



Renal Department Peritoneal Dialysis service Workplace Instruction

## Peritoneal Dialysis (PD) – Intraperitoneal Cefepime Administration (1 gram)

Cross References	Medication Handling in NSW Public Health Facilities; NSW Health PD2013_043				
	Peritoneal Dialysis – Peritonitis Treatment Protocol; Renal Department Protocol				
	Peritoneal Dialysis – Antibiotic Administration Guidelines; Renal Department Protocol				
	Continuous Ambulatory Peritoneal Dialysis (CAPD) Freeline Solo Exchange Procedure; Renal Department Protocol				
1. Purpose	To ensure the administration of intraperitoneal Cefepime is performed accord to best practice guidelines reducing the risk of infection and ensuring patient safety				
2. Process					
2.1 Devices 2.1.1 E	Equipment				
	<ul> <li>Trolley</li> <li>Portable IV pole</li> <li>Water for injection – 10 ml ampoule</li> <li>Alcohol swabs x 2</li> <li>Blue clamp</li> </ul>				
2.1.2 K	(ey parts				
	<ul> <li>Cefepime – 1 gram vial</li> <li>Drawing-up needle (18G)</li> <li>21 G needle</li> <li>10 ml syringe</li> <li>PD fluid (Freeline Solo bag)</li> </ul>				
2.1.3 K	2.1.3 Key site				
	<ul> <li>Rubber bung on Cefepime vial</li> <li>Rubber bung on PD fluid</li> <li>Abdominal PD catheter</li> </ul>				
2.2 Recomme	2.2 Recommended Intraperitoneal Dose for treatment of Peritonitis				
	<ul> <li>Daily dose is 1 gram for 14-21 days</li> </ul>				

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## St George/Sutherland Hospitals And Health Services (SGSHHS)



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- 2.3 Procedure
  - 1. Warm the selected PD fluid (freeline solo bag) on the warmer
    - a. Select appropriate PD fluid strength by conducting a fluid assessment on patient 30 minutes prior to CAPD procedure
    - b. Note: PD fluid takes 30 minutes to warm.
  - 2. Ensure the "5 Rights" of Principles for Safe Medication Administration is observed with second person check
  - 3. Perform hand hygiene
  - 4. Identify and gather equipment and key parts for procedure
  - 5. Check expiry dates on antibiotic vial, PD fluid and water for injection
  - 6. Clean trolley/work surface with detergent
  - 7. Perform hand hygiene
  - 8. Don gloves
  - 9. Prepare general aseptic field equipment and key parts near the patient's bedside
  - 10. Use the sharp edge of the blue clamp to open outer pouch of the dialysis bag. DO NOT USE SCISSORS OR KNIVES
  - 11. Place the opened bag on top of the clean trolley and ensure the lines are facing up
  - 12. Recheck the dialysis bag strength, volume, expiry, colour and for leakage
  - 13. Prepare the antibiotics using aseptic technique ensuring all the key parts/sites are protected
    - a. Alcohol swab the rubber bung on Cefepime vial;
    - b. Attach drawing up needle to 10 ml syringe;
    - c. Open water ampoules and aspirate all content into the 10 ml syringe;
    - d. Push needle into the rubber bung on a Cefepime vial, inject 5 mls of water, invert vial and shake until all powder dissolves then aspirate all content;
    - e. Once Cefepime vial is emptied into the 10 ml syringe, replace drawing-up needle with 21G needle.
  - 14. Administer the antibiotics into the dialysis fluid using aseptic technique ensuring all the key parts/sites are protected
    - a. Alcohol swab the rubber bung on dialysis fluid;
    - b. Push needle into the centre of the dialysis fluid bung and inject all content. Note: For accidental piercing of the bag or the side of the bung , use a new dialysis fluid
  - 15. Administer Cefepime intraperitoneally through CAPD exchange as per Continuous Ambulatory Peritoneal Dialysis (CAPD) Freeline Solo Exchange Procedure; Renal Department Protocol
    - a. Note: Dwell intraperitoneal Cefepime for 6-8 hours
  - 16. Wear PPE
  - 17. Discard bag and lines in the clinical waste bin, discard needles in sharps bin
  - 18. Remove gloves and PPE
  - 19. Perform hand hygiene
  - 20. Clean trolley after use and perform hand hygiene
  - 21. Sign and co-sign the medication chart
  - 22. Document the procedure on the CAPD chart and patient notes

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23. Handover to the next shift				
St George Hospital Renal Website: <u>http://stgrenal.org.au/</u>				
<ul> <li>Walker, A. (2014). Management of peritoneal dialysis-associated peritonitis in adults and children. <i>The KHA-CARI Guidelines – Caring for Australasians with Renal Impairment</i> [cited 2015 March]; Available from: http://www.cari.org.au/Dialysis/dialysis%20peritonitis/dialysis peritonitis.html</li> <li>Bannister, K. (2014). The influence of peritoneal dialysis systems and solutions on the incidence of peritonitis and catheter-related infections. <i>The KHA-CARI Guidelines – Caring for Australasians with Renal Impairment</i> [cited 2015 March]; Available from: http://www.cari.org.au/Dialysis/dialysis%20peritonitis/dialysis peritonitis.html</li> <li>Li, P. K., Szeto, C., Piraino, B., Bernardini, J., Figueiredo, A., Gupta, A., Johnson, D., Kuijper, E., Lye, W., Salzer, W., Shaefer, F., and Struijk, D. G. (2010). Peritoneal Dialysis – Related Infections Recommendations 2010 Update. <i>Peritoneal Dialysis International</i>, 30(4), 393-423. doi: 10.3747/pdi.2010.00049</li> <li>Dombros, N., Dratwa, M., Feriani, M., Gokal, R., Heimburger, O., Krediet, R., Verger, C. (2005). European best practice guidelines for peritoneal dialysis. 4 Continuous ambulatory peritoneal dialysis delivery systems. <i>Nephrology Dialysis Transplantation</i>, 20 Suppl 9, ix13-ix15. doi: 10.1093/ndt/gfi1118</li> </ul>				

## **Revision and Approval History**

Date published	Revision number	Author/Contact Officer (Position)	Date due for revision
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