

Temporary Haemodialysis Catheter

Information for people who need a temporary line **Oxford Kidney Unit**

This leaflet is about a temporary haemodialysis catheter (also called a temporary line). It will provide you with information about the procedure. We will also talk with you about why and how long you will need a temporary line.

There is a separate leaflet on haemodialysis so please ask for a copy if you have not been given one.

What is a temporary line?

A temporary line is a small plastic tube which is inserted into one of your large veins usually in your neck or groin. When you need haemodialysis the tube is attached to two separate pipes (lines) on the haemodialysis machine. One line removes the blood from you, which is then cleaned by a filter within the dialysis machine. The clean blood is then returned to you through the other line.

You need haemodialysis because your own kidneys are not working enough to keep you healthy. This can lead to a build up of salt, water and waste products in your body, as the kidneys would normally get rid of these things in your urine. Haemodialysis removes these waste products and excess water from your body when your kidneys aren't working properly.

If you need a temporary line for another reason than needing haemodialysis your kidney team will explain this to you.

Before the temporary line is inserted we will need to make sure that your blood clotting is safe to insert the temporary line.

Where is the line inserted?

Your line will be inserted by a kidney doctor in a procedure room on a ward.

There are two types of temporary line; a 'groin line' and a 'neck line'.

- A **groin line** is placed into the large (femoral) vein in your groin. It is usually removed after a few days.
- A neck line is placed into the large (internal jugular) vein in your neck. Neck lines can be used for up to ten days.

It may be difficult to say how long you will need the line for, but a kidney doctor will advise you on which line is the most suitable. If you require haemodialysis for longer than a few days, you will need a different type if dialysis line. We will talk with you about this.

What will happen during the procedure?

You will need to lay flat on the bed during the procedure (you can have a pillow under your head). The procedure usually takes around 30 minutes

You will be awake for the procedure. An ultrasound machine, a small probe is rolled over your skin and creates an image on a screen, will be used to help decide where is the best place to put the line in.

Once the doctor or nurse has decided on the best place for your line, they will clean your skin with an antiseptic and cover the area with a sterile (clean) sheet. Local anaesthetic will be injected into your skin where the line is to be inserted. This does sting a little, but then the area will go numb.

A small cut is made and using a special kit we introduce the temporary line into a wide vein in your neck or groin. As we insert the line into the vein you will feel a bit of pushing, which may feel uncomfortable, but it should not be painful. The line will be secured with two stitches, which will be removed when the line is taken out. The exit site will be covered with a sterile clear dressing.

Risks or complications

Having a temporary line inserted or removed is usually a safe procedure. Rarely, complications can occur and it is important to be aware of them as some may need treatment. These can include:

- Bleeding (serious bleeding is very rare), we may need to apply pressure at the insertion site.
- Pain (we can give you paracetamol or other pain relief after the procedure, if needed).
- Infection. This is uncommon if the line is only in for a short period. The entry site will be checked regularly for any signs of infection.
- Air entering your blood circulation (air embolism). This is very rare.
- When the line is not being used it is locked with a special fluid which reduces the risk of infection or blockage.

If you are having a neck line, there is a risk of:

- A collapsed lung (called a pneumothorax). This is extremely rare.
 A chest X-ray will be taken after you have the line inserted to check for this.
- Abnormal heart rhythms. During the procedure you will be attached to a heart monitor so we can observe your heart rhythm on a screen.

Before you sign the consent form the doctor or nurse will discuss these with you, as well as any specific risks which might apply to you.

What happens next?

Whilst you are in hospital we will be monitoring your kidney function closely. These results will help us decide whether you need on-going haemodialysis treatment. This will be discussed with you during your stay.

If you need haemodialysis for more than a week or your kidney function is poor, the kidney team will talk to you about the treatment options available. Once you are ready to go home a kidney doctor will see you in the kidney outpatient clinic.

Important information

Tell your nurse or doctor if you experience any of the following.

- pain at the insertion site that is getting worse
- feeling hot and sweaty, like you have a temperature. You may have an infection
- feeling short of breath
- bleeding, call for help urgently.

Although extremely rare your line can fall out. If this happens apply firm pressure to the puncture site for at least 5 minutes and call for help urgently.

Removal of your temporary line

Your temporary line will be removed once you no longer need it, needs replacing or isn't working well or you have an infection.

Having the line removed isn't painful but can be a little uncomfortable.

Before your temporary line is removed will need a blood test (clotting) make sure that you are not at an increased risk of bleeding.

What happens when it is removed?

We will ask you to lie flat on a bed. The dressing will be removed and the area cleaned with a cleaning solution and the stitches removed

If the line is in your neck we will need to tilt your head down. We will then ask you to take a deep breath and hold it whilst we remove the line. Once the line is removed you can breathe normally.

Firm pressure is applied to the puncture area for at least 5 minutes. Once there is no more bleeding the site will be covered with a special dressing.

You will need to lie on the bed for 2 hours after the line is removed, this is to make sure you don't bleed. During this time the nurse will check the dressing for any bleeding and take your blood pressure on a regular basis.

Risk and complications when removing a temporary line

Although removing a temporary line is usually safe, there are some risks associated with it. Your kidney team will watch you closely for any problems in the 2 hours after your temporary line has been removed.

- It is **normal to have some mild discomfort** and bruising in the days after your temporary line is removed. Painkillers such as paracetamol are usually enough to help and this should get better quickly.
- **Risk of bleeding**. This may be a small amount of blood which can be seen through the dressing after your temporary line comes out. Bleeding that seeps though the dressing is serious and life threatening (see the box on page 8). Sometimes the bleeding is internal and cannot be seen. If you see bruising spreading on your leg or back, or suddenly begin to feel lightheaded when sitting or standing, you should seek urgent medical advice (see the box on page 8).
- **Risk of infection**. Usually where the temporary line was removed. Signs of infection include redness, swelling and pain. You may also see pus and feel feverish. If you notice any of these symptoms it is vital that you seek medical help quickly, either through your healthcare team, or calling 111 immediately. It is important to tell them that you have recently had a temporary line for haemodialysis removed.
- **Risk of air embolism**. This occurs when air accidentally enters the large vein through the entry site. This air can travel to your heart or lungs and stop blood from getting through. This is rare but is very serious and can be life-threatening. Your kidney team will reduce the chances of this happening by making sure that you are lying flat when your temporary line is removed.

Bleeding – important information

- Call for help from a friend, family member or neighbour.
- Put firm pressure on the wound and don't take it off for at least five minutes and until the bleeding has stopped. This also reduces the risk of air entering your blood circulation (air embolism).
- Lie down if possible.
- Call 999.

Taking care after the removal of your temporary line

- Keep the dressing dry (no showering or bathing).
- Leave the dressing on for 48 hours. After this you can remove it.
- Avoid any heavy lifting or strenuous exercise for a few days after your temporary line has been removed. This is reduce the risk of bleeding.

Contact the ward where you had the line removed if:

• You notice any redness, swelling, pus or pain at the site or feel like you have a temperature. You may have an infection.

Further information

Renal Ward

Churchill Hospital

Telephone: 01865 225 780

24 hours, including weekends and bank holidays.

Main Haemodialysis Unit

Churchill Hospital

Telephone: 01865 225 807

If no one is available to take your call please phone the renal ward.

Useful websites

Oxford Kidney Unit

Lots of information about the Oxford Kidney Unit for patients and carers.

Website: www.ouh.nhs.uk/oku

Kidney Patient Guide

Information for patients with kidney failure and those who care for them.

Website: www.kidneypatientguide.org.uk

Kidney Care UK

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidneycareuk.org

Six Counties Kidney Patients Association

The SCKPA is run for patients by patients or family members.

They offer support to people suffering from kidney disease or who are on dialysis. They work closely with the Oxford Kidney Unit and have branches in Oxfordshire, Northamptonshire, Buckinghamshire, and Milton Keynes, and parts of Wiltshire, Gloucestershire and Berkshire.

Website: www.sixcountieskpa.org.uk

National Kidney Federation

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidney.org.uk

NHS Website

This website has information about dialysis

Website: www.nhs.uk/conditions/dialysis/what-happens

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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