

 <p style="text-align: center;"><b>DIVISION OF ADULT INSTITUTIONS</b></p> <p style="text-align: center;"><b>POLICY AND PROCEDURES</b></p>	<b>DAI Policy #:</b> 500.31.10	<b>Page</b> 1 of 3
	<b>Original Effective Date:</b> 06/03/13	<b>New Effective Date:</b> 06/03/13
	<b>Supersedes:</b> N/A	<b>Dated:</b> N/A
	<b>Administrator's Approval:</b> Jim Schwochert, Administrator	
	<b>Last Reviewed, No Changes:</b> 11/22/16	
<b>Required Posting or Restricted:</b>		
<input checked="" type="checkbox"/> <b>Inmate</b> <input checked="" type="checkbox"/> <b>All Staff</b> <input type="checkbox"/> <b>Restricted</b>		
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Catheter Removal		

**POLICY**

The Division of Adult Institutions shall ensure the Peritoneal Registered Nurse monitors the inmate patient for indicators of potential catheter removal.

**REFERENCES**

Counts, C. (Ed) (2008). Core Curriculum for Nephrology Nursing: Fifth Edition Pitman, NJ: American Nephrology Nurse's Association.

**DEFINITIONS, ACRONYMS AND FORMS**

Advanced Care Provider (ACP) – Practitioner with prescriptive authority.

DOC-3021 – Progress Notes

PD – Peritoneal dialysis

RN – Registered Nurse

**PROCEDURE:**

- I. The PD RN shall monitor the function of the catheter for any indications that would support removal of the catheter.
- II. Indications for catheter removal are as follows:
  - A. PD is discontinued.
  - B. Catheter related complications.
  - C. Peritoneal membrane related complications.
  - D. Infection related complications.
- III. The PD RN shall notify the Nephrology ACP of identified indicators suggesting catheter removal and results of nursing interventions.
- IV. The RN shall document all care measures with the inmate patient on appropriate forms.

<b>DAI Policy #:</b> 500.31.10	<b>New Effective Date:</b> 06/03/13	<b>Page</b> 2 of 3
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Catheter Removal		

**Bureau of Health Services:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
James Greer, Director

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Ryan Holzmacher, MD, Medical Director

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Mary Muse, Nursing Director

**Administrator's Approval:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Jim Schwochert, Administrator

**DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES**

<b>Facility:</b> Name		
<b>Original Effective Date:</b>	<b>DAI Policy Number:</b> 500.31.10	<b>Page</b> 3 of 3
<b>New Effective Date:</b> 00/00/00	<b>Supersedes Number:</b>	<b>Dated:</b>
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Catheter Removal		
<b>Will Implement</b> <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
<b>Warden's/Center Superintendent's Approval:</b>		

**REFERENCES**

**DEFINITIONS, ACRONYMS, AND FORMS**

**FACILITY PROCEDURE**

- I.
  - A.
  - B.
    - 1.
    - 2.
      - a.
      - b.
      - c.
    - 3.
  - C.

II.

III.

**RESPONSIBILITY**

I. Staff

II. Inmate

III. Other