
CCTC Checklist: De-accessing Double Lumen Dialysis Catheter**Standard Met**

1. Perform risk assessment, performs hand hygiene and dons appropriate PPE.

2. Inspect RETURN line for signs of clotting. Stop the machine and follow instructions to “End Treatment” & “Return Blood” **if the filter has not clotted**
 - Skip the screen directing you to “hang a bag of sterile saline on the priming hook, clamp the access line, disconnect the line from patient, connect access line to saline and unclamp access line” because you already have the bag of saline attached to your ACCESS line as a flush.
 - Ensure roller clamp on saline line is open
 - Briefly turn stopcock off to the machine and allow a few mls of saline to flush the ACCESS limb.
 - Turn stopcock “off” to ACCESS limb for saline to flush towards the machine.
 - Choose “auto-return” from the PrismaFlex™ screen
 - Watch for the filter and RETURN line to clear. If additional flushing is required, use the manual return key (must be held)
 - Clamp the ACCESS and RETURN limbs of dialysis catheter once blood return is completed

3. Remove gloves and performs hand hygiene. Prepare Equipment and perform steps for ACCESSING a Double Lumen Dialysis Catheter. Prepare dressing tray and equipment:
 - Place sterile 4x4 gauze and chlorhexidine 2% wipes (without alcohol) in the tray
 - Open 4x 10ml saline syringes and place onto sterile field
 - **Open 2x 4% Citrate syringes** and place onto sterile field
 - Two Dead End Red caps place on sterile field
 - Take sterile towel and place underneath the dialysis limbs
 - Place yellow biohazardous bin close to bedside

4. Performs hand hygiene and don non-sterile gloves. Take sterile 4x4 gauze with your non-dominant hand and grip the catheter while lifting/leaving limbs and ends exposed. Ensure clamps are CLOSED and disconnect the circuit from each limb-taking care to prevent blood exposure.

5. Use your dominant hand and pick up one Chlorhexidine wipe to scrub the catheter end, external limb and clamp of ACCESS lumen for 15 seconds. Uses vigorous up and down/side-to-side motion. Use second swab if required.

6. Repeat Step 5 on RETURN Limb. Continue to hold in place to allow adequate drying time.

7. Attach 10ml syringe, open ACCESS clamp, check for clots and then flush limb with 10ml saline, using the stop/start technique. Repeat with second flush if flow is sluggish.

8. Leave flush syringe attached and clamp ACCESS limb

9. Repeat steps 7 & 8 on RETURN limb

10. Lock ACCESS limb with 4% Citrate volume equal to the limb volume PLUS 0.1ml, clamp and apply dead end cap.

11. Repeat step 10 for RETURN limb

12. Remove citrate syringes, wrap the ends of the limbs with gauze & gauzenet and add a medication sticker to identify citrate solution insitu.

13. Ensure both limbs are clamped.

14. Follow the on screen disconnection instructions for the PrismaFlex™ machine. Dispose of set and any other supplies with blood exposure in the yellow biohazardous waste bins.

15. Remove PPE and perform hand hygiene. Document if patient was able to be re-transfused or lost blood volume (circuit is ~270mls) due to clotting. Record large volume flushes given.

Name of Nurse: _____ Date: _____

Name of Observer: _____ Signature: _____