

PD Drain Problem-Solving Guide

Recognize outflow or drain problems and understand what you and your PD team can do to help find solutions.

What to do if you have...



Trouble draining



- Look for kinked or clamped catheter drain lines
 - Straighten lines and open clamps that need to stay open
- Make sure tubing is free of kinks before securing catheter or taping drain line
- Wear non-confining clothing
- Check for signs of leaks in bags or lines
- Look for fibrin clots in drained fluid or in lines
- Change body position during drain
 - Roll side to side (to move fluid)
 - Sit up (to increase intraperitoneal pressure)

Tell your PD nurse about any:

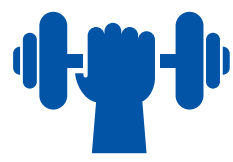


- Drain problems
- Cloudy fluid
- Presence of fibrin
- Difficulty passing urine
- Discomfort

Constipation



Increase dietary fiber intake



Exercise regularly



Be sure you are taking your prescribed stool softeners



If the problem persists, consult your PD nurse or physician.

What your nurse or physician may do if...



Fibrin clots are observed



- Flush or irrigate catheter
- Add heparin to PD solution if prescribed

Presence of catheter kinks



- Ask you to do these during dwell
 - Crouch in a knee-to-chest position
 - Walk up and down stairs
- Have an X-ray to visualize placement of catheter

Infection is suspected



- Collect samples of drained fluid
- Begin antibiotic treatment as instructed

Catheter is moved out of position



- Remove dressing
- Straighten kinks and secure catheter in place
- Apply gentle pressure over tunnel
 - If pressure improves flow, nurse will notify surgeon



If problems persist, you may be required to visit your surgeon for issues related to blockage or kinks inside the catheter or below the surface of your skin. It may even be necessary for your catheter to be replaced.