



icumedical
human connections

UNDERSTANDING AN IMPLANTABLE PORT



FEATURING THE DELTEC PORT-A-CATH™

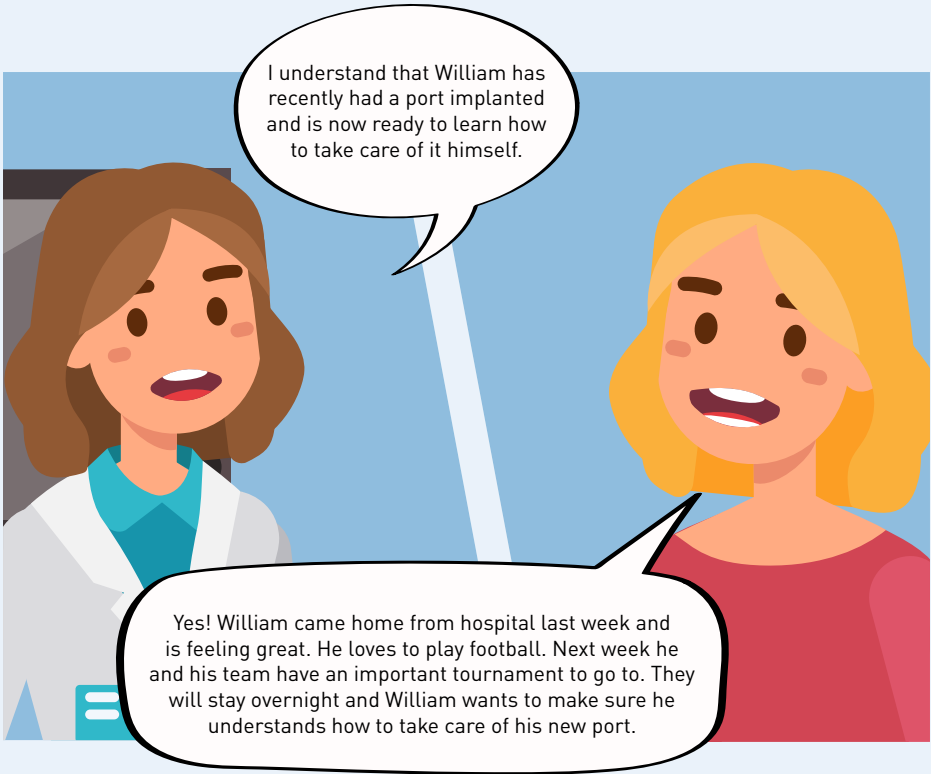
MEET...

WILLIAM

What is a port? An implantable port is a system indicated when patient therapy requires repeated vascular access for injection or infusion therapy and/or venous blood sampling. It is placed completely under the skin, usually in a location on the chest or arm.

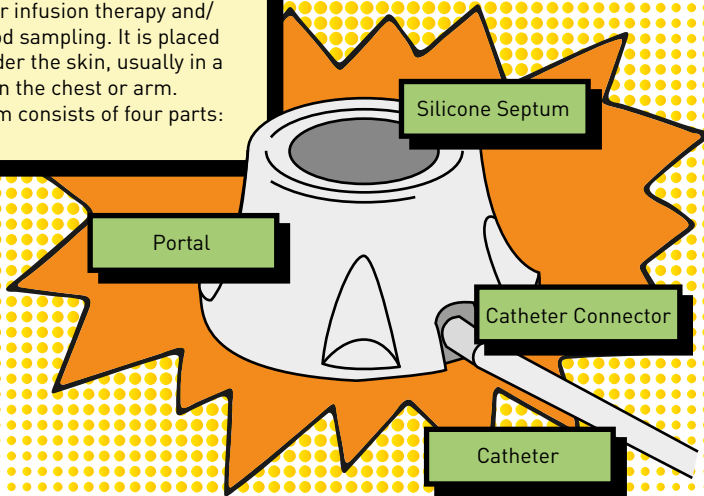






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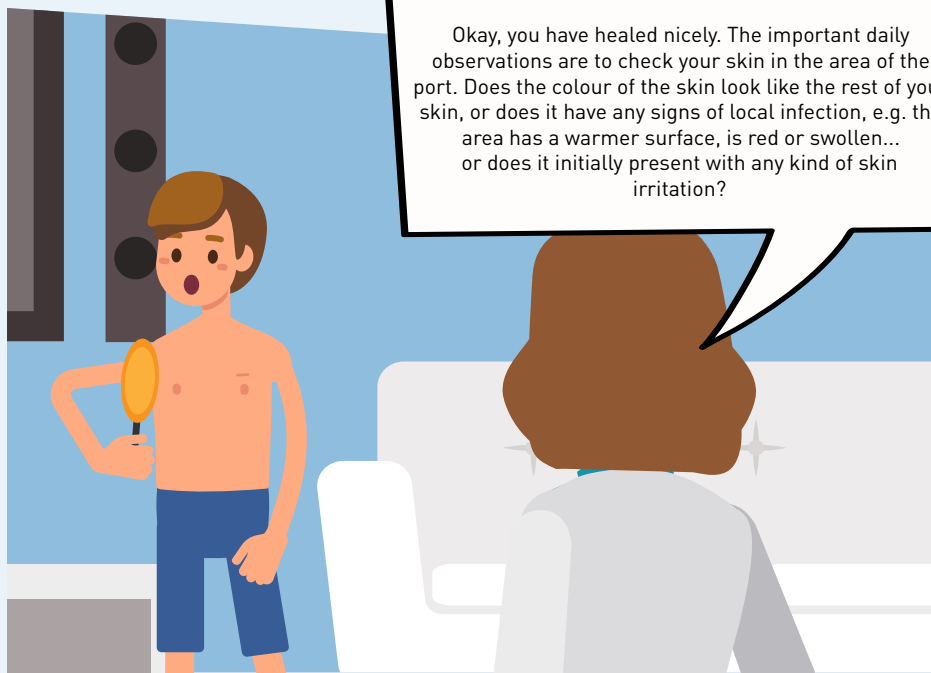
The port system consists of four parts:

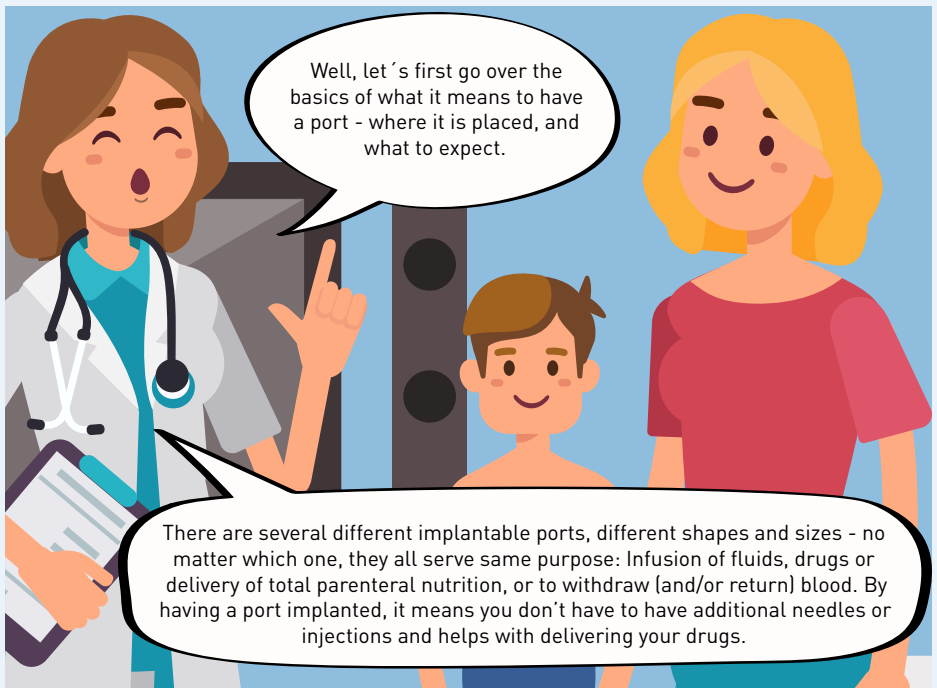
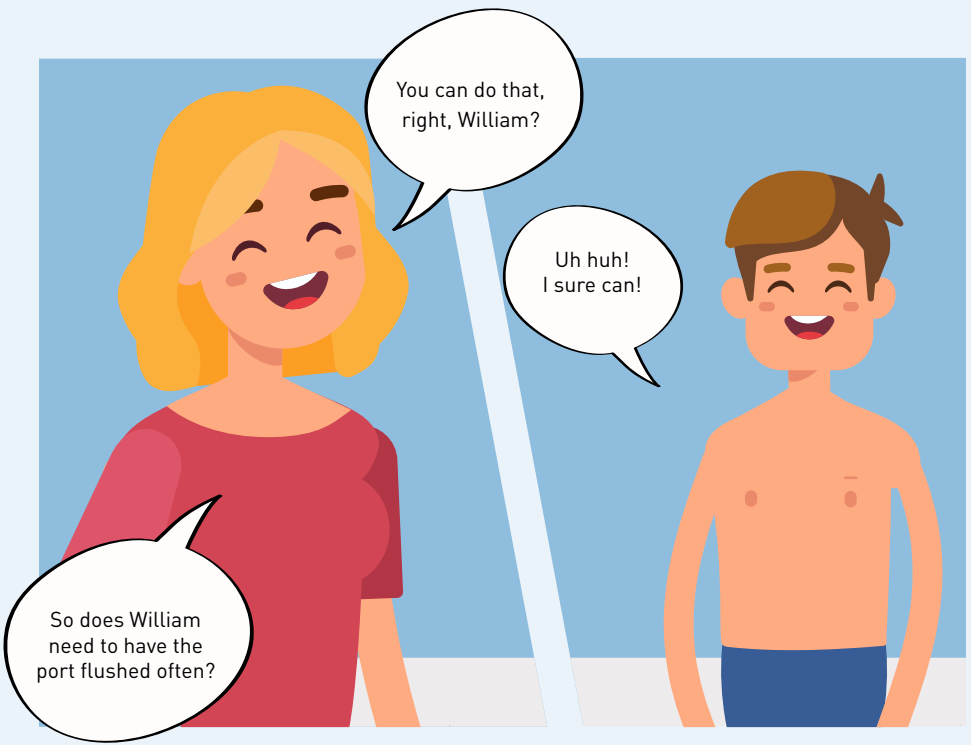


Great stuff William. An implantable port is exactly what you need, as you will be having frequent infusions over the upcoming months as well. With a port implanted, you will be able to play any kind of sports or activities - even swim - with no tubes hanging to watch out for either! First, let's make sure that the scar has healed. Please take a mirror, so you can see what to look for.

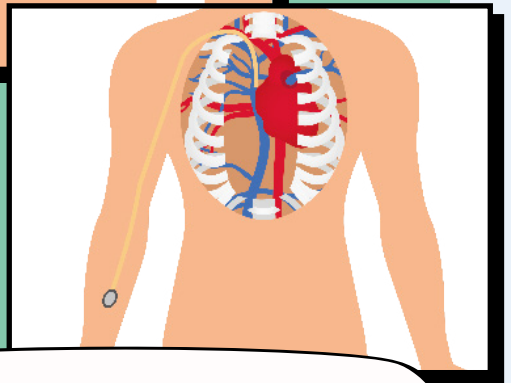
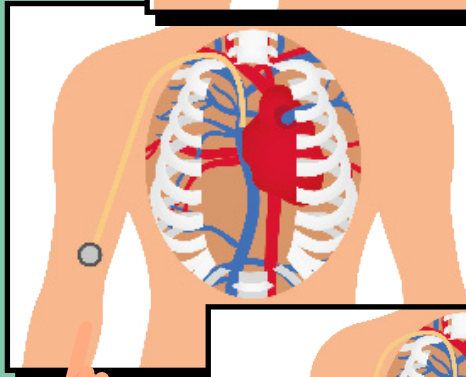
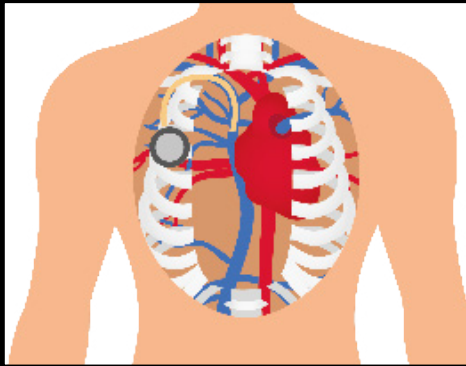


Okay, you have healed nicely. The important daily observations are to check your skin in the area of the port. Does the colour of the skin look like the rest of your skin, or does it have any signs of local infection, e.g. the area has a warmer surface, is red or swollen... or does it initially present with any kind of skin irritation?



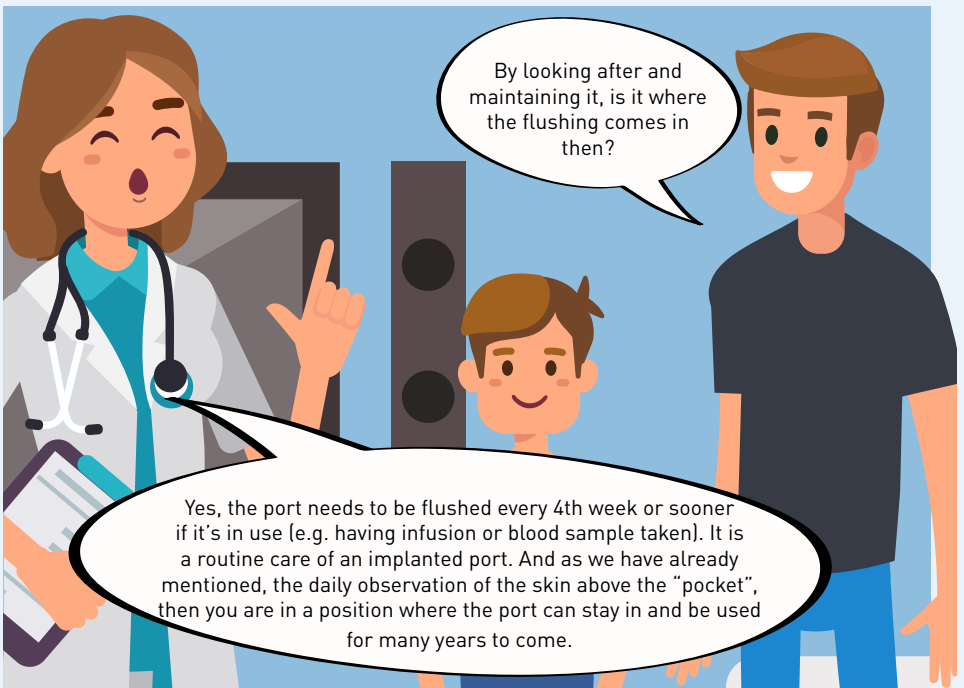
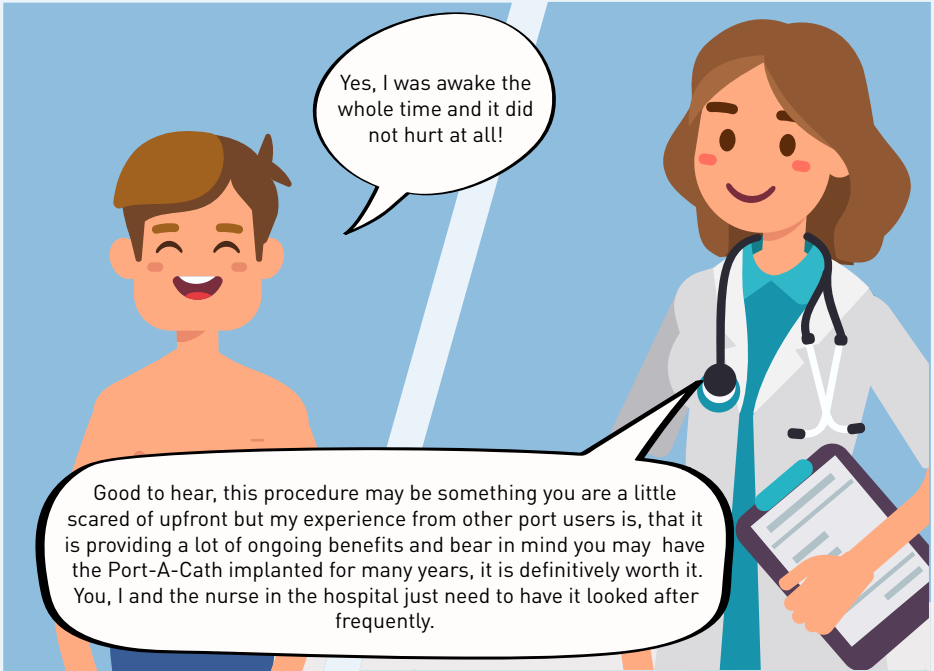


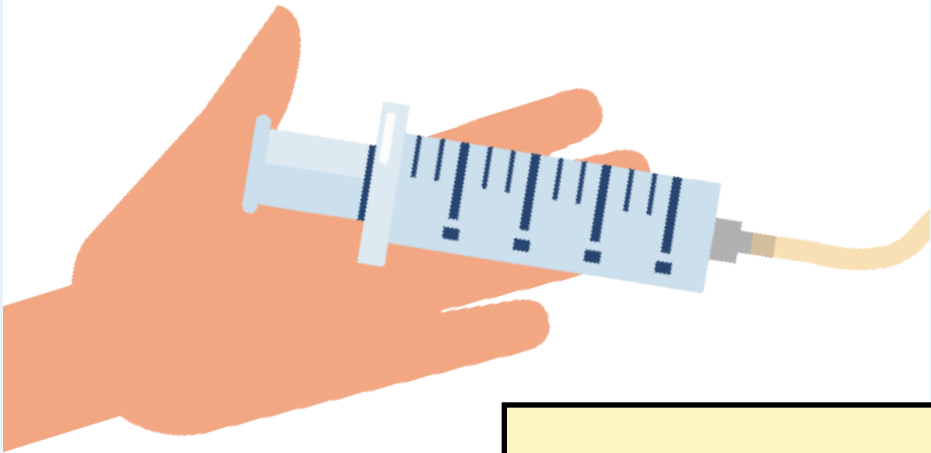
William, you have a power Port-A-Cath port implanted. Having a power port means it is visible under X-ray or CT scan, and it can withstand high flow injection of contrast media for CT scan if needed.



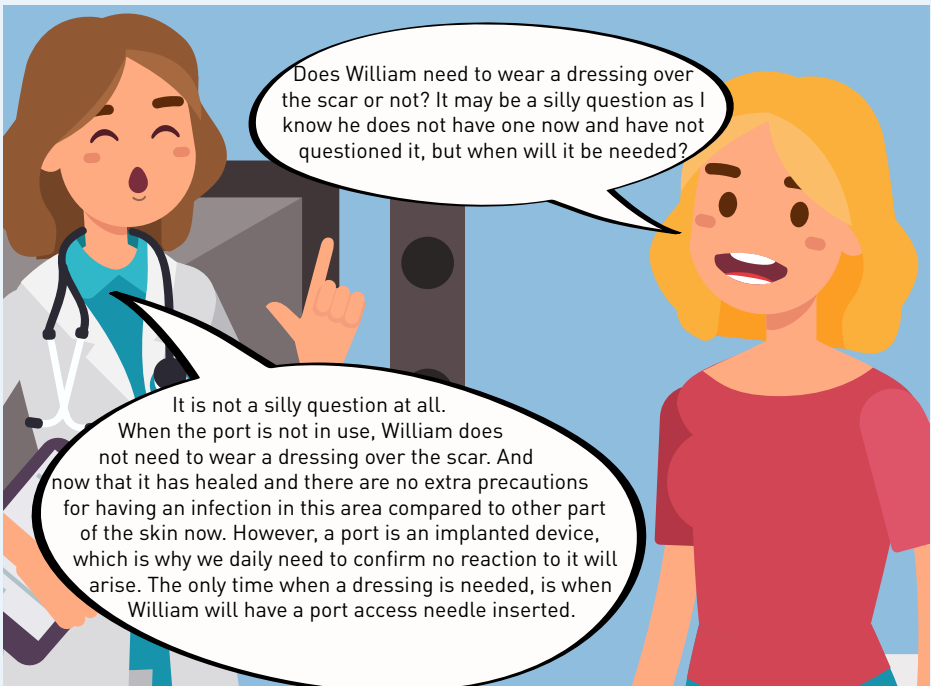
Your Port-A-Cath was implanted in a small (we call it a) pocket in your chest – and the catheter ends just before entering the right atrial chamber of the heart. As you know the procedure can be done under either local or general anaesthetic meaning you can be awake during the implantation procedure.

An implanted port may also be placed in the arm or even leg, the catheter will always end same place- just before the right atrium.



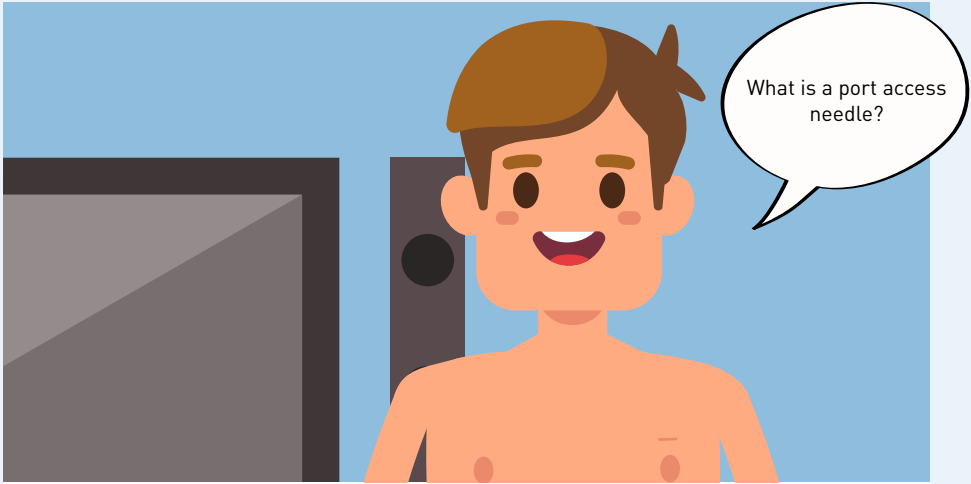


The port system must be flushed with a heparin or saline solution to prevent blood clots from forming inside the catheter. It is recommended that the systems be flushed after an infusion or injection, and every four weeks when not in use.



Does William need to wear a dressing over the scar or not? It may be a silly question as I know he does not have one now and have not questioned it, but when will it be needed?

It is not a silly question at all. When the port is not in use, William does not need to wear a dressing over the scar. And now that it has healed and there are no extra precautions for having an infection in this area compared to other part of the skin now. However, a port is an implanted device, which is why we daily need to confirm no reaction to it will arise. The only time when a dressing is needed, is when William will have a port access needle inserted.

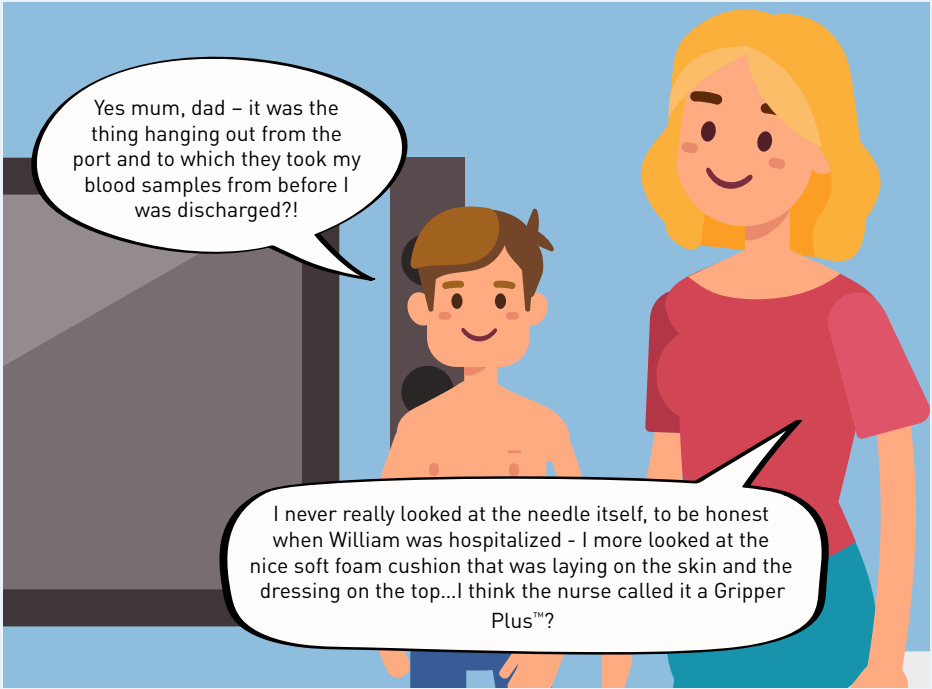


What is a port access needle?



A port access needle (non-coring or a Huber needle) is a port access needle which – inserted – is the connection between the port and the infusion line. The Huber needle has a special needle tip design to be used to access a port. As the port has a silicone septum where the needle will be inserted, it is important to have a needle design which does not damage the silicone. That is where the needle design comes in – it is a non-coring needle: The deflected tip, or the tip of the needle is designed with a 45 degree angle.

The bevel of the Huber point needle - the ground surface of the needle (the cutting edge) is almost perpendicular to the needle shaft in a Huber point needle.



Yes mum, dad – it was the thing hanging out from the port and to which they took my blood samples from before I was discharged?!

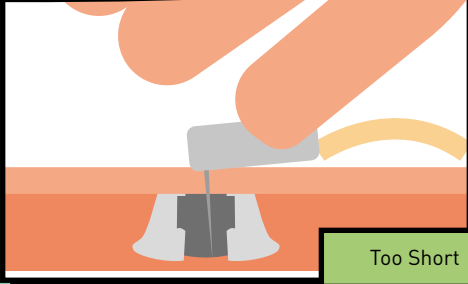
I never really looked at the needle itself, to be honest when William was hospitalized - I more looked at the nice soft foam cushion that was laying on the skin and the dressing on the top...I think the nurse called it a Gripper Plus™?

I see yes, one of the most commonly used is the Gripper Plus™. It is also a safety needle meaning it prevent unintended needle stick injuries from occurring. Gripper Plus™ is also available in a power version so it fits the need of having a CT scan performed, just like we talked about before when speaking of the power port, do you remember?

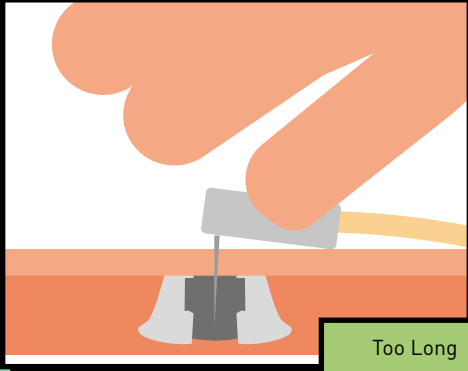
Uh huh!
I do!

Actually, I have some with me today. Let me show how it works on the dummy. It is important to have the correct size of non-coring needle that matches the port. In William ´s notes from the hospital, they have added that William needs a 21G, 19mm Gripper Plus™. That tells me that by having this size, the bevel (the hole at the end of the needle) clears the silicone septum, so the infusion will be infused without risk of leaking, or any damage to the silicone septum or unintended irritation to the skin.

You may see now that the safety arm rests flat on the base and the needle touches the reservoir floor. William, when you have the needle inserted, it can stay in for several days and may be used for having your blood samples take, infusion or even nutrition for the ones having a need for it. During that time, the port area and port access needle will be covered by a semipermeable dressing - the size recommended is as big, so it covers the 4 cm area surrounding the base. When your treatment etc. is over, the dressing and port access needle will be removed after the port has been flushed and it can now stay like that up to 4 weeks according to recommendations. As you have your treatment every 3 weeks, you will automatically have it flushed and the port access needle will be removed. Also, when your treatment is over and ended, you may still have a period where you will keep your port implanted. Then I will come and flush it for you every 4 weeks, instead of you going to the hospital.



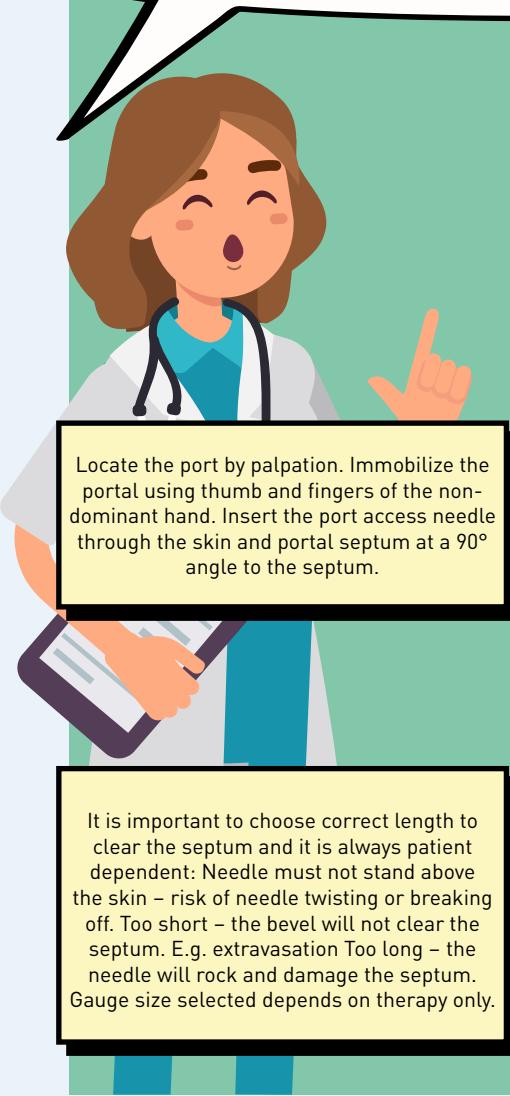
Too Short



Too Long



Correct Length



Locate the port by palpation. Immobilize the portal using thumb and fingers of the non-dominant hand. Insert the port access needle through the skin and portal septum at a 90° angle to the septum.

It is important to choose correct length to clear the septum and it is always patient dependent: Needle must not stand above the skin - risk of needle twisting or breaking off. Too short - the bevel will not clear the septum. E.g. extravasation Too long - the needle will rock and damage the septum. Gauge size selected depends on therapy only.

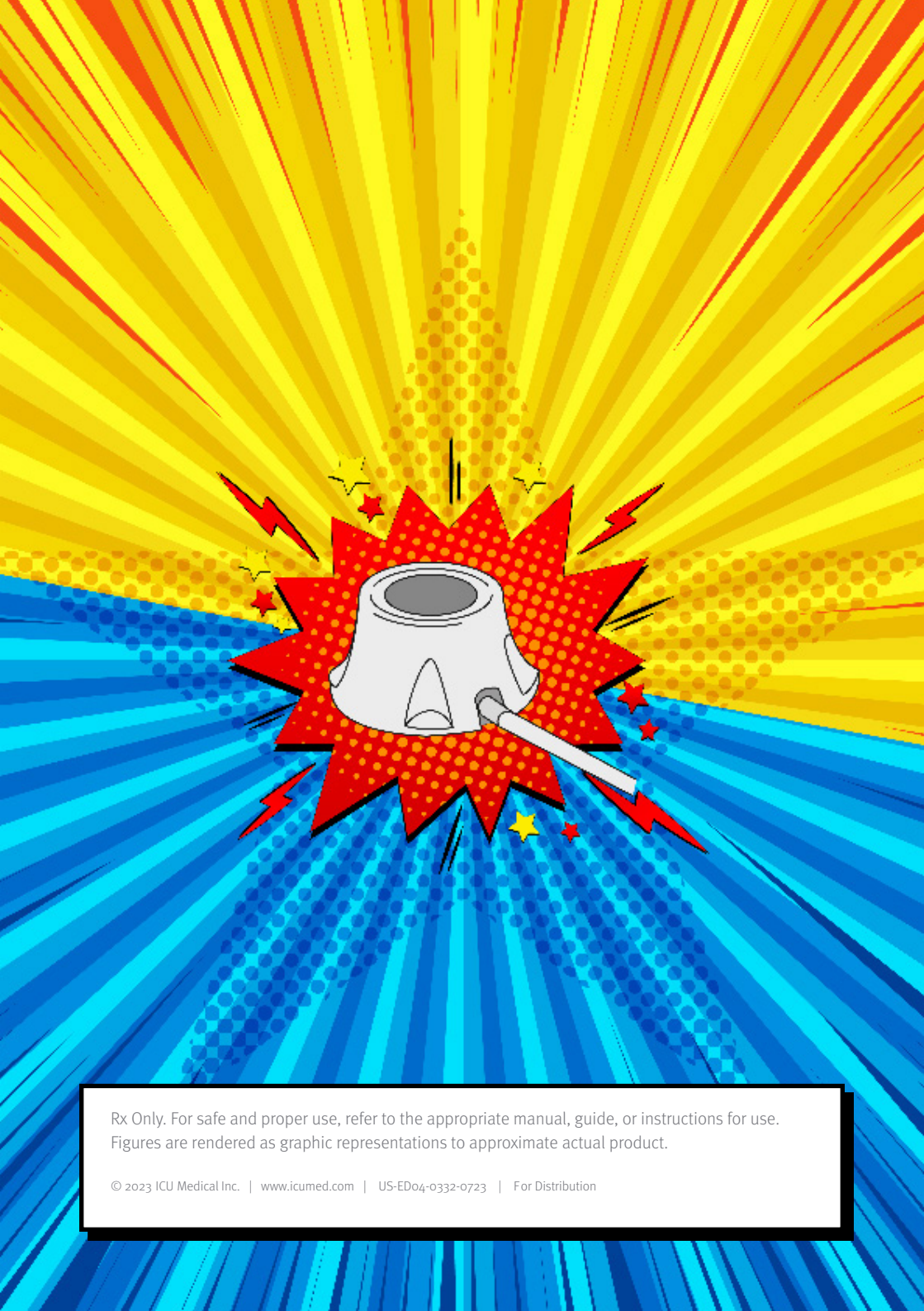




Thank you so much for coming by today, Nurse Florence!

The following week...





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