



Title	Indwelling Peritoneal & Pleural Catheters (PleurX or Rocket Drains)		
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1 CONTEXT

Ascites and effusions secondary to cancer have a significant impact on many aspects of patients' lives. Management of ascites and effusions is aimed at reducing fluid collection where possible and removing fluid collections and has traditionally required frequent hospitalisation for repeated drainage and required frequent imaging.

NICE Guidelines approved the use of these long term indwelling catheters in patients with malignant disease where the prognosis is greater than two months and they have had drainage with subsequent re-accumulation of fluid within a month.

2 PRINCIPLES OF SERVICE

Patient selection is crucial to aid appropriate placement of the semi permanent drains. The development of a protocol allows for all patients to be managed in a safe controlled manner but also allows for individual variation. The drains can improve the quality of patient lives and allow for more time to be spent at home. In certain cases, it can also allow a patient to die in their preferred place of care.

3 TEAM STRUCTURE

The service is led by Dr Annabel Howell, Locum Consultant in Palliative Care.

The service will be facilitated by:

Clinical Nurse Specialists within palliative care and ward staff on the MKU
Lung cancer Nurse Specialists

4 AIM

To provide an indwelling catheter/drain service for palliative care patients within NHS Borders.

5 HOURS OF SERVICE

The initial contact will be within working hours 08:30 to 16:30.

6 EQUALITY

The service is for all patients within NHS Borders with a life-limiting illness regardless of diagnosis, disability, culture, belief system, sexual orientation or social status.

7 SERVICE ACCESS AND RESPONSE

Knowledge of the service will be passed on via Community Palliative Care CNS (Clinical Nurse Specialists) to DNs, and CPs. Secondary care physicians already are aware of the service and tertiary services are aware we are the primary contact for this.

8 REFERRAL PROCESS

The pathways outline the route for referral.

At the initial visit, a leaflet about the drain will be given to the patient and depending on the type of drain, there may be different forms.

Further appointments

9 CONTACTS AND SUPPORT

Those involved in the service

PleurX www.carefusion.com
Leslie.marsden@carefusions.com

Rocket www.rocketmedical.com
Donald Cunningham
07816 670930
donald@rocketmedical.com

10 ORDER INFORMATION

We would expect equipment to be ordered out with the MKU and respiratory ward as it is expensive.

PleurX equipment is available via stores.

In the hospital, Rocket equipment requires a non stock requisition form.

The codes are:

Dressing pack and drainage bag (packs of 5)	R54401
Dressing pack and bottle (packs of 5)	R54400
Valve cap (packs of 10)	R54410-00-CP

Order information for primary care is available in the patient/nurse information booklet.

11 FUNDING

Funding will be via the admitting ward for the insertion kit.

Drainage whilst in hospital will require kits provided by the admitting ward.

The admitting ward will also provide at their expense two drainage kits to go home with.

Drainage in the community will be at the cost of primary care.

12 SERVICE PROMOTION

None at present.

13 IT SECURITY AND DATA PROTECTION

Information re pathways on the intranet.

A part of the Macmillan shared drive will be set aside to contain patient details to ensure everyone involved in the process can have access to the information to ensure continuity of care.

14 SERVICE EVALUATION

15 APPENDICES

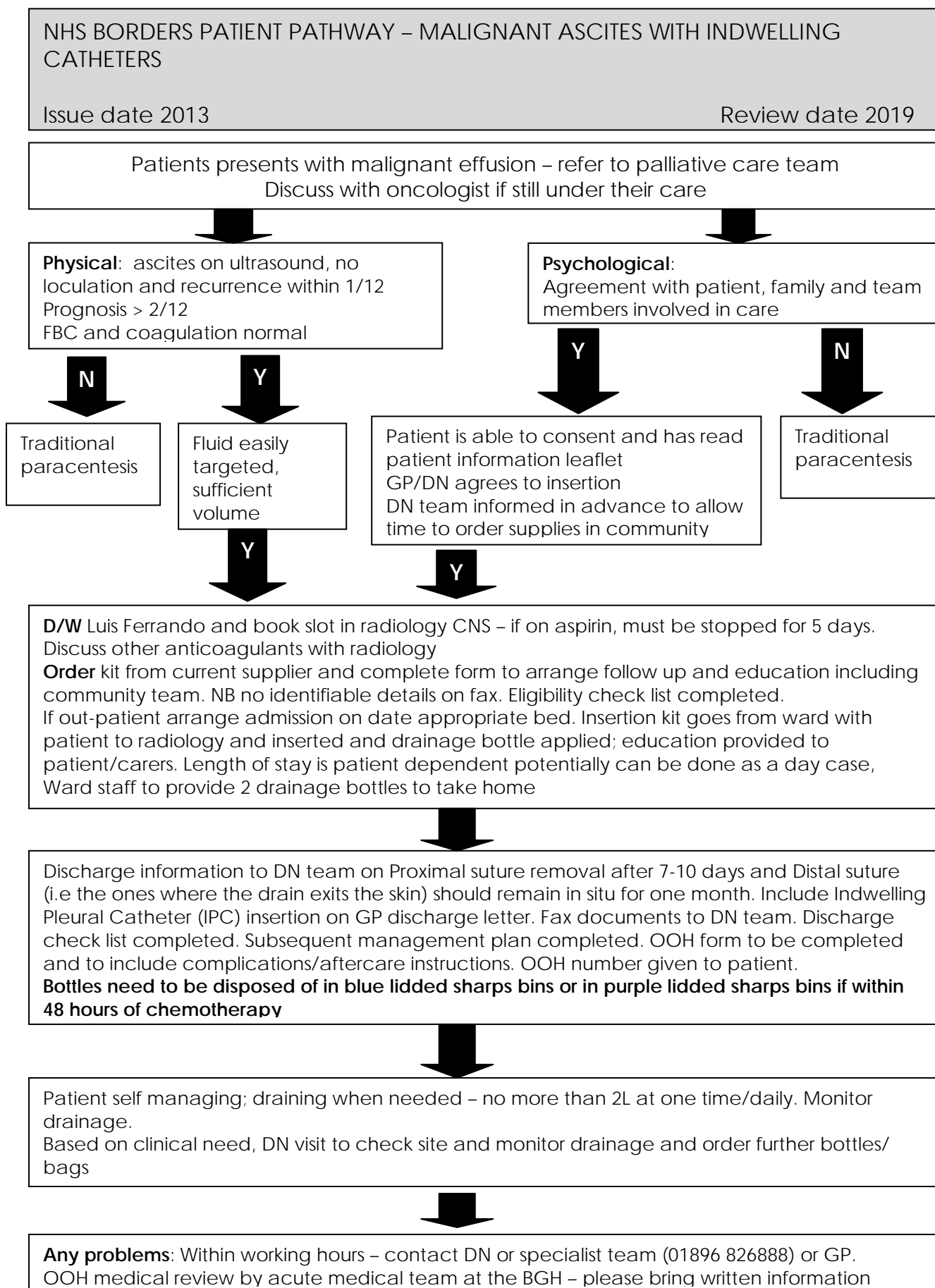
1. Ascites IPC Pathway
2. Chest Effusion IPC Pathway
3. IPC paperwork for patient notes
4. Rocket abdominal drainage discharge letter www.rocketmedical.com
5. Rocket chest drainage discharge letter www.rocketmedical.com

Available resources:

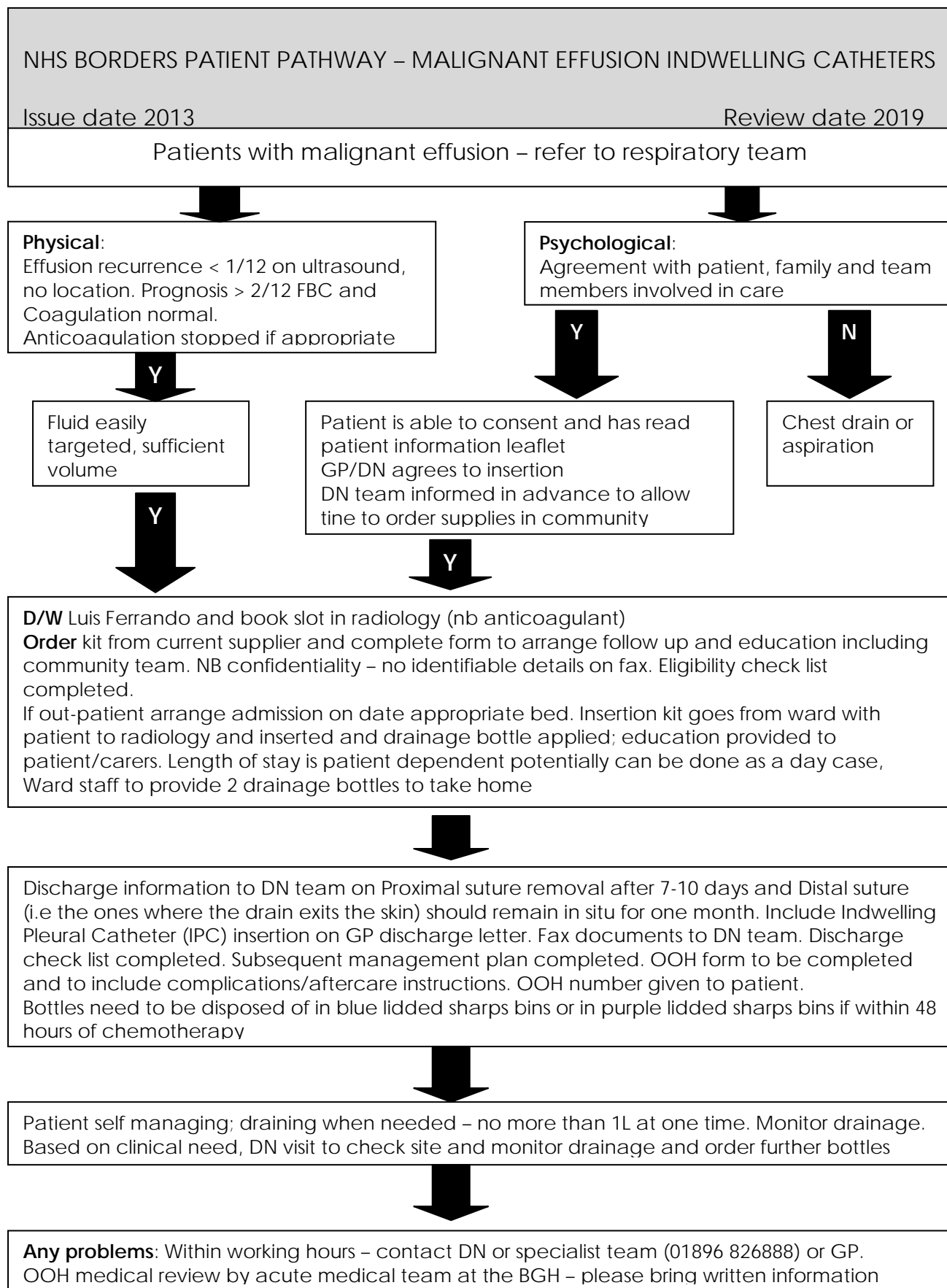
Rocket patient management leaflet – abdominal

Rocket patient management leaflet – pleural - data sheets

Appendix 1



Appendix 2



Appendix 3

NHS Borders – The Management of Malignant Ascites/Pleural Effusions with Indwelling Pleural or Peritoneal Catheters		
Patients Name:		Date of Admission:
Hospital Number:		Time of Admission:
CHI Number:		Admitting Consultant:
Date of Birth:	Age:	Admitting Doctor:
Insertion Date:		

Alerts

DRUG ALLERGIES (e.g. Drugs, Latex, Elastoplast) include details of previous reaction if known		
<input type="checkbox"/> No Known Allergies	<input type="checkbox"/> No Known Latex Allergies	Anticoagulants: When Stopped:
Signature..... Date..... Time		

Eligibility check list

Patient must be able to give consent	<input type="checkbox"/> No <input type="checkbox"/> Yes
Consent must be given by someone with the mental capacity to do so	<input type="checkbox"/> No <input type="checkbox"/> Yes
Sufficient information should be given to the patient to enable an informed decision	<input type="checkbox"/> No <input type="checkbox"/> Yes
Consent must be freely given and written	<input type="checkbox"/> No <input type="checkbox"/> Yes
Patient/Carer willing and able to manage the equipment	<input type="checkbox"/> No <input type="checkbox"/> Yes
Clinical Staff have explained the procedure and the patient/carers has demonstrated physical ability and mental willingness	<input type="checkbox"/> No <input type="checkbox"/> Yes
Physical suitability as per pathway	<input type="checkbox"/> No <input type="checkbox"/> Yes
Ultrasound examination has demonstrated free flowing fluid rather than loculated	<input type="checkbox"/> No <input type="checkbox"/> Yes
The cause of ascites/effusion is known to be due to malignancy	<input type="checkbox"/> No <input type="checkbox"/> Yes
Extended team members agree with patients suitability	<input type="checkbox"/> No <input type="checkbox"/> Yes
Where the patient is already known to community staff (District Nurses or Macmillan team), a discussion has taken place about the patient's suitability	<input type="checkbox"/> No <input type="checkbox"/> Yes
Contacted District Nurses to inform of intention to use an IPC	<input type="checkbox"/> No <input type="checkbox"/> Yes
Patient has had a least one previous drainage or if indicated on first presentation	<input type="checkbox"/> No <input type="checkbox"/> Yes
Comments	

Signature of Doctor/Nurse

Print Name Signature Designation Date

Discharge check list

Inform GP	<input type="checkbox"/> No <input type="checkbox"/> Yes
Teach patient/carer use of equipment	<input type="checkbox"/> No <input type="checkbox"/> Yes
Provide 2 bottles to take home	<input type="checkbox"/> No <input type="checkbox"/> Yes
Provide written information about IPC, stress the need to bring this with them if they need to be admitted	<input type="checkbox"/> No <input type="checkbox"/> Yes
Give clear/written instructions about what to do if there is a problem	<input type="checkbox"/> No <input type="checkbox"/> Yes
Inform Discharge Liaison and refer to District Nurses	<input type="checkbox"/> No <input type="checkbox"/> Yes
Instigate teaching session if the DN team are unfamiliar with IPC	<input type="checkbox"/> No <input type="checkbox"/> Yes

Signature of Doctor/Nurse

Print Name Signature Designation Date

Review/Follow up

Date	Event	Action Taken
Comments		

Print Name Signature Designation

Date Time

Date	Event	Action Taken
Comments		

Print Name Signature Designation

Date Time

Complications to be aware of

Leakage around drain site – can often be relieved by more frequent drainage of ascites. Occasionally a further suture may be required. Please contact the palliative care team.

Blockage – can use a flush but not an emergency so again can be referred to the palliative care team in working hours.

Rarely, peritonitis can occur and the patient will need medical review acutely at the BGH by the palliative care team or acute physicians, ascetic fluid for culture and consideration for iv antibiotics.

The drain can be left in situ after the end of life. It does not cause any issues with crematorium.

THE INFORMATION IN THIS LAST SECTION MUST BE INCLUDED ON THE OUT OF HOURS FORM.

PLEASE FAX THIS TO THE DISTRICT NURSE TEAM ON DISCHARGE

Appendix 4

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Dear Doctor & District Nurse

Your patient has been discharged home with a **Rocket IPC Indwelling Peritoneal Catheter**

This is a tunnelled catheter designed to drain recurrent peritoneal ascites from the abdomen. The drain is used to minimise the need for repeated admission into hospital and thereby improve and maintain your patient's quality of life.

Fluid is drained from the abdomen using a drainage bag in simple, self or carer administered procedure, which usually takes between 5 and 45 minutes. Between procedures, the catheter is sealed with a one way valve and covered by a dressing so that the client can continue with their usual daily activities. All the equipment needed for the drainage procedure and subsequent re-dressing is provided in a single pack: Product **Code R54401 Rocket IPC Dressing Pack & Bag**.

Further supplies can be obtained from Rocket Medical directly or from NHS Logistics using order code **FET1551**.

The packs can also be ordered on prescription, tariff Part IXA appliances: Indwelling Pleural Catheter Drainage Systems, Rocket IPC Drainage Pack & bag

Please prescribe drainage pack and bag in multiples of 5.

The bags are for single use only. Drained fluid is not suitable for disposal in the domestic setting and used bags should be disposed of in accordance with your local protocol for handling waste/substances.

Following discharge from hospital, your client may require advice and support when drainage is required. The discharging ward will provide advice on the support required.

In general terms drainage is indicated for the relief of symptoms such as abdominal swelling, and its effects such as discomfort or difficulty breathing. The client should be provided with a Patient Management handbook which contains detailed information on how to use the drainage bags and routine care of the catheter. The handbook includes a drainage diary so that the drainage amounts and characteristics can be recorded.

You can also see a presentation on the use of IPC at www.rocketmedical.com

If further clinical advice is required please contact the client's discharging ward.

For further details and supplies of **Rocket © IPC Dressing Pack and Bag Packs Please contact our Customer Services Team for assistance: 0191 419 6988**

Appendix 5

Dear Doctor & District Nurse

Your patient has been discharged home with a **Rocket IPC Indwelling Pleural Catheter**

This is a tunnelled catheter designed to drain recurrent pleural effusions from the chest. The drain is used to minimise the need for repeated admission into hospital and thereby improve and maintain your patient's quality of life.

Fluid is drained from the chest using pre-evacuated bottles in simple, self or carer administered procedure, which usually takes between 5 and 45 minutes. Between procedures, the catheter is sealed with a one way valve and covered by a dressing so that the client can continue with their usual daily activities. All the equipment needed for the drainage procedure and subsequent re-dressing is provided in a single pack: Product **Code R54400 Rocket® IPC Dressing Pack & Bottle.**

Further supplies can be obtained from Rocket Medical directly or from NHS Logistics using order code **FET1544.**

The packs can also be ordered on prescription, tariff Part IXA appliances: Indwelling Pleural Catheter Drainage Systems, Rocket IPC Drainage Pack & bottle

Please prescribe drainage pack and bottle in multiples of 5.

The bottles are for single use only. Drained fluid is not suitable for disposal in the domestic setting and used bottles should be disposed of in accordance with your local protocol for handling waste/substances.

Following discharge from hospital, your client may require advice and support when drainage is required. The discharging ward will provide advice on the support required.

The patient should be provided with a Patient Management handbook which contains detailed information on how to use the drainage bottles and routine care of the catheter. The handbook includes a drainage diary so that the drainage amounts and characteristics can be recorded.

You can also watch a presentation on the use of IPC at www.rocketmedical.com via the Customer Information Bulletin link on the main page.

If further clinical advice is required please contact the patient's discharging ward.

For further details and supplies of Rocket © IPC Dressing Pack and Bottle Packs Please contact our Customer Services Team for assistance: 0191 419 6988