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# Assessment of patient sensitivity to exit site dressing on central venous catheters, on a maintenance dialysis unit.

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Following review of all patients who dialysed using CVC, we identified there was a group of patients npn concordant with catheter care. The main reason was identified as intolerance or allergy to either the cleaning preparation or the dressings recommended.

We therefore sought to establish if true allergic reaction/intolerance was occurring occurs in these patients.

A small pilot QI project was developed. Our local guidelines recommend the cleaning preparation is a ChloraPrep 2%w/v/70% cutaneous solution with a clear dressing.

The pilot followed three steps:

No 1: A Tegaderm IV Advanced dressing was placed on the opposite side to the CVC. It was left in situ during the dialysis session and assessed for redness or irritation. If none was noted, the dressing was left until the next dialysis session. It was then assessed by both the patient and staff for any reaction.

No 2 ChloraPrep 2%w/v/70% cutaneous solution was next used on the skin opposite the CVC and the area was monitored by both staff and the patient for any reaction during their HD session. Full air drying was carefully observed.

No 3 The skin area opposite the CVC was cleaned with ChlorPrep 2% and then cover with the Tegaderm dressing; this was left in situ until the next dialysis session. Again, any reaction was evaluated by both the patient and staff member.

The results showed interestingly, out of the six patients in the pilot, only one patient showed a true allergic reaction to both the cleaning preparation and the dressing. For this patient, and in consultation with the infection control department, the consultant and senior nurses, a specific plan for management of the CVC was developed.

In the other 5 cases, there was no reported reaction to either dressing or cleaning preparation. In discussion with each of the other patients, and explaining the superior infection risk reduction using ChlorPrep 2%, they were all happy to follow our standard ANTT CVC cleaning and dressing guideline.

This is a simple pilot with a small cohort of patients but produced conclusive results. We have now rolled this out to the other units in our network

An unexpected outcome was the engagement of the patient at all stages of the process and allowed for education and involvement. This encouraged the patients to become more involved in their decision making.

From this piece of work, the process of establishing true sensitivity has been extended to all units in the group.

Reference:

Long term indwelling HD catheter care treatment and prevention of exit, tunnel and blood stream infection guidelines. Classification: Clinical Guideline Lead Author: Dr Janet Hegarty, Consultant Nephrologist Additional author(s): Dr Adam Jean, Microbiologist, Jude Allen Renal Pharmacist, Sr Carol Howard Infection Control Nurse, Sr Yvonne McGee Renal Unit Manager Authors' Division: Division of Renal Services Unique ID: DDCRen01(17)Issue number: 1.1Expiry Date: May 2019 (Extended till Dec 19) 1st extension.