

**ISSUED BY:** Nephrology Service  
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**CATEGORY:** Nephrology Procedure  
**SUBJECT:** **PERITONEAL DIALYSIS: CAPD and CYCLER**  
**TENCKHOFF TUBE DRESSING CHANGE**

**REVISION DATE:** February, 2006-R  
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## **POLICY:**

To change the Tenckhoff Tube dressing for a patient who is unable to have a daily shower (change weekly and as necessary), or post-operatively following a Tenckhoff Tube insertion. The initial post-operative dressing is to be changed when ordered by the surgeon and then subsequent dressings are to be done weekly and as necessary.

## **SUPPLIES:**

- 2 - Chlorhexidine swabsticks
- Clean gloves
- 2 - Masks
- Tegaderm dressing (routine dressing) or Mepore if patient can not use Tegaderm
- Antibiotic ointment if ordered
- 2 - Sterile cotton tip applicators (Q -Tips), if antibiotic ointment ordered
- 1 - Charcoal culture tube, if a swab is required plus requisition plus zip lock bag
- Normal Saline dated and spiked bag, if a culture swab is necessary
- 1 - Package of sterile 4" x 4" gauze, if a culture swab is required
- 1 - Package of skin barrier if applicable
- Immobilizer catheter stabilization device or peritoneal belt

## **METHOD:**

1. Mask nurse and patient.
2. Apply gloves.
3. Remove the old dressing and assess the exit site for any signs of infection (redness, drainage, pain at the site). If any signs of infection take a swab from the exit site by:
  - Gently lift the Tenckhoff Tube up, so it will be off the skin at the exit site to allow for cleaning completely around the area
  - Using a soaked normal saline sterile 4" x 4" gauze, thoroughly rinse by starting at the exit site spiraling outward in a circular motion
  - Do not culture pus or exudate
  - While still holding the Tenckhoff Tube up off the skin, carefully remove the applicator from the charcoal culture tube and obtain a sample by rotating (diagram A) the swab around the exit site (spiraling completely around the exit site). Be careful not to touch the applicator to the Tenckhoff Tube while obtaining the sample
  - Without touching the tip of the applicator to any other surface, insert back into the charcoal culture tube
  - Inform the Nephrologist on rounds of the condition of the exit site and that a swab was obtained
4. Palpate the Tenckhoff Tube tunnel to check for tenderness.

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5. Prepare the Chlorhexidine swabsticks by tearing open (where indicated) both packages. Take one of the sticks out of the package keeping the swab end sterile.
6. Gently lift the Tenckhoff Tube up, so it will be off the skin at the exit site to allow for cleaning completely around the area.
7. Using the first Chlorhexidine swabstick, cleanse the abdomen starting at the exit site and spiraling outward.
8. While still holding the Tenckhoff Tube up off the skin, carefully remove the second swabstick from the package and repeat the above cleansing.
9. Allow to air dry for a minimum of thirty (30) seconds.
10. If using skin barrier apply as follows:
  - Prepare the skin barrier package by tearing open (where indicated). Remove the pad from the package by holding on to a corner of the pad, do not touch the part that will be used on the skin as pad is sterile
  - Gently lift the Tenckhoff Tube up, so it will be off the skin at the exit site to allow for applying completely around the area
  - Using the skin barrier pad, wipe the abdomen by starting at the exit site (pad is sterile) and spiraling outward over the whole area that the dressing will cover
  - Allow to air dry completely
11. If an antibiotic ointment is ordered:
  - Remove one of the sterile cotton applicators (Q -Tip) from the package, being careful not to touch the sterile cotton end to any other surface
  - Apply a generous amount of the ointment to the sterile cotton end of the applicator (Q -Tip)
  - Gently lift the Tenckhoff Tube up, so it will be off the skin at the exit site
  - Apply the ointment to the exit site under the Tenckhoff Tube
  - Using the second sterile cotton applicator (Q -Tip) do the same for the exit site on top of the Tenckhoff Tube. This will ensure that the ointment will cover the exit site completely.
12. Apply the dressing:
  - Using a pre-split tegaderm dressing, apply the dressing completely covering the exit site, with the split coming underneath the protruding Tenckhoff Tube
  - Using one of the steristrips that come with the tegaderm, apply under the Tenckhoff Tube close to the exit site. Apply the second strip on top of the Tenckhoff Tube close to the exit site to anchor the tube
  - If using a Mepore dressing, aseptically apply over the exit site and secure the Tenckhoff Tube
13. Remove gloves and mask.
14. Secure the catheter using an Immobilizer catheter stabilization device or peritoneal belt. See Nephrology procedure *Peritoneal Dialysis: CAPD and Cycler, Shower Procedure*.

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**DOCUMENTATION:**

Document on appropriate peritoneal log:

- Condition of the exit site (color, drainage) and of the tubing
- If an antibiotic ointment was applied and if skin barrier was used
- Day and date for next dressing change on computer kardex
- If a swab was taken, inform Clinical Leader to obtain the result in twenty four (24) hours to review with the primary Nephrologist

**DIAGRAM A**

Rotate culture swab when taking a sample

