

What is a Port-a-Cath?

A port-a-cath is a titanium chamber (port), which is connected to a thin hollow silicon plastic tube (catheter). The entire device is placed underneath the skin on the chest and the catheter is threaded from the chamber into a large vein at the entrance of the heart.

This type of catheter is usually used to give medicine (e.g. antibiotics or chemotherapy). To do this, a special type of needle called a gripper needle is inserted through the skin into the port.



How should I look after myself when I get home from surgery?

On the day of surgery, it is better to have someone to accompany you home after surgery and look after you overnight.

You can take on-shelf pain medication if needed (e.g. paracetamol or ibuprofen). Your normal medications can be taken unless otherwise directed.

You may experience some mild swelling and/or bruising in the area of the incision. It may take several days to get better.

You can remove your dressings one week after surgery. In all cases, skin stitches are dissolvable after 10 days and you don't have to go to your GP to take them out.

When can I have a shower?

You can take a short shower after 48 hours. The steri-strips (small white strips) on your wound will be covered by a waterproof Opsite dressing.

If the surgeon used skin glue on the incision instead of steri-strips, you can remove the dressing after 48 hours, and you can have short shower as soon as you like. The glue will flake off over the next 2-3 weeks.

In some cases, a needle can be left in situ for early use of medication (e.g. IV antibiotics) in day one after your operation. In this case, please follow the exact instructions given by the surgeon. In general, showering is not permitted until the needle is removed.

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When can I use the Port-a-Cath?

The Port-a-Cath can be used normally after one week of insertion, as postoperative swelling has the potential to make access more challenging. However, in a few cases, it may be used immediately but only if a needle has been left in situ and you have been instructed by your surgeon to do so.

You may feel a small bump under the skin which is the site of the port

How do I clean the Port-a-Cath?

When not in use, the Port-a-Cath must be flushed at least every six weeks, using heparinised saline to prevent blood clots forming inside the catheter.

You should follow the special instructions to flush out your Port-a-Cath given to you by the team looking after you.

Should I limit my activities with a Port-a-Cath?

Strenuous exercises or activities should be avoided during the first ten days.

You can wear a seatbelt, and you can drive your car, unless told otherwise by your doctor.

When to seek help

You need to seek medical advice if one of the following appears:

- Chills
- Redness
- Tenderness
- Arm swelling
- Fever over 38
- Shortness of breath
- Bleeding from incision
- Swelling at the site of the surgery
- Blockage or failure to inject medication (due to thrombosis)

Port-a-Cath usage and care

Is always performed by your main team looking after you. In general, effective hand washing practice used alongside Aseptic Non-Touch Technique (ANTT) is vital in reducing the risk of infection and should be applied to all aspects of the care.

Who can I contact for further information and support?

Your follow-up will be with your referring doctor on the team that is looking after you.

If you have any questions during the first 48-72 hours before using the Port-a-Cath, please contact Dr Theivendran

Telephone: **02 9066 6547**

Who can I contact for further information and support?

Once the system has been implanted under your skin you will be instructed by the treating team to care for your Port-a-Cath.

The following are some general guidelines:



Inspect your port regularly. If you have redness, tenderness or swelling after the wound has healed or any leakage from the site, contact your doctor immediately.



Avoid strenuous activities for at least 10 days, especially those involving the chest or the arm depending on the placement of port.



Allow the nurses to flush the implanted port between each use, and every four weeks when not in use, with heparin solution to prevent blood clots and blockages in the catheter.



Minimize repetitive activities like swimming, rowing or weight-lifting to prevent damage or fragmentation of the catheter. Do consult your doctor before engaging in such activities.

When the system is looked after well, it can remain in place for the entire duration of the therapy