

Insertion and Removal of Tunneled Hemodialysis Catheters



The full version of this guideline is located on the BC Renal Agency website (www.bcrenalagency.ca) through the following channel:
[Home](#) > [For Health Professionals](#) > [Vascular Access](#) > [Provincial Guidelines and Tools](#).

Recommendation		HA/HD Centre
1.	A tunneled, cuffed hemodialysis catheter is the access of choice for temporary hemodialysis of greater than two to three weeks duration (evidence).	<input type="checkbox"/>
2.	The preferred site for tunneled cuffed hemodialysis catheters is the right internal jugular vein (evidence). <ul style="list-style-type: none"> Do not place on the same side as a maturing or planned permanent access 	<input type="checkbox"/>
3.	Tunneled, cuffed hemodialysis catheters are inserted by, or under the supervision of, trained personnel under fluoroscopy (evidence). <ul style="list-style-type: none"> If fluoroscopy is not available, then insert under ultrasound guidance and perform chest x-ray prior to line use. 	<input type="checkbox"/>
4.	Using fluoroscopy, the catheter tip is adjusted so the tip is in the mid right atrium when the patient is prone (proximal right atrium when the patient is sitting) (evidence).	<input type="checkbox"/>
5.	Prophylactic antibiotic coverage is not recommended prior to line insertion. <ul style="list-style-type: none"> There is no evidence to support the use of prophylactic antibiotics. 	<input type="checkbox"/>
6.	Removal of tunneled cuffed hemodialysis catheters may be performed using venous cutdown or traction, depending upon how the catheter was inserted (evidence).	<input type="checkbox"/>