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Pediatricians relatively have a greater experience and comfort level with Peritoneal Dialysis (PD) as compared to other modalities of Renal Replacement therapy (RRT). PD is a cost-effective and efficient therapy as it requires less technological expertise and resource allocation as compared to CRRT or Hemodialysis. PD provides gradual, continuous solute and water clearance through diffusion and ultrafiltration. PD does not require vascular access and access for peritoneal dialysis can be quickly and safely obtained, even in hemodynamically unstable patients, thus allowing for the rapid institution of therapy. Typical access includes Tenckhoff catheters which can be placed by pediatric surgeons in operation theatre or bedside by means of peel-off technique percutaneously. Rigid PD catheters can also be used if cost is an issue and requirement of PD is just for a couple of days.

This workshop will focus on the following:

- 1) Indications of starting PD
- 2) Types of catheters used for PD
- 3) Procedure of insertion
- 4) PD monitoring
- 5) Troubleshooting

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