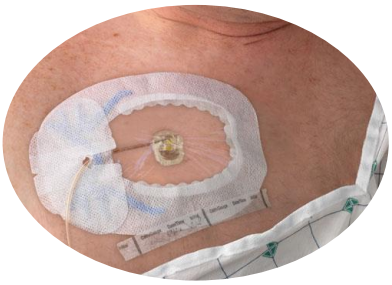
Canterbury District Health Board
Te Poari Hauora ō Waitaha

Understanding your Implanted Port
Adult Patient Information

What is the purpose of this information sheet?

This information has been written by health professionals. We hope it will be useful for you, your family/Whanau, friends and carers in providing all the information you will need about the implanted port you are having inserted for treatment. It outlines:

- What is a port?
- Why do we use a port?
- Do I have alternative options to a port?
- Are there any risks if I have a port?
- How is my port inserted?
- Where is my port placed?
- What should I expect after insertion of my port?
- How do I care for my port?
- What are my responsibilities?
- Identifying and resolving problems with my port
- Important phone numbers

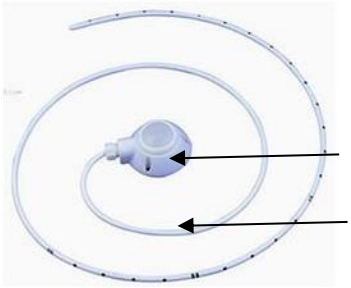


What is a Port?

A port is an implanted device that provides access to your large central veins. It is placed under the skin's surface in a surgically created pocket. The pocket is usually created in the upper chest or upper arm. The portal body has a catheter attached to it which is placed into a vein and feed along the vein to reach an area near your heart. There are no external catheter parts that are visible. The port is accessed using a special needle which is inserted through the silicon dome of the portal body.This allows you to have all your intravenous medication and IV fluid and blood samples taken.

Ports are most suited to people who need regular, long term intravenous treatment. They are especially appropriate when physical characteristics, body image concerns, cosmetic factors or life style can impact on a person's daily life. If they are looked after, ports can provide intravenous access for over 5 years.

A port consists of two parts - the portal body, and the catheter (tubing). There are many different types of ports. Your health professional will discuss with you which is the best type of port for the treatment you will be having. Power Ports (one type) are used for patients who will require scans. This is because power ports can withstand high pressure when dye is injected into the port.



Power Ports used for CT scans

Why do we use a Port?

- It allows us to give all your IV medications and to take your blood samples.
- It can remain in place for up to 5 years or more.
- It gives you freedom to use your arms normally in all your daily activities.
- You can swim, bath or shower
- No dressings are required
- When it is not in use, there is no special care needed.

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Do I have an alternative option to a Port?

There are other types of central venous catheters which may be used. It is important that you discuss all options with your Clinical Nurse Specialist and doctor to ensure you have the right central venous catheter for your ongoing treatment. We will work with you to ensure you have a choice of where your port is inserted. It is important you feel comfortable the decision.

Is there any risk if I have a Port?

There are risks associated with all types of central venous catheters we use. The risks relating to the insertion of the port will be discussed with you on the day of insertion. You always have the option to change your mind. Complications associated with insertion are:

- Injury to the blood vessel
- Wound infection
- Excessive bruising
- Small risk of the lung being punctured.
- A blood clot in a vein resulting in some swelling of the arm but is usually not serious.

Will it hurt?

You will have some tenderness or discomfort at the incision site after the insertion. This is usually managed with oral pain medication such as paracetamol. The discomfort should settle after 2 - 3 days.

The advantage of having a port is when it is not being used it is completely under the skin, with no tubing or catheter visible. This means you can shower, swim and do your daily activities without having to be concerned about your port.

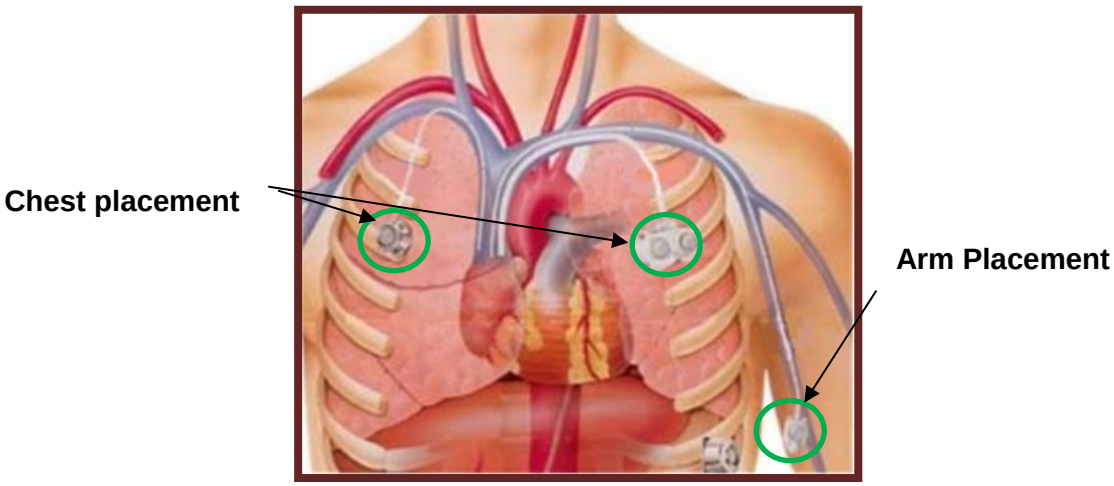
How is my Port inserted?

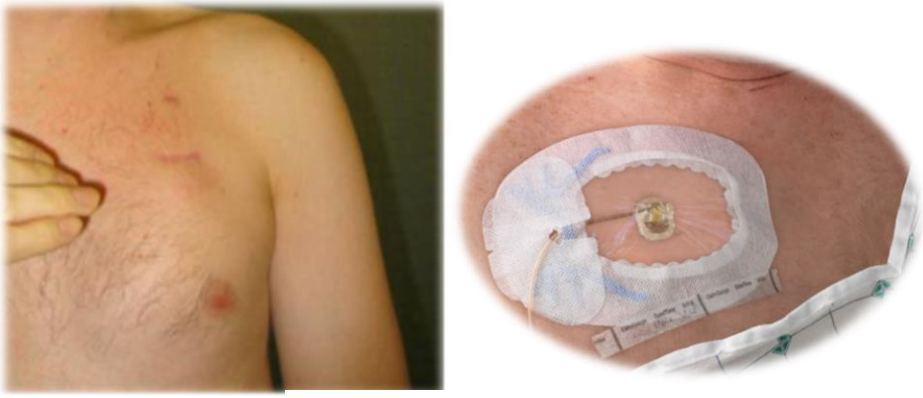
A port can be inserted as a day procedure, or you may be asked to come and stay in hospital for a short time. Ports can be inserted by Interventional Radiologists in a radiology or by a Vascular Surgeon in an operating theatre. The way the port will be inserted will be discussed with you to ensure your safety and comfort. You may be given a general anaesthetic, or may only need sedation to make you feel sleepy and relaxed. The port is then inserted with local anaesthetic to numb the insertion site.

Chest Ports and Arm Ports:

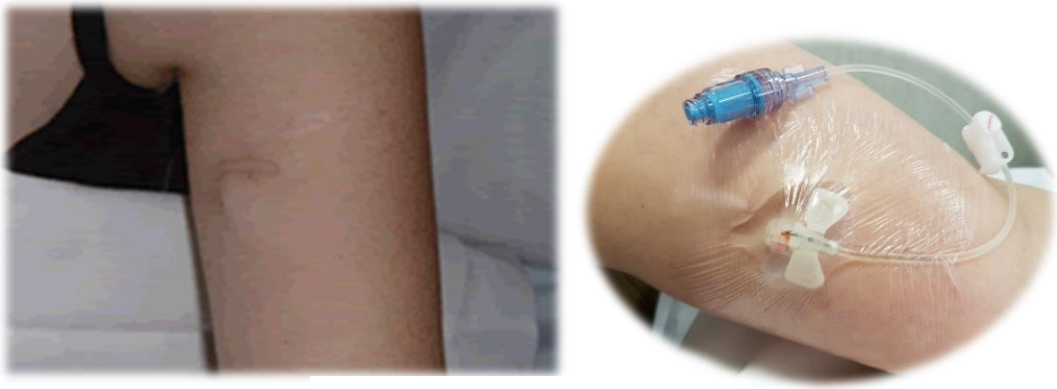
A small incision and "pocket" is made on the chest wall or above the bend in your arm to place the portal body. The catheter is then placed into a vein and fed along the vein until the tip is sitting in one of the large veins in your chest and just near the heart.

The portal body is stitched to the muscle to hold it in place. Both the pocket and incision for the catheter are closed with dissolvable stitches.





Chest placed Implanted Port



Arm placed Implanted Port

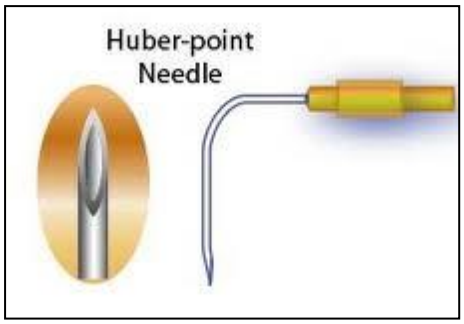
Care following the insertion of a Port:

After your port has been inserted the dressing may remain in place for 1 week before the port is accessed and used. This allows any bruising and/or swelling to go down and is more comfortable for you. The dressings can be removed if the port needs to be accessed within the first week. If your port is needed for immediate treatment, we will ask the consultant to leave the port accessed with the needle following the insertion in theatre or Interventional Radiology.

Accessing your Port

Before your port is accessed with a needle to deliver your treatment, local anaesthetic cream may be put over the port site to numb the skin. This cream is wiped off and the skin over the port is cleaned with antiseptic solution before inserting the needle.

The Port Needle:
The port is accessed aseptically using a special needle called a Huber needle.
The needle can be left in place for 1 week. IV therapy and blood tests can be done through the port.
The needle is secured in place with a transparent dressing. It is important not to get this dressing wet.



What to look for following the insertion:

For the next few days you need to observe the area around the port for any of the following signs:

- swelling
- bleeding
- redness
- leaking of fluid
- pain

Maintaining patency of your Port:

When the port is being used for treatment the needle is changed once a week. In-between treatments and when not being used to ensure the port does not get blocked with blood, your port is flushed and locked **every 3 months** with 0.9% sodium chloride 10mL. (Posiflush pre-filled syringe)

If you feel unwell or a problem arises and you are concerned, contact your treatment centre immediately (refer to contact numbers below).

Report anything you feel is not right with your catheter.

Having a CT scan?

It is usual for oncology patients to have a power port placed. This allows for CT scans to be carried out using contrast medium which is administered under pressure. Only a power port can be used for this procedure and must be accessed with a power injectable needle.

How to look after your port:

Ports can last for over 5 years if they are required for long term use. Some of the things you can do to look after your port.

- ✓ Only let people who have been trained to use a port, access or deliver treatment through it.
- ✓ When the port is accessed make sure the dressing stays dry.
- ✓ If the dressing becomes wet, ask to have it replaced.
- ✓ Make sure your ***port is flushed every three (3) months with 0.9% sodium chloride 10mL if not being used.***
- ✓ Do not 'play' or 'fiddle' with the needle or dressing when the port is accessed.
- ✓ Do not twist or manipulate the port when not in use

If you have any questions or wish to discuss having a port inserted, please speak with your nurse or medical team.

IMPORTANT PHONE NUMBERS:

For advice or help, contact your treatment centre by calling one of the numbers below:

Your ward/department Nursing Staff must complete this section for you.

Ward/Department: _____Contact phone number: _____

Additional Information: _____

If your port doesn't feel right, please contact your treatment centre

Identifying and resolving issues with my Port

Problem	Possible Cause	Action
Catheter Site		
Pain or oozing Redness Swelling	Could be infection	Contact your treatment centre
Feeling unwell		
Temperature, cough Increased heart rate Chills and shaking	Sign of blood stream infection	**GO IMMEDIATELY TO EMERGENCY DEPARTMENT OR YOUR LOCAL COMMUNITY HOSPITAL**
Swelling		
Of the upper arm Pain in the neck and shoulder Neck Hand mottled	Sign of a blood clot in vein	Contact your treatment centre
Portal body has moved		
Port feels mobile and position has changed or has flipped over	Port may have dislodge from tissue	Contact your treatment centre
Breathing problems		
Shortness of breath Chest pain	May have a blood clot in lung or Air may have entered the vein	**GO IMMEDIATELY TO THE EMERGENCY DEPARTMENT OR YOUR COMMUNITY HOSPITAL**

Always keep this information sheet with you and bring it to any emergency appointment

Notes /Questions