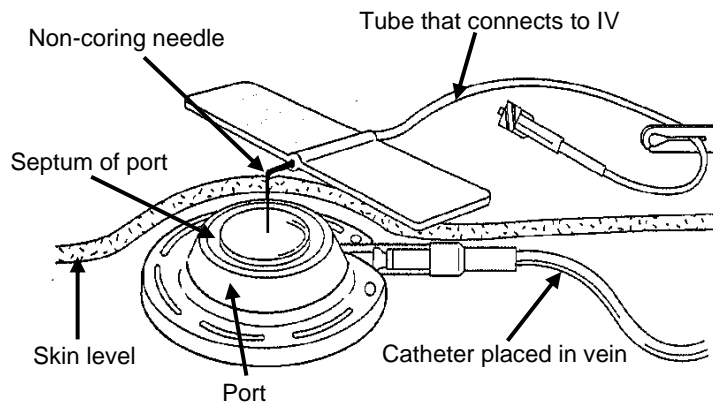




**NATIONWIDE CHILDREN'S**  
*When your child needs a hospital, everything matters.*

### IV: Implanted Port

An implanted port is a device that is placed under the skin, usually on the chest, when intravenous (IV) therapy and treatment is needed for a long time. The implanted port, also known as Implantofix® or Port-A-Cath®, has 2 main parts: the catheter and the port (Picture 1). The catheter is a soft, narrow, plastic tube that is put into a vein. The port is a small chamber disk with a silicone rubber top called a septum. The septum reseals itself after it's pierced by a special needle. The port is surgically placed under the skin, usually on the chest.



**Picture 1** A non-coring needle and injection cap are used with the implanted port. Some needles may look different once inserted.

#### Uses

Once the catheter is in the vein, a port can be used to:

- Give medicines.
- Give blood and blood products.
- Draw blood for some lab tests.
- Give parenteral (IV) nutrition.

## Benefits

- Your child may not need to receive as many needle sticks or intravenous catheters (IVs). This does not mean that they will never have to be stuck again.
- IV therapy can be given more easily and with less pain.
- Once the incision at the port site has healed and as long as there is no needle in place, your child can do normal activities. This includes activities like:
  - Bathing or showering
  - Exercising
  - Playing sports
  - Swimming

## How the Port Works

- A non-coring needle goes through the skin into the port for IV therapy. You can use numbing cream on the skin **before** the needle is put in.
- IV fluid or medicine flows through the needle while it's in.
- A new, clean (sterile) dressing or bandage is used to cover and protect the needle.
- If the dressing leaks or gets loose, the needle and dressing need to be changed.
- After an injection into the port, but before the needle is removed, the catheter must be flushed with a small amount of heparin. Heparin is used to keep blood from clotting in the catheter.

## Inserting the Port

- Your child may go to the operating room or to Intervention Radiology to have the port placed. Once it's in place, IV nutrition and medicines can be given, and blood can be drawn.
- The cut or cuts in the skin needed to place the port are closed with stitches and/or a glue made for skin called DERMABOND®.
- After the incisions heal, you will only see the shape of the septum under the skin.
- Your child's skin may be tender around the implanted site. This is normal and should go away within a few days.
- The port can be used as soon as your child's doctor or health care provider says it is okay. This is usually 7 to 14 days after it's put in.
- Around 3 weeks after the port is put in, body tissue will heal around it to hold it in place.

## Caring For the Port

Since the port is under your child's skin, it doesn't need a lot of care.

- Wait 24 hours before showering or swimming after the needle is taken out. This will give the needle hole time to heal and lower the risk of infection.
- Check the site every day for any redness, swelling, warmth, or other signs of infection.
- Wash the skin at the injection site between injections or infusions. Do this when there is no needle in place.
- When treatment is over, or every 7 days, the needle is taken out and replaced if needed.
- If there is no needle in place, bandages are not needed.

## Warning

- The infusion tubing can get wrapped around a child's neck. This can lead to choking (strangulation) or death.
- DO NOT leave the infusion tubing where infants or children can get tangled up in it.
- Talk to your child's health care provider or doctor:
  - If your child has been tangled in their tubing before.
  - To learn the steps to take to help make sure the tubing does not get wrapped around your child's neck, such as keeping the tubing away from the child as much as possible.
  - Any other concerns you may have about the risk of strangulation from infusion tubing.
- If your child is injured by the infusion tubing, please report the event to the FDA. Your report can provide information that helps improve patient safety. The website to make a report is: <https://www.accessdata.fda.gov/scripts/medwatch/index.cfm?action=reporting.home>

## Skin Treatment

Your child has a higher risk of infection because of their port. Chlorhexidine gluconate (CHG) treatment helps prevent infection. While your child is in the hospital, and when their port is used, they will get a CHG treatment 1 time every 24 hours with warmed CHG cloths.

- **Your child will NOT get a CHG treatment if** they are younger than 2 months of age, have a CHG allergy, their skin is not healed, or they have other reasons why they cannot.

- You can help give your child the CHG treatment by following these steps:
  1. You will get 6 cloths to use. Use 1 cloth for each arm and leg (4 total). Use 1 for the front and back of the torso (2 total). Wipe with a back-and-forth motion for about 20 seconds on each separate area. Do not reuse any cloths on any areas.
  2. Do not wipe CHG cloths over the port if it's being used or accessed. Do not wipe the cloths over the port dressing. If the dressing gets wet or loose, tell the nurse.
  3. Do not use CHG cloths on the face, ears, eyes, nose, mouth, or private areas (genitals). You may use Comfort Bath® cloths to wash these areas.
  4. Let the skin air-dry. Do not rinse with water. Tell the doctor or health care provider if redness, rash, irritation, or an allergic reaction happens on the skin.
  5. Do not use lotions, creams, deodorant, or powders after any of the days you get a CHG treatment.
  6. Throw the CHG cloths away in the trash. Do not flush them down the toilet.
  7. **Dress your child in new hospital pajamas after each CHG treatment.**

## Possible Problems

Some problems can occur with an implanted port. These may include:

- Infection at the port injection site or in the blood. Check the site for redness, swelling, pain, or yellow or green drainage.
- Blood clots in the catheter or in the vein.
- Movement of the implanted port and irritation to the vein.
- Swelling and tenderness caused by the needle slipping out of the port.
- Trouble finding the port to insert the needle.

## Removing the Implanted Port

The implanted port will be removed when the IV therapy is finished. This is done in the operating room or in Interventional Radiology under general anesthesia.

## When to Call the Doctor

Call your child's doctor or health care provider if any of the following occurs:

- You notice any redness, tenderness, bruising, swelling, warmth, or drainage at, or near, the port injection site.
- They have aches, flu-like symptoms, or a fever higher than 100.4° Fahrenheit (F) or 38° Celsius (C).
- There is swelling, tingling, or pain at or near the port injection site or in the arm closest to the port.