

Medical Oncology

Port Information Sheet

Why do I need a port?

- A port eliminates the need to find an arm vein every time you get your chemotherapy. This stops the prodding in your arm and risk of “blowing” your vein.
- Some types of chemotherapy are uncomfortable when injected into a vein so the port avoids this discomfort.
- Some types of chemotherapy can only be given through a port because they are dangerous to give through a vein.

What is a port?

- A port is a small device that is surgically placed under the skin, usually in the upper chest area.
- It has two basic parts: a round basin and a small tube-like catheter.
 1. The basin is the area that you can sometimes see under the skin like a small bump, smaller than the size of a quarter.
 2. The catheter is a tube that is connected to the basin and ends in a large vein in the chest.

How is a port placed?

- Your port will be placed in an outpatient procedure that lasts about an hour.
- The port is placed under the skin usually between your collarbone and breast by either a surgeon or an interventional radiologist.
- The port is put in your chest under local anesthesia. This means you will not be put completely to sleep. The local anesthesia will numb your skin so that you will feel pressure but no sharp pain.

What do I do to get ready to have my port placed?

- You need to let your doctor know what medicines you are on. This is very important if you are on blood thinners such as aspirin, Coumadin® or Plavix®.
- The night before your procedure, you cannot have anything to eat or drink after midnight.

How are medicines and fluids delivered through the port?

- To access your implanted port, the nurse will insert a special needle through your skin. You will probably feel a pricking sensation. A local anesthetic cream is available if accessing is too uncomfortable for you.
- EMLA cream (Lidocaine/Prilocaine) is **NOT REQUIRED** in order for a port to be accessed. It is used at the patient request for comfort issues. Apply a dime size amount of cream to the top of the port 30-60 minutes prior to your appointment. Do not rub cream into the port site. Cover the site with plastic wrap (Press ‘n Seal Saran Wrap works well).

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- The medicine or fluids flow through the needle, into the portal chamber and through the catheter directly into the bloodstream.

How do I care for my port after it is placed?

- Do not get the incision site wet for five days after insertion.
- You may shower within the first five days as long as the incision is covered. Press'n Seal® plastic wrap works well.
- Don't pick or scratch the Dermabond glue or Steri-Strips. They will come off on their own.
- After your incisions heal, the skin over your implanted port doesn't need any special care. You can wash it as you normally would.

Can blood tests be drawn through my port?

- Your blood test will be drawn in the lab using your arm. If the phlebotomist has difficulty getting blood in this manner, future labs may be drawn through your port.

How do I care for my port when chemotherapy is finished?

- You will need to have your port accessed and flushed by a nurse every 6-8 weeks to make sure it continues to work properly. Appointments will be made for port flushes once your chemotherapy is finished. If you do not see a PORT FLUSH appointment on your schedule, please ask an infusion scheduler to add one.

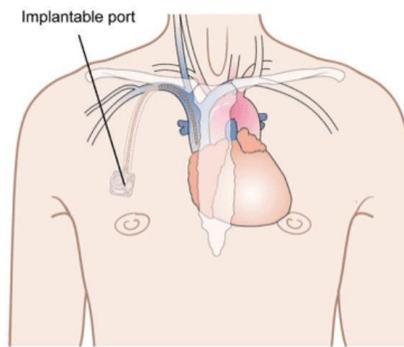
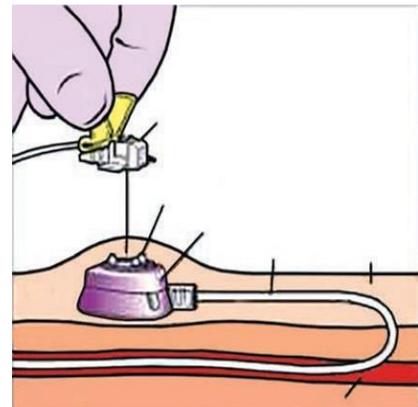


Diagram showing an implantable poi



See the *Chemotherapy and Immunotherapy Patient Guide* book for more information.

If you have questions or concerns, please call your care team at:
Bronson Cancer Center – Battle Creek 269-245-8660
Bronson Cancer Center – Kalamazoo 269-286-7170