



# Insertion of a tunnelled indwelling peritoneal catheter

Department of Radiology

Information for Patients



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#### Introduction

This leaflet is about insertion of a tunnelled indwelling peritoneal drain/ catheter (referred to in this leaflet as a 'peritoneal catheter'). This is a small tube inserted into your abdomen.

It contains an explanation of how the procedure is carried out and what the possible risks are. This will help you to decide whether or not to go ahead with the procedure.

#### Referral and consent

The doctor who referred you should have discussed the reasons for needing a peritoneal catheter. You should make sure that you understand these reasons, how the procedure is performed, any risks involved and the success rates.

The consultant or the radiologist (a specialised X-ray doctor) who will be performing the procedure will ask you to sign a consent form. When you sign this it means you have agreed to have a peritoneal catheter inserted and that you understand why it is needed. You will have a copy of the consent form to take away.

If after discussion with your hospital doctor or radiologist you do not want the procedure carried out, then you can decide against it.

If the radiologist feels that your condition has changed or that your symptoms do not indicate the procedure is necessary then he/she will explain this to you. The radiologist will let the doctor who referred you know so that they can see you again to review your condition. At all times the radiologist and referring doctor will be acting in your best interests.

#### What is a tunnelled indwelling peritoneal catheter?

A tunnelled indwelling peritoneal catheter /drain is a specially designed small tube put into your abdomen to drain fluid more easily as and when necessary. The catheter goes through a 'tunnel' in your skin and is designed to remain in place over a long period of time.

The length of time you will have your peritoneal catheter will depend on your individual circumstances.

A peritoneal catheter is a soft flexible tube the size of a pencil that is tunnelled under the skin. There is a valve on the outer end of the peritoneal catheter to prevent fluid leaking out it.

#### Why do I need this procedure?

If you have fluid in your abdomen it may cause increasing discomfort, swelling or pain.

This procedure avoids the need for repeated hospital admissions, painful injections and tubes every time the fluid needs to be drained. This helps to maintain or improve your quality of life. The drainage can be performed either by you, your carer or by a district nurse - whichever is easier for you.

#### Do I need to take my normal medicines?

If you are on medication from your doctor please continue to take it as normal, with the exception of medication that thins the blood.

If you are taking medication that thins the blood please contact the Radiology Department for advice. These drugs include warfarin and clopidogrel (Plavix®).

If you are taking Aspirin the referring Consultant or Radiologist will decide if it needs to be stopped.

#### Information for patients with diabetes

If you are a patient with diabetes please contact your normal diabetes care provider as soon as you receive this appointment to discuss any changes to your diet or medication.

If you have diabetes you should have received a morning appointment. If you have not, please contact the Radiology Department. It may be that we are not aware that you are diabetic. Bring your medication with you to the hospital.

When you arrive in the hospital please tell the doctor who is doing the procedure that you are diabetic.

#### How do I prepare for the procedure?

**Do not eat for six hours before** insertion of your peritoneal catheter, though you are allowed to drink water until 2 hours before the procedure.

You will be asked to put on a hospital gown.

# What happens during the procedure?

The peritoneal catheter will be inserted in the Radiology Department in an ultrasound room.

You will be asked to lie on the ultrasound scanning table in the position that the radiologist has decided is most suitable. It is important that you stay very still in this position until the procedure is over. If you are uncomfortable please let the doctor know.

Everything will be kept sterile and the radiologist will wear sterile gloves and gown. Your skin will be cleaned with antiseptic and you will have some of your body covered with a sterile sheet.

An ultrasound machine will be used to decide on the best place for inserting your peritoneal catheter. The radiologist will look at the images while carrying out the procedure to make sure that the peritoneal catheter is placed as accurately as possible.

Your skin and the surrounding tissue will then be numbed with local anaesthetic. A cut will be made in your skin at two points and a stiff plastic guide will be used to insert the catheter through the cuts.

Then a guide wire will be inserted into the abdomen. This will guide the peritoneal catheter into the correct position inside the abdomen.

The first part of the procedure when the equipment is being prepared may seem to take a long time, but this is normal.

When your peritoneal catheter is in the correct place one to two stitches will be made around the area of the skin cuts to keep it in securely. A dressing is then applied. These stitches are usually taken out in five to seven days by the district nurse. This is usually a painless procedure.

#### Will it hurt?

You may feel some pain or discomfort. When the local anaesthetic is injected it will sting to start with, but this soon wears off and the skin and deeper tissues should then feel numb.

Later you may be aware of a pushing sensation as the peritoneal catheter is positioned, but this is generally done quickly so that it does not cause much discomfort.

If the procedure does become painful you should tell the person performing the procedure, as you may be able to have some more local anaesthetic.

#### What happens after the procedure?

You will be taken back to your ward or hospice. Nurses will check your pulse, blood pressure and temperature to make sure there are no problems. The local anaesthetic starts to wear off in 2 to 3 hours. If any pain remains, taking a mild painkiller should be sufficient. However, if discomfort increases contact your GP or district nurse.

You will have either a bag or drainage bottle attached to your peritoneal catheter whilst fluid is being drained. Once most of the fluid is drained nursing staff will show you or your carer how to carry out the procedure. If necessary, arrangements can be made for the district nurse to drain the fluid when you are at home.

You will not be sent home until it is considered safe to do so.

Do not drive yourself home after the procedure. You should have somebody stay with you for the next 24 hours.

# Are there any risks?

As with any procedure or operation, complications are possible. However, these are infrequent. We have included the most common risks in this leaflet. Risks vary for each patient and they will be discussed with you before you sign the consent form.

#### The risks are as follows:

- **Soreness and bruising** where your peritoneal catheter goes into your abdomen.
- Infection. This may require antibiotics or rarely catheter removal.
- **Leakage of fluid** where your peritoneal catheter is channelled under your skin.
- Skin irritation.
- Your peritoneal catheter may become dislodged or blocked and may need repositioning or replacing.
- Injury to adjacent areas during insertion. This is very rare.
- · Discomfort during fluid removal.

Despite these possible complications, peritoneal catheter insertion is normally very safe and can prevent repeated admission to hospital.

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At all times during and after the procedure the staff will be monitoring your responses to this treatment in order to minimise the effects of any complications.

If you suspect or experience any of the above symptoms after your discharge from hospital please contact your district nurse or your GP.

#### What if I need to talk to someone after the procedure?

If you have any problems after the procedure please speak to the staff on the ward.

If you have any problems relating to your peritoneal catheter once you have left hospital, please contact your GP or your district nurse for advice.

#### Are all peritoneal catheter insertions successful?

Most peritoneal catheter /drain insertion procedures are successful.

## Discharge / follow-up advice

You will receive training on the correct drainage procedure while you are in the hospital or hospice, or from your district nurse. You will be provided with a booklet containing detailed information regarding the care of the drainage kit, including useful contact numbers.

If you have any questions please ask the Ward staff or, following discharge, your district nurse or GP.

## Support for people with learning difficulties

There is support available in our hospitals for patients with learning disabilities. Please contact the learning disability specialist nursing team on (0116) 250 2809 telling them when the appointment is and what examination has been booked.

# Additional hospital information

#### Relatives and escorts

You may wish to bring a friend or relative to accompany you to and from the Radiology Department when you have your examination although they may not always be allowed into the examination room. This may be useful if you do not understand English very well or if you have any special needs.

#### Children

Baby changing facilities are available. Please ask to be shown to them if you wish to use them.

We are unable to offer childcare facilities. If you need to bring your children with you, please bring along an adult who can supervise them whilst your examination is being carried out. Radiology staff are not able to supervise your children.

#### Facilities available:

Refreshments: Refreshments including hot and cold drinks are available in the hospital. Please ask a member of staff for directions.

Shops: Each hospital contains a shop selling magazines, newspapers, sweets and drinks. Please ask a member of staff for directions

## **Additional information**

#### How was it for you?

If you wish to make any comments or suggestions regarding your visit to the Radiology Department please fill in a suggestion form or speak to a member of staff. Suggestion forms are located in all waiting areas within the department.

University Hospitals of Leicester NHS Trust also has a Patient Information and Liaison Service (PILS), and you are welcome to contact them on:

Freephone: 08081 788337

email: pils.complaints.compliments@uhl-tr.nhs.uk

#### Other sources of information

#### Websites:

For general information about radiology departments visit the **Royal College of Radiologists website**: www.goingfora.com

For information about the effects of x-rays read the NRPB publication: 'X-rays how safe are they', on the **Health Protection Agency website:** www.HPA.org.uk

Please note that the views expressed in these websites, do not necessarily reflect the views of UHL or the NHS.

#### **University Hospitals of Leicester website:**

www.leicestershospitals.nhs.uk

**NHS Direct:** For health advice or information you can call NHS on: 111.

#### **Directions and car parking**

For information about getting to the hospital please see the hospitals website:



www.leicestershospitals.nhs.uk/patients/getting-to-hospital

Hospital car parking is available to all hospital patients and visitors. Spaces are limited so please allow plenty of time to find a car parking space. Parking charges are payable, please check tariff boards or the hospital website for full details. As well as the hourly rates there are a range of saver tickets available for patients and prime carers. Dedicated disabled parking bays are also available.

Marked disabled bays exist outside of the public car parks for which there is no charge. If you park in the car parks the fee will apply.

Drop off bays exist at the main entrances, these bays have a 20 minutes maximum stay.

Certain qualifying benefits as notified by the Department of Social Security entitle the patient to free or reduced parking. For more information contact the Cashiers office.

#### Bus services to the hospital

For information on bus routes and times contact Traveline on 0871 200 2233.

The hospital Hopper service runs from Monday to Friday, every 30 min from 06:30 hours until 18:00 hours and every hour from 18:00 hours until 21:00 hours. The Hopper stops at our three hospital sites, as well as other key locations such as Leicester train station, Beaumont Leys centre and Hamilton centre and also St Nicholas circle.

For more information about the hospital hopper service and to view a timetable, please see the hospitals website:

www.leicestershospitals.nhs.uk/patients/getting-to-hospital/bustravel/hospital-hopper-bus/



We review our information leaflets on a regular basis. If you have any comments about how we can improve these leaflets please speak to a member of staff.

# Any questions? If you have any questions, write them down here to remind you what to ask when you speak to your nurse/consultant.

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#### Today's research is tomorrow's care

We all benefit from research. Leicester's Hospitals is a research active Trust so you may find that research is happening when you visit the hospital or your clinic.

If you are interested in finding out how you can become involved in a clinical trial or to find out more about taking part in research, please speak to your clinician or GP, or call 0116 258 8351.

# If you would like this information in another language or format, please contact the service equality manager on 0116 250 2959

إذا كنت ترغب في الحصول على هذه المعلومات في شكل أو لغة أخرى ، يرجى الاتصال مع مدير الخدمة للمساواة في 2959 255 0116.

আপনি যদি এই লিফলেটের অনুবাদ - লিখিত বা অভিও টেপ'এ চান, তাহলে অনুগ্রহ করে সার্ভিস্ ইকুরালিটি ম্যানেজার ডেভ বেকার'এর সাথে 0116 250 2959 নাম্বারে যোগাযোগ করুন।

如果您想用另一种语言或格式来显示本资讯,请致电 0116 250 2959 联系"服务平等化经理" (Service Equality Manager)。

જો તમને આ પત્રઇકાનું લેખિત અથવા ટેઈપ ઉપર ભાષાંતર જોઈતુ હોય તો મહેરબાની કરી સર્વિસ ઈક્વાલિટી મેનેજરનો 0116 250 2959 ઉપર સંપર્ક કરો.

यदि आप को इस लीफलिट का लिखती या टेप पर अनुवाद चाहिए तो कृपया डेब बेकर, सर्विस ईक्वालिटी मेनेजर से 0116 250 2959 पर सम्पर्क कीजिए।

Jeżeli chcieliby Państwo otrzymać niniejsze informacje w tłumaczeniu na inny język lub w innym formacie, prosimy skontaktować się z Menedżerem ds. równości w dostępie do usług (Service Equality Manager) pod numerem telefonu 0116 250 2959.

ਜੇਕਰ ਤੁਹਾਨੂੰ ਇਸ ਲੀਫਲਿਟ ਦਾ ਲਿਖਤੀ ਜਾਂ ਟੇਪ ਕੀਤਾ ਅਨੁਵਾਦ ਚਾਹੀਦਾ ਹੋਵੇ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਡੈਬ ਬੇਕਰ, ਸਰਵਿਸ ਇਕਆਲਿਟੀ ਮੈਨੇਜਰ ਨਾਲ 0116 250 2959 'ਤੇ ਸੰਪਰਕ ਕਰੋ।

Ak by ste chceli dostat túto informáciu v inom jazyku, alebo formáte, kontaktujte prosím manažéra rovnosti sluzieb na tel. čísle 0116 250 2959.

Haddaad rabto warqadan oo turjuman oo ku duuban cajalad ama qoraal ah fadlan la xiriir, Maamulaha Adeegga Sinaanta 0116 250 2959.

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