

Disasters and Peritoneal Dialysis Patients

A Practical Guide for Adults

BEFORE A DISASTER

Be prepared



Stock essential supplies:
Adequate to cover at least **2 weeks** of needs, including PD fluids (for APD and CAPD), medications, and disposable items.



Keep important information:
Medical history, dialysis details, and **contact numbers** of your dialysis unit and supplier.



Prepare a disaster bag:
Contact list, first-aid kit, flashlight with extra batteries, masks, gloves, and sanitizer.



Have antibiotics suggested by your unit available:
A **5-day supply** in case of peritonitis risk.

DURING DISASTER

Stay safe



If you are on a cycler, **stop dialysis and disconnect and cap safely** without waiting for the fill or drain to finish, according to your PD training instructions.



Evacuate to a predetermined shelter or secure location.



Contact your dialysis unit as soon as possible and follow their instructions.



Switch to manual exchanges (CAPD modality) if there is a power outage and you normally use an automated cycler (APD modality).

AFTER A DISASTER

Protect your health



Introduce yourself to the health care providers at site.



Seek emergency care if you have:

- Abdominal pain
- Cloudy PD fluid
- Fever
- Red or sore exit site



Prevent infection:

- Perform exchanges in the cleanest environment as possible.
- Clean exit site at least daily with an antibacterial soap and rinse with water.



Use water safely:
If there is no safe water, boil water for 10 minutes before use. If boiling isn't possible, disinfect with diluted bleach and wait for 30 minutes before use.



Adjust treatment if needed:

- Reduce the number of exchanges if supplies are limited.
- Contact the PD supplier for priority fluid delivery.

DIETARY TIPS

If PD cannot be performed



Avoid high-potassium foods (e.g., bananas, oranges, tomatoes).



Limit salt and fluid intake to reduce fluid overload.



Reduce protein intake to control uremia.