  o Getting it stuck on clothing
  o Moving it
  o Clamps or caps, etc.

Dressing care

→ Keep the catheter dressing clean and dry. Do not get the dressing wet or submerge in water (No swimming, hot tubs, or baths which submerge the catheter or lumens).

→ Showers are not recommended. Daily hygiene can be done as a sponge bath. Ensure the dressing, catheter, and chest are well covered with plastic wrap before the sponge bath. Avoid a direct stream of water on the chest.

→ When bathing, wash the upper portion of your chest with an antimicrobial pump soap. Do not use bar soap or refill antimicrobial pump bottle due to germs and bacteria growth.
→ Family members and the patient should always wash their hands:
  → Before touching the dressing or catheter
  → When entering and exiting the dialysis unit
→ Do not use lotion near the catheter dressing sites (lotion is colonized with your bacteria).
→ Change bed linens weekly and wear clean pajamas every night to reduce the risk of infection.
→ If the dressing becomes non-intact (meaning it has lifted past the edge of the dressing into the center clear window) follow the emergency instructions on page 1.
→ If the dressing begins to peel up at the edges only, you may reinforce it at home. Reinforce the edge with medical tape or tegaderm™ to prevent the dressing from becoming non-intact. Tell dialysis staff that you reinforced the dressing at your next visit so they can change it.
→ When applying new tegaderm™ to the lifted edge, trim the new tegaderm™ before applying it to the edge so it will not cover the clear window. If the clear center window is covered, the dressing loses its ability to breathe and will need to be changed.

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