PORT-A-CATH DISCHARGE EDUCATION

Information:
A Port-a-cath (Port) is an implanted device giving access to veins for patients who need regular long-term administration of antibiotics or chemotherapy drugs. Chemotherapy drugs can damage small veins and often need to be delivered into a large central vein where the drugs are instantly diluted by the blood stream and distributed efficiently to the entire body. For patients with difficult veins, ports can also be used for withdrawing blood for blood tests.

What should I expect after the port placement?
- The area around the port may be swollen and tender following insertion.
- You may have some mild pain or muscle soreness. This is normal. You can take acetaminophen (Tylenol®) or other non-aspirin pain medicine if you need to. Your doctor may give you a prescription for pain medicine.
- If left unused the port needs to be flushed with heparinized saline once a month to prevent it from getting blocked.
- Once the wound is healed no dressing will be required.
- Once the port is no longer required, it will be removed. The removal process will be similar to insertion, performed under local anesthetic and sedation.

Bathing & Wound Care:
- The portacath system requires no daily care from you.
- You may shower after the port-a-cath has been inserted. However, keep the sterile dressing clean and dry for 5 days post placement, this may include applying saran wrap with duct tape to keep a clean and dry access site. IF the dressing gets damp it will need to be changed immediately if this occurs in the first 5 days post placement.
- No baths, hot tubs, rivers or lakes submersions of the access site to decrease the risk of infection.
- Once the wound is healed no dressing will be required.
- Apply a warm compress to affected area for comfort as needed.
- Protect the skin over your port. Don’t wear tight bras, suspenders, or carry a purse or bag across your chest.
- It is recommended that you do not perform any strenuous exercises or do any heavy lifting for 10 -14 days following the procedure.

Follow-up visit information:
Call your primary doctor after discharge for a follow-up appointment if you don’t already have one. Follow up with Interventional Radiology is not routinely necessary.

Occasionally, a situation will require prompt attention and an emergency room visit is necessary:
- Chest pain
- Pain, swelling, redness or drainage of pus around the port site or incisions
- Swelling of the neck, face or arm on the side where the port is inserted
- Shortness of breath or dizziness

With these urgent situations, please call Oregon Interventional Radiology to see what your best course of action is.

If you received Conscious Sedation (IV sedation) and are discharged the same-day:
- You must have someone drive you home when you leave the hospital.
- For 24 hours after your procedure, do not do anything where you need to be mentally alert. This includes making important decisions, operating machinery, signing important papers, or DRIVE etc.
- Eat light for the first 24 hours, and then start eating more as you are able. Drink plenty of fluids.
• If you are taking pain medications:
  ▪ Take as directed
  ▪ Do not drink alcohol while taking narcotic pain medication
  ▪ Do not drive
  ▪ If you are constipated, drink more fluids and eat more fiber. You can also use an over-the-counter stool softener.

For any questions please contact the Oregon Interventional Radiology clinic at 541-618-5801

In all emergency situations call 911