

# Implantable Port

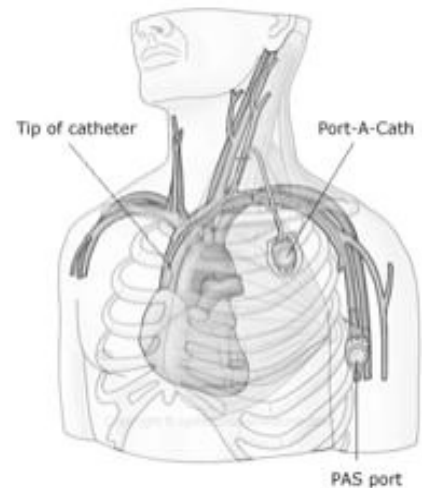
## Why does my child need an implanted port?

- Your child's treatment plan may require regular IV medicine, chemotherapy, and/or blood samples. An implanted port can make your child's treatment easier because it provides more reliable IV access. An implantable port is like an artificial vein which will make it easier for your doctors and nurses to access your blood vessels for medication and tests. The port can stay in for as long as your child's doctor feels it is needed. With the proper care, the port can stay in for several months or years.

## What is an implanted port?

- An implantable port, sometimes called a port-a-cath, is completely under the skin. The doctor inserts the catheter into the vein while the child is in the interventional radiology suite. Typical port placement is the upper chest area just below the collarbone or inside the upper part of your arm. There is usually a bulge under the skin. This is the port. None of the tubing can be seen on the outside of the body. To use the port a special needle is inserted through the skin into the port. If the port needs to be removed the incision would have to be re-opened. See figure 1.

The advantages of having an implanted port are: You won't need as many needle sticks. It can stay in your body as long as a few years and be removed when it is no longer needed. Some ports are specially designed to be used during imaging studies, such as computed tomography (CT) scans. These are called "power-injectable" ports. You will be given a card with information on the type of port that is placed with manufacture details.



Your port will be about the diameter of a quarter. It can be circular, oval or triangle shaped. It may be placed on the right or left side of the chest.



## How is the port cared for?

After the pediatric interventionalist places the port, it will be covered with a bandage. There will be also be a small incision (surgical cut) in the skin where the port was inserted. This area will be closed with internal stitches and covered with small adhesive strips called Steri-Strips® or Dermabond surgical glue. As the incision heals, the Steri-Strips will fall off, usually in seven to 10 days.

Your child should wait 48 hours before he or she gets the area wet. After that, you should keep the area clean with soap and water and dry completely. Do not submerge the area in water, such as a bath or a pool, for seven days or at any time that the port has a needle in place. Your child might find it helpful to wear loose clothing for several days after the surgery to keep pressure off the area where the port was placed. Once the port incision is healed, there will be no restrictions regarding swimming, bathing, or playing sports.

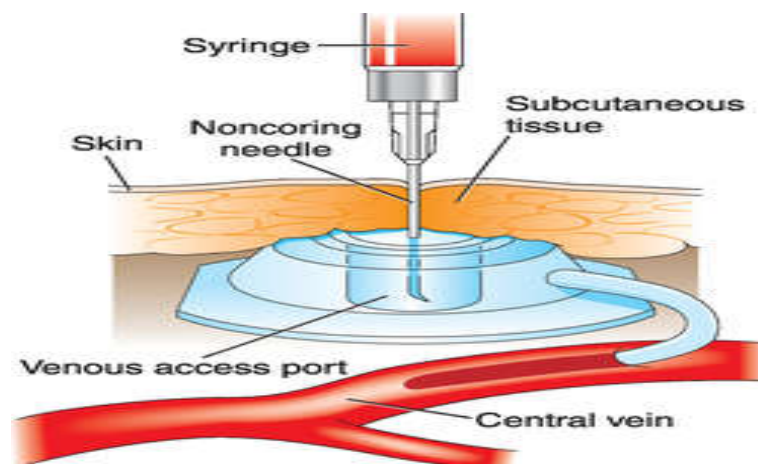
If medicine needs to be given or blood drawn, a small needle called a Huber needle is inserted through the skin and into the port. This is a special needle that does not leave a hole in the port (see figure 3 below) and is the only needle to be used for the port.

This allows the port to be accessed many times without damage. Numbing cream can be applied to the skin before the needle is placed to ease discomfort. Your doctor will give you a prescription for this cream to fill at a local pharmacy.

After the port is accessed, a transparent dressing will be placed over the needle to hold it in place and protect the insertion site from infection. Once the medication is given, or blood drawn, the needle and dressing can be removed. If your child's treatment lasts several days, the needle and dressing will stay in place, but will need to be changed once a week to prevent infection. If the needle is in the dressing should not be allowed to get wet. The dressing should be covered for all showers, and not be submerged in water until it is deaccessed.

If your child's port is not being regularly used, it will need to be flushed once a month with a heparin solution. This will keep the port from being clotted with blood. This is usually done when your child comes in for an office visit.

It is very important to prevent an infection, which might require the port to be removed. Good hand washing is a must for your child and for any person caring for your child. Do not allow someone to access the port unless they have been trained and familiar with port access.



## **When should I call my physician?**

Your port should never be painful or uncomfortable to use. If it is, notify your health care team immediately (it could be the beginning of an infection or clot). Though your port will be sore for a few days after it is inserted, it should be free from discomfort after that. Any swelling, redness, or puffiness around your port is not normal and your health care team member should be notified right away. Do not try to treat this yourself with hot or cold packs.

Call your child's doctor if you notice any of the following:

- Fever of 100.4 F or higher
- Chills
- Pain/redness/heat around the port
- Pus or fluid coming from the incision
- Trouble breathing
- Swelling or a growing bruise at the site
- Chest pain
- Palpitations
- Dizziness when the port is flushed

If your port is accessed and you encounter the following problems please contact your health care team to have the port evaluated immediately:

- Leaking from the catheter site. Leaking may mean a hole or break in your tubing, or blockage of catheter
- Blood backing up in your infusion tubing. This should not happen, if it does there may be pressure at the catheter tip that can lead to blood clots
- Resistance in flushing. Feeling resistance in may mean you have developed a clot which can often time be treated using clot-busting drugs called thrombolytics

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