



Affix Patient Label

Patient Name:

Date of Birth:

Informed Consent: Radiology Guided Chest Port Placement

This information is given to you so that you can make an informed decision about having _____
chest port placement.

Procedure details:

The physician will use ultrasound to guide placement of a needle into a large vein, usually at the base of the neck. A wire will replace the needle and the hole will be enlarged gradually. A guiding hollow tube will be advanced through the vein to your heart. The physician will next create a pocket in the chest wall. A catheter will be tunneled under the skin from the pocket to the vein entrance. This catheter will be placed through the hollow tube into the main vein returning blood from your arms and head to your heart. The hollow tube will be removed. The port will be attached to the catheter and placed into the pocket created in the chest wall. The puncture at the vein entrance and the pocket will be sutured closed and also sealed with glue and tape strips.

Local anesthetic will be injected at the vein puncture site, around the pocket, and in between those locations. You will be given some intravenous medication to relax you and for pain during the procedure. For most patients, the procedure is well tolerated.

Reason and purpose of the procedure:

To place a long lasting device called a port, just under the skin of your chest. This port is attached to a catheter that passes into a major blood vessel returning blood to your heart.

Benefits of this procedure:

You might receive the following benefits. Your doctor cannot promise you will receive any of these benefits. Only you can decide if the benefits are worth the risk.

- To allow easy access to your blood for giving chemotherapy, contrast for CT scans, and other medications.
- To allow easy access to your blood for blood draws.
- Avoid the repeated needle sticks sometimes required for blood draws or IV starts.
- Avoid damage to your blood vessels or skin, which can occur when chemotherapy and some medications are injected into smaller veins in your arm.

Risks of procedures:

No procedure is completely risk free. Some risks are well known. There may be risks not included in the list that your doctor cannot expect.

Information on moderate sedation:

You will be given medicine in an IV to relax you. This medicine will also make you more comfortable. This is called “moderate sedation”. You will feel sleepy. You may even sleep through parts of your procedure. We will monitor your heart rate and your blood pressure. We will also monitor your oxygen level.

If your heart rate, blood pressure or oxygen levels fall outside the normal range, we may give medications to reverse the sedation. We may be unable to reverse the sedation. We may need to support your breathing. Even if you have a NO CODE status:

- You may need intubation to support your breathing.
- You may need medications to support your blood pressure.

We will re-evaluate your medical treatment plan and your NO CODE status when sedation has cleared your body.

Benefits of moderate sedation:

You might receive the following benefits. Your doctor cannot promise you will receive any of these benefits. Only you can decide if the benefits are worth the risk.

- Less pain during the procedure.
- Less anxiety or worry.
- Decreasing your memory of the procedure.

Risks of moderate sedation:

No procedure is completely risk free. Some risks are well known. There may be risks not included in the list that your doctor cannot expect. The list includes:

- Decreased breathing during the procedure and dropping oxygen levels. To help you breathe, a tube may be placed into the mouth or nose and into the trachea to help you breathe.
- Allergic reactions: nausea & vomiting, swelling, rash.
- Vomit material getting into the lungs.
- A drop in blood pressure. This needs fluids or medicine to increase blood pressure.
- Heart rhythm changes that may require medicines to treat.
- Not enough sedation or analgesia resulting in pain or discomfort.
- Your physical and mental ability may not be back to normal right away. You should not drive, or make important decisions for at least 24 hours after the procedure.

Risks of port placement:

- **Injury to lung, blood vessels or nerves at the base of the neck or chest:** You may need surgery to repair.
- **Infection:** Can occur in the skin around the port or catheter. You may need to have the port removed. You may need antibiotics. It is important you follow instructions about caring for your dressing.
- **Infection inside the catheter:** You may get a serious blood infection. You may need to be admitted to the hospital. You may need antibiotics. The port may have to be removed.
- **Blocked catheter;** Blood clots or fibrin can clog the catheter or prevent blood from being aspirated (pulled back from the catheter.) Blood clots can also clog the vein around the catheter, causing swelling. This can sometimes be treated with medications injected through the catheter. The port may need to be replaced. You may have to be treated with blood thinners.
- **Catheter tip migration:** The tip of the catheter can float into the wrong blood vessel. You may need to have the catheter replaced.
- **Complications from sedation medicine:** You may have low blood pressure. You may have breathing problems including slow breathing and choking on vomit (aspiration). If you are sedated you will be monitored by a nurse and given oxygen to breath.

Risks associated with smoking:

Smoking is linked to an increased risk of infections. It can also lead to heart and lung complications and clot formation.

Risks associated with obesity:

Obesity is linked to an increased risk of infections. It can also lead to heart and lung complications and clot formation.

Risks specific to you:

Alternative treatments:

Other choices:

- Do nothing. There may be alternative methods to receive your medications.

General information:

During this procedure, the doctor may need to perform more or different procedures than I agreed to.

During the procedure the doctor may need to do more tests or treatment.

Students, technical sales people and other staff may be present during the procedure. My doctor will supervise them.

Radiology images will be obtained. They will be part of my medical record. These may be published for teaching purposes. My identity will be protected.



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By signing this form, I agree:

- I have read this form or had it explained to me in words I can understand.
 - I understand its contents.
 - I have had time to speak with the doctor. My questions have been answered.
 - I want to have this procedure: **Chest Port Placement** _____
-
- I understand that my doctor may ask a partner to do the surgery/procedure.
 - I understand that other doctors, including medical residents or other staff may help with surgery. The tasks will be based on their skill level. My doctor will supervise them.

Patient Signature: _____ Date: _____ Time: _____

Relationship: Patient Closest relative (relationship) _____ Guardian/POA Healthcare

Interpreter's Statement: I have interpreted the doctor's explanation of the consent form to the patient, a parent, closest relative or legal guardian.

Interpreter's Signature: _____ ID #: _____ Date: _____ Time: _____

For Provider Use ONLY:

I have explained the nature, purpose, risks, benefits, possible consequences of non-treatment, alternative options, and possibility of complications and side effects of the intended intervention, I have answered questions, and patient has agreed to procedure.

Provider signature: _____ Date: _____ Time: _____

Teach Back:

Patient shows understanding by stating in his or her own words:

- _____ Reason(s) for the treatment/procedure: _____
- _____ Area(s) of the body that will be affected: _____
- _____ Benefit(s) of the procedure: _____
- _____ Risk(s) of the procedure: _____
- _____ Alternative(s) to the procedure: _____

OR

_____ Patient elects not to proceed: _____ Date: _____ Time: _____
(Patient signature)

Validated/Witness: _____ Date: _____ Time: _____