

What happens after the procedure?

After the local anaesthetic has worn off you may feel a little discomfort around the dialysis catheter due to slight bruising. You will be offered painkilling medication.

Following a chest temporary dialysis catheter being inserted, you will have an X-ray to ensure the correct placement of the catheter.

Useful contact details

Ward 6B, Nephrology (Renal) Ward, Lister Hospital	01438 285063
Renal Liaison Department	01438 285643
Lister Haemodialysis Unit	01438 284152
St Albans Haemodialysis Unit	01727 897588
Luton & Dunstable Haemodialysis Unit	01582 497538
Bedford Renal Unit	01438 286750
Harlow Renal Unit	01279 278205
Home Therapies	01438 284100

Further information

www.nhs.uk
www.renal.org
www.kidney.org.uk

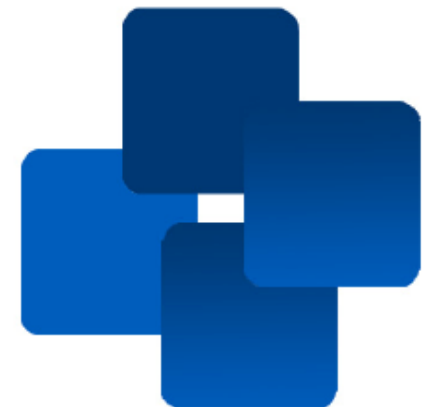
www.enherts-tr.nhs.uk

You can request this information in a different format or another language.

Patient Information

Temporary Renal Dialysis Catheter Insertion

Renal Department



This leaflet is intended to provide you with information regarding the insertion of your temporary renal dialysis catheter (RDC).

What is a temporary renal dialysis catheter and why do I need it?

A temporary renal dialysis catheter involves inserting a small tube into a vein in your neck or groin as a short-term measure, or if haemodialysis is suddenly needed due to a medical emergency. Normally this line is a short-term option (for 5 to 7 days) until a decision is made about final dialysis access or until your kidney function recovers.

Where is it done?

The temporary renal dialysis catheter insertion will usually be carried out at the Lister Hospital in the minor procedures room on 6B. It takes approximately 30 minutes to perform and will be done under a local anaesthetic.

How is the procedure performed?

Before the catheter is inserted you will be asked to have a wash with an antibacterial soap (used as a preventive for infection) and to change into a hospital gown and cap. You will then be wheeled on your bed to the minor procedure room and will stay on your bed throughout the procedure.

Once in the minor procedure room you will be connected to a cardiac monitor and blood pressure machine so that you can be monitored continuously throughout the temporary catheter insertion. Once the site for the catheter insertion is exposed the doctor will find and assess your vein using an ultrasound machine.

Your skin will be cleaned with an antiseptic solution and local anaesthetic injected into the insertion site. The local anaesthetic may sting for a few seconds but the insertion site will then go numb.

Insertion of the temporary renal dialysis catheter should not be painful, although you will feel some pushing and pressure as the catheter is being introduced. This is perfectly normal and does not usually cause significant discomfort to patients.

When the procedure is finished the catheter will be secured and stitched into position, and a protective dressing applied.

What complications might occur?

Having a temporary renal dialysis catheter is considered a safe procedure but, as with any medical intervention, complications can occur:

- The most common complication is bleeding from the small skin wound where the catheter comes out. This can be stopped by applying pressure to the area.
- Occasionally, an artery in the neck or groin may be injured whilst the catheter is being inserted (this occurs in up to 3 in 100 procedures). The injury is usually minor and any bleeding stopped by pressing on the side of the neck or groin. It is important that you tell your doctor or nurse if you have problems with easy bleeding or bruising, or if you are taking tablets that can affect bleeding, such as warfarin.
- It is possible to damage the lung on the side that the catheter is being inserted (from neck insertion only). If the lung is damaged, it may collapse making you breathless and cough. You may need another procedure (possibly insertion of a chest drain) to allow it to expand again.
- The temporary renal dialysis catheter insertion may be unsuccessful. This may be due to a blockage or narrowing of the vein, which is only detected during the procedure. If this occurs, the doctor performing the procedure will explain what can be done next.

The chance of experiencing one of these complications is small (less than 1 in every 100 lines inserted) and everything is done to minimise the risk of a complication. However, although any complication is rare you should be aware that they could happen.

The doctor will talk to you about these complications before you sign the consent form.