

Surgical removal of CAPD catheter

Introduction

This information is intended to assist you and your family prior to your admission for removal of your CAPD (Tenckhoff) catheter. This will take place on the Adult Day Surgery Unit (Level 3 South Block) at the Royal Berkshire Hospital. If you require further information or have any questions, please do not hesitate to contact the nursing staff on 0118 322 8555.

In the lead up to the procedure you will have been seen for a pre-op general anaesthetic (GA) assessment, where you will have been deemed fit for a GA. You will be given advice at this assessment regarding your medications leading up to CAPD catheter removal (Aspirin, Warfarin, Clopidogril and diabetes medications).

- Skin swabs will be taken to detect *Staphylococcus aureus*, which is a naturally occurring bacterium that lives on the skin. It is present in approximately 30% of the population; if the swabs are positive you will be prescribed a nasal cream and antibacterial wash for 5 days leading up to catheter insertion.
- A few days before procedure, you will be asked to have the following:
 - Blood tests
 - Physical assessment by a renal doctor to check your general health.

On the day of the procedure

- You must not have anything to eat or drink from _____ am.
- You may however take your essential tablets with a very small amount of water up to 6am.
- The nurses will advise you which tablets you can take when you come for your pre-operative assessment.
- On admission to hospital you will have a cannula (a fine tube) usually inserted into the back of your hand, through which you will be given a dose of antibiotics.

Removing the catheter

The procedure will be carried out under general anaesthetic. This means you will be asleep throughout the procedure and wake up in the recovery room. The Tenckhoff catheter is removed from the peritoneal cavity by making a small incision (about 5cm) in the middle of your abdomen.

After the procedure, you will return to the ward where your blood pressure and pulse will be taken regularly and the wound and exit site observed. Depending on the operation time some patients will be discharged 6 hours post-operatively, usually early evening, others will require

an overnight stay.

Side effects

There may be some temporary bruising and a small amount of bleeding from the wounds.

Wound care and pain relief

You will have two wounds with dissolvable stitches, the exit site and the incision site where the catheter was removed. The wounds will be checked before you leave hospital.

We do not routinely provide painkillers to take home. We would recommend that you make sure you have a supply of *Paracetamol*, which can be taken as directed on the packet. We generally recommend that any renal patient avoid anti-inflammatory drugs (e.g. *Brufen*, *Ibuprofen* and *Nurofen*) as this group of drugs can be damaging to remaining kidney function.

Driving

You should not drive for at least 2 weeks while the wound is still healing and it is advisable to check with your motor insurance before resuming driving.

Getting back to work

Ideally, it is best if you rest for 2-4 days before resuming your usual daily activities. How you feel is very individual and we recognise the fact that some people require more time to recover than others. You are the best judge on how you feel.

If you have further questions following this information handout, please do not hesitate to ask the CAPD or ADSU staff.

Department of Renal Medicine (Albert Ward)

Telephone: 0118 322 8555

Fax: 0118 322 8771

Out of Hours/ Bank Holidays – Victoria Renal Ward 0118 322 7476

Adult Day Surgery Unit (ADSU)

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Opening hours are 7.30am to 10.00pm Monday-Friday, 7.30am to 4.00pm Saturday.

This document can be made available in other languages and formats upon request.

Written by Renal Unit, June 2005

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