

St George Hospital Renal Department – INTERNAL ONLY

Recirculation on haemodialysis

Objective

- To minimise the loss of blood due to clotting in the lines while troubleshooting.
- To remove air and chemicals from the lines.

***NB RECIRCULATION CAN ONLY BE UNDERTAKEN FOR 20 MINUTES. IF THE PROBLEM CANNOT BE RECTIFIED IN THIS TIME RETURN THE BLOOD OR DISCARD.**

Procedure

1. Turn off UF VOL.
2. Turn off blood pump.
3. Clamp venous and arterial lines and both cannulae or vascath limbs.
4. Separate lines from cannulae or vascath limbs and join the lines with a recirculation connector.
5. Release all clamps and turn the blood pump on to 100ml/min. Infuse N/Saline slowly while recirculating.
6. If cannulae are patent flush with 10mls of N/Saline.
NB if the patient has a vascath the limbs will also need to be flushed using a sterile technique.

Once the problem has been rectified the patient can be reconnected to the machine.

7. Stop the blood pump.
8. Clamp the lines and cannulae/limbs of vascath and connect.
9. Open all clamps and start the blood pump.
10. Stop the N/Saline and reset the UF VOL.
11. Add on additional dialysis time for “time out”.