Recommendations for the **EMERGENCY DEPARTMENT** Management of Peritonitis

1. Notify the NKC Peritoneal RN on-call immediately upon patient arrival to emergency dept. **(206) 292-2285.**

2. **Patient will bring with them to the Emergency Department:**
   a. Dialysate drain bag for inspection and specimen collection.
   b. Fresh supplies and 2 new dialysate bags to which medications can be added.
   c. This page of recommendations **to give to Emergency Dept staff**.

3. **For ED Staff:**
   a. **The Peritoneal Dialysis Catheter must only be accessed by an RN trained in Peritoneal Dialysis.**
   Obtain dialysate effluent from the drain bag

4. **Laboratory tests:**
   a. Cell count with differential (ICD10 code K65.9)
   b. Gram stain with bacterial **and** fungal culture and sensitivity (ICD10 code K65.9)
   c. Ask laboratory to fax copy of results to NKC PD unit:
   (206) 292-2164 (fax)

5. **Initial antibiotics must dwell in the peritoneal cavity for a minimum of 6 hours and cover both Gram positive and Gram negative bacteria.** A combination of Vancomycin and Ceftazidime is recommended for empiric therapy of peritonitis (while waiting for culture/Gram stain results). If a cephalosporin allergy exists Tobramycin should be substituted for Ceftazidime. If a Vancomycin allergy exists, can use Cefazolin. **If a PD trained staff is not available, consider starting IV medications if high clinical suspicion for peritonitis.**

6. **Medications will be added to a single bag of dialysate and given intraperitoneally (IP) based on actual body weight. Add the entire dose to the dialysate bag using usual sterile technique. Have patient perform dialysis exchange using entire bag.**

   a. **Vancomycin Dosing**

Patient Name_____ **NKC#**_____

IMPORTANT: Vancomycin is dosed every 3-5 days (depending on vancomycin random levels) NOT DAILY.

Actual Weight (Kg)	Vancomycin Dose IP
<60	1000 mg in one bag
60-90	1500 mg in one bag
>90	2000 mg in one bag

b. **Ceftazidime Dosing: Weight <50 Kg 1000 mg IP, ≥50 Kg 1500 mg IP daily in long dwell (≥ 6 hours).**

c. **Tobramycin Dosing (Cephalosporin allergy) IP daily in long dwell (≥ 6 hours).**

Actual Weight (Kg)	Tobramycin Dose IP
<27	20 mg
28-33	25 mg
34-40	30 mg
41-46	35 mg
47-53	40 mg
54-60	45 mg
61-66	50 mg
67-73	55 mg
74-80	60 mg
81-86	65 mg
87-93	70 mg
94-100	75 mg
101-106	80 mg
107-113	85 mg
114-120	90 mg
121-126	95 mg
127-133	100 mg

7. Vancomycin in combination with either Ceftazidime or Tobramycin is compatible and may be administered into the same dialysate bag.
8. Add Heparin 500 units per liter IP to each dialysate bag unless contraindicated.
9. Notify the patient's attending nephrologist or covering on-call nephrologist.
10. **If patient is discharged from the emergency department, please notify the on call peritoneal dialysis nurse. (206) 292-2285.**

Patient Name_____ **NKC#**_____

11. For pain management, oral medications as needed. Avoid non-steroidal anti-inflammatories (NSAIDS). If narcotic is given, patient will need additional treatment for constipation.

12. Patients will be educated to make an Emergency Kit that they can take with them to the Emergency Department.