

ACCESSING YOUR IMPLANTED ACCESS PORT

TRANSCRIPT (page 1 of 2)

Whether you are receiving care in the hospital, as an out-patient, from a home care company, or are caring for a loved one; only a trained member of your healthcare team will access a port.

When caring for a port at home, please talk to your healthcare provider about what you and your family members will need to do in order to keep your port working well and complication-free.

Because the port is under your skin, in order to access, or use your port, a special needle called a non-coring needle (sometimes called a Huber needle or Gripper needle) will be inserted through your skin and into the rubber top of the port. This type of needle is attached to a tube with an injection cap at one end and a clamp in the middle.

These needles are specially designed so that they don't cause damage to your port. Most are bent at a 90-degree angle to allow them to be secured during times when your port is being accessed. Never use any other type of needle with your implanted port.

The first few times your port is accessed, your healthcare provider may recommend you use a numbing medicine to reduce any pain. As you use your port more often, the pain will decrease.

"Are you ready for your next treatment?"

When caring for your port, always use an area that is clean and germ-free to prevent infection. The area must be sterile.

Anybody coming into contact with the port must wash their hands thoroughly using soap and warm water, or an alcohol based hand sanitizer. Gloves and a mask are recommended to increase your protection against infection.

If your needle is not already in for your treatment, your healthcare provider will insert the non-coring needle. First, your healthcare provider will clean the skin over the port to prevent infection. Allow the area to dry. Do not fan or blow the area to speed drying; this will only increase your risk for infection.

(Continued on next page)

ACCESSING YOUR IMPLANTED ACCESS PORT

TRANSCRIPT (page 2 of 2)

To insert the needle, your healthcare provider will hold the edges of the port with one hand and use the other hand to push the needle into the center of the port. It needs to go all the way to the back wall of the port. It may make a scratchy sound when it hits the hard surface at the back of your port.

Now, your healthcare provider will open the clamp and slowly pull back on the syringe. If blood flows back into the tubing, the needle is in the right place. If not, it will need to be repositioned.

Each time your port is accessed, it will need to be flushed. If you need medication it will be given at this time, and then it will be flushed again.

At the end of your treatment session your needle can be removed. Or, if your port needs to be accessed often, you may be able to leave your port needle in for up to 7 days, if your healthcare provider tells you to.

If it is left in, make sure it is covered with a sterile dressing at all times. Usually it is covered with a clear dressing that must be changed every 7 days. If you are allergic to the clear dressing, your healthcare provider may cover your needle with a gauze dressing which must be changed every 48 hours to prevent infection.

No matter what dressing is used, remember, your needle needs to be changed every 7 days to prevent infection.

If you are being treated at home, talk to your healthcare provider, pharmacist or garbage collection company about the correct way to dispose of syringes, tubing and needles.

And if you have any questions about caring for your port, talk to your healthcare providers. They are there to help.

"Well, I think it looks really good. It's not hurting you?"

"No, not at all. And it's not red or anything like that."

"No."