

Procedure Information Sheet – Implantation of Tenckhoff Catheter

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No. :	

1. Introduction

- 1.1. Renal patients who are to receive peritoneal dialysis will have to undergo an operation for the insertion of a special catheter into the abdominal cavity. The catheter will be the access for infusion and drainage of peritoneal dialysis fluid.

2. Procedural Preparation

- 2.1. Patient has to sign the Surgical Consent Form after the physician has explained to him/her about the reasons, procedures and possible complications of the surgery.
- 2.2. Enema will be performed on the patient, if necessary to clear the large bowel.
- 2.3. Body cleaning before the procedure: day hospital patients can do the bathing at home.
- 2.4. A 4-hour fasting period is required before surgery.
- 2.5. Diabetes patients shall withhold the anti-diabetic medications upon fasting as prescribed.
- 2.6. Medications for control of blood pressure should be taken as advised.
- 2.7. Aspirin and anti-platelet agents may need to be withheld before the surgery as prescribed.
- 2.8. Empty bladder before the procedure.

3. Procedure

- 3.1. The physician will inject a local anaesthetic to the skin below the umbilicus and a 5cm long incision will be made until peritoneum comes into view. Then one end of the catheter will be inserted into the abdominal cavity while the other end will go through the subcutaneous fat and out of the body, 5-6cm away from the incision. The incision will be closed with suturing.
- 3.2. The whole procedure lasts for about 1 hour and the patient remains conscious throughout. Patient may also choose monitored anaesthetic care or general anaesthesia during the operation. In such case, patient will sleep throughout the procedure.

4. Risk and Complication

- 4.1. Leakage of dialysate from exit site (12%)
- 4.2. Infection (7%)
- 4.3. Bleeding (5%)
- 4.4. Intestinal perforation (0.5-3.5%)
- 4.5. Other possible complications: post-surgery incisional pain, perforation of other organs (e.g. bladder and blood vessels), peritonitis, internal bleeding, catheter migration or blockage and the development of incisional hernia etc.
- 4.6. Should there be complications, the procedure may be interrupted and patient may have to undergo other investigations or surgery including catheter removal. When the patient's condition has stabilized, placement of catheter may be done again.

5. After the Procedure

- 5.1. The incision will be covered with sterile gauze. The patient has to keep the wound clean and dry.
- 5.2. Resume aspirin and anti-platelet agents as prescribed.
- 5.3. If patient feels unwell, he/she should inform the medical staff immediately.

6. Follow Up

- 6.1. If the wound heals normally, sutures will be removed in 14 days.
- 6.2. To avoid infection, keep the exit site and main wound dry and clean. Do not scratch the exit site and surrounding skin. After wound healing 4-6 weeks, patients may take shower at home after learning the techniques.

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- 6.3. Training on how to perform peritoneal dialysis, care of catheter and the exit site usually can be conducted 4 - 6 weeks later at patient's own renal center. Upon successful training, peritoneal dialysis can be conducted at home.
- 6.4. The patient may have to undergo peritoneal dialysis or hemodialysis treatment while waiting for the training.
- 6.5. Patient should take good care of catheter and the exit site.

7. Remarks

- 7.1. This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information, please contact your doctor or the respective renal centre.

8. References

- 8.1. Hospital Authority. Smart Patient Website.
- 8.2. Nephrology Manual. Department of Medicine, University of Hong Kong; Queen Mary Hospital and Tung Wah Hospital.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name:

Date: _____

