



A Patient's Guide to Implantable Ports

What is an implantable port?

An implantable port is a thin, soft plastic tube that is put into a vein in your chest or arm and has an opening (port) just under the skin. This allows medicines to be given into the vein or blood to be taken from the vein.

The tube is long, thin, hollow and known as a catheter. The port is a disc about the size of a nickel in diameter. The catheter is usually inserted (tunneled) under the skin of your chest or upper arm. The tip of the catheter lies in a large vein just above your heart and the other end connects with the port which sits under the skin on your upper chest, or upper arm. The port will show as a small bump underneath your skin which can be felt, but nothing is visible on the outside of your body.

What is an implantable port used for?

A port can be used to give you treatments such as chemotherapy, blood transfusions, high-calorie liquids or antibiotics. Ports can also be used when it is necessary to take samples of your blood for testing. This makes it possible for you to have your treatment without having to have needles frequently put into your veins.

You can go home with the port in and it can be left in place for weeks or months or, for some people, years. A port may be very useful if doctors or nurses find it difficult to get needles into your veins, or if the walls of your veins have been hardened by previous treatment. Ports are discreet because they lie completely under the skin and have no external parts.

How is the port put in?

Your port will be put in at the hospital by a surgeon or a radiologist. Gynecologic Oncology patients could have their port placed either in our Interventional Radiology department on the 4th floor or by your surgeon in the Operating room.

Before your surgery you may find it helpful to discuss the position of the port on your chest or arm with the surgeon.

The doctor will inject a local anesthetic into your skin to numb a couple of small areas on your chest and neck (or upper arm). After this you may be aware of activity around you and may feel some pressure on



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your chest (or arm) during the procedure, but you should not feel any pain.

You will have one or two small incisions (wounds). If the port is put into your chest vein the wound on your upper chest will be about 3–4 cm long and is where the port is placed.

There may be a smaller incision on your neck which is usually less than 1–2 cm long. The catheter will be put into a vein in your chest and then tunneled under the skin from the chest incision to the neck incision. The catheter is then attached to the port, which is fitted into a space created under the skin. The wounds are then stitched. If the stitches are not dissolvable they will be removed after about 7–10 days, when the wound has healed.

If the port is put into a vein in your arm the wound will be on the inner side of your arm.

A small dressing may be used to cover the wounds for a day or so after the procedure. The dressing may then be replaced, or the wound may be left exposed to the air.

You may feel a bit sore and bruised for a few days after the port is put in. A mild painkiller may be prescribed. Tylenol 650mg may be taken every 4 hours if needed.

Do **not** take aspirin or aspirin containing products.

Immediately after the port has been put in and for a few days afterwards check for any redness, swelling, bleeding, bruising, pain or heat around the wounds. Let your doctor or nurse know right away if you have any of these signs as you could have an infection, which may need to be treated.

How is the port used?

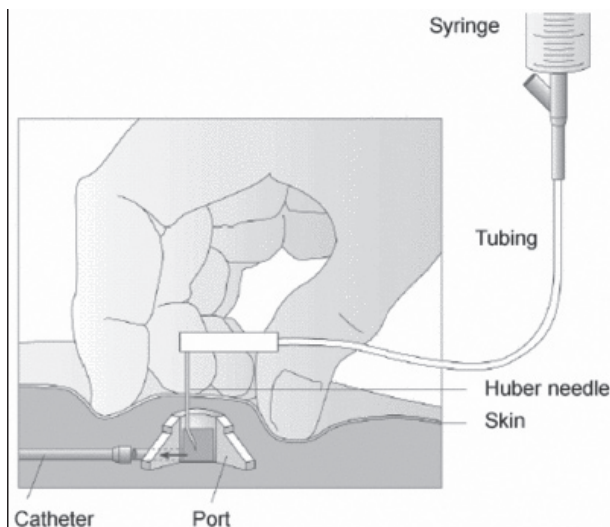
The port can be used right away, if necessary. When you are about to have treatment or have a blood sample taken, the skin over the port will be numbed with an anesthetic cream which will be put on about half an hour beforehand. The skin will then be cleaned.

A special needle, known as a Huber needle, is used to push through the skin and into the port (see diagram below). This should not be painful but you may feel a pushing sensation. The Huber needle connects with the catheter, allowing treatment to be given directly into the bloodstream. Blood samples can also be taken in this way if needed. If you are having a short treatment, the needle will then be withdrawn. For longer treatments, a dressing will be taped over the needle to hold it in place until the end of the treatment, when it will be removed.



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How do I care for my implantable port?

After each treatment a small amount of fluid is 'flushed' into the catheter so that it does not become blocked. The port will need to be flushed every four weeks if it is not being used. Apart from this, your port will not need any care at all.

The skin over the port can be washed just like the rest of the body. Be sure to monitor the port site daily for redness, swelling, bleeding, bruising, pain or heat around the port or catheter. Any of these signs would require you to call your nurse and have the port assessed for infection.

Possible problems with an implantable port

Infection

It is possible for an infection to develop either inside the catheter or around the port.

You should tell your doctor or nurse if:

- The area around the port becomes red or swollen or painful
- You develop a temperature; feel faint, shivery, breathless or dizzy.

You may be given antibiotics, or, if the infection is serious, occasionally the port may have to be removed.

Clots

It is possible for a clot to form in a vein in or around the catheter. If this happens, we will give you medication to dissolve the clot. If we are unable to clear the obstruction, the port may have to be removed.

When is a port NOT be used?



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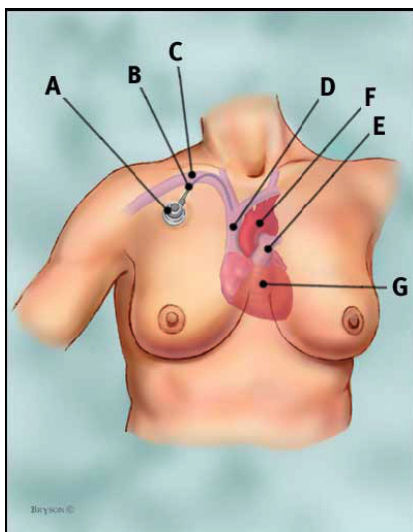
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When is a port **NOT** be used?

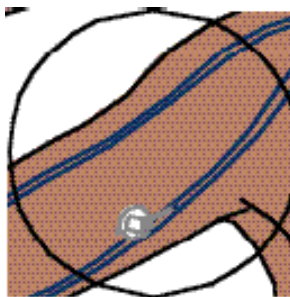
- A port cannot be used for CT Scans, or certain other exams.
- A port cannot be used for coagulation blood tests (PT/PTT/INR).

Other information

- The port should not interfere with your daily activities, although it is advisable to avoid strenuous exercise for a few weeks after surgery, so that your body can heal. Your doctor or nurse can give you information about this.
- Do not constrict or compress your port by sleeping on it or wearing tight clothing over it.
- If the port is in your arm, do not let anyone take your blood pressure, or take blood from a vein in that arm. Do not lift anything heavier than 15lb (7kg).
- Only the Huber needles should be used on your port. Do not let anyone use any other type of needle on your port.
- You may wish to wear a medical ID bracelet saying that you have an implanted port.



Peripherally Placed Port



Port inserted in vein for chemotherapy

- A** Port
- B** Catheter [tubing]
- C** Subclavian vein
- D** Superior Vena cava
- E** Pulmonary
- F** Aorta
- G** Heart

References

This section has been compiled using information from a number of reliable sources including:

- Oxford Textbook of Oncology (3rd edition). Perry et al. Oxford University Press, 2002.
- The Chemotherapy Source Book (3rd edition). M.C. Perry. Lippincott, Williams and Wilkins, 2001.



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