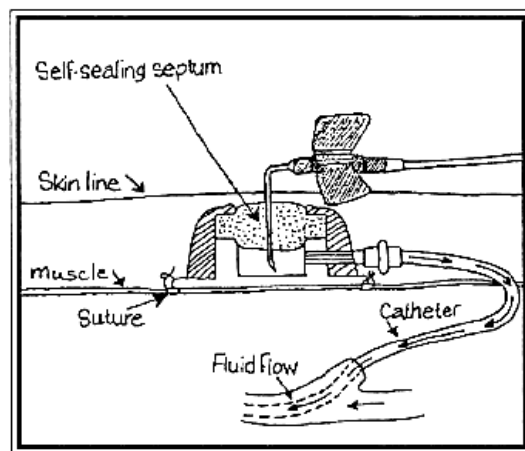


# Infusion Ports

An *Infusion Port* (also called a Port-a-Cath, Mediport, InfusaPort, P.A.S. Port, etc.) is a type of I.V. catheter, which is surgically implanted under your skin. It provides an entrance into your veins. Your infusion port allows medications or solutions to be given intravenously whenever needed.

To infuse medications or solutions through an infusion port, a special needle called a *Huber* needle is placed directly through the skin into the infusion port.



Your homecare nurse may routinely access (enter) the infusion port, or you may learn to access the port on your own.

# Flushing Your Port

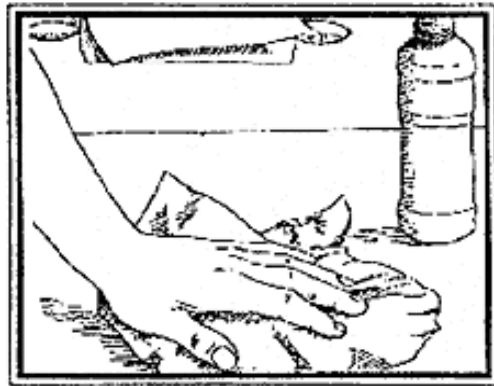
***Flushing*** your port means infusing a small amount of solution into the port to prevent “clogging”.

Here are the steps for flushing your port:

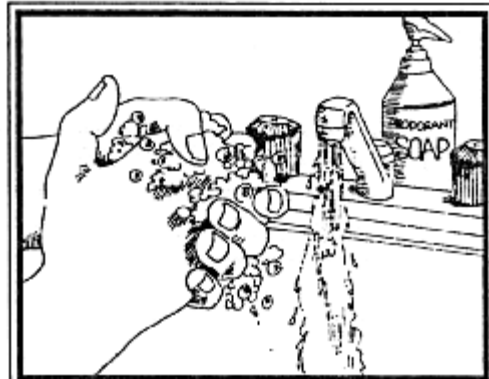
## Equipment:

- Prepared Saline Flush Syringe/s
- Prepared Heparin Flush Syringe
- Alcohol wipes
- Waste Container

1. Clean your work area.



2. Wash your hands thoroughly.



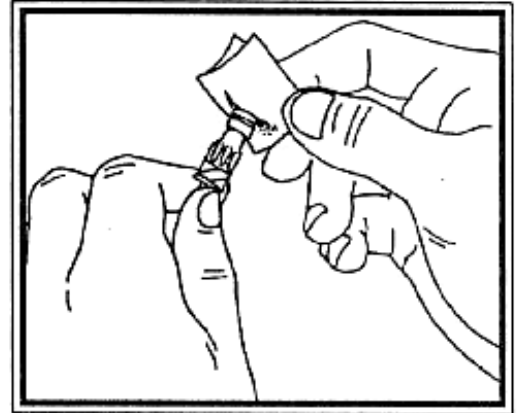
3. Prepare your flushes as instructed by your nurse.

# Flushing Your Port (continued)

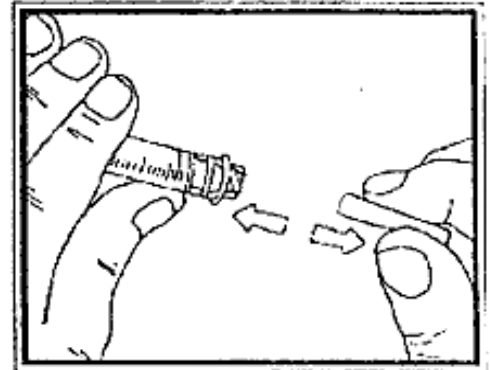
## Routine Flushing

To keep your infusion port open while no other I.V. medications are being given.

1. If your catheter clamp is closed, open the clamp now.
2. Clean the injection cap thoroughly with an alcohol wipe using friction.
3. Pull firmly to remove the protective cap from the syringe.

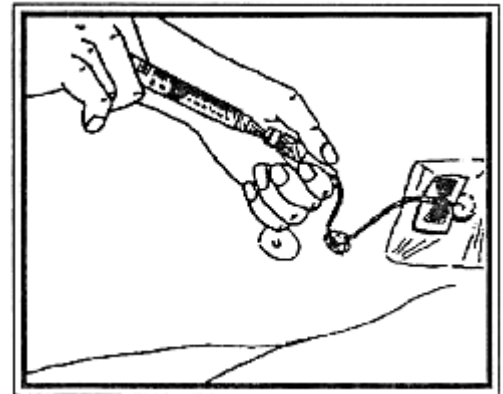


4. Insert the syringe into the injection cap, using a twisting motion. Slowly inject all of the solution into the injection cap.



**Note: If you feel any resistance, DO NOT use force. Refer to the Troubleshooting Guide at the end of this section before proceeding.**

5. Withdraw the syringe from your injection cap, and dispose of it as instructed by your nurse.
6. Reclamp your catheter only if you have been instructed to do so.



# Changing Your Injection Cap

Occasionally it may be necessary for you to change your injection cap. Your homecare nurse will tell you when you need to do this.

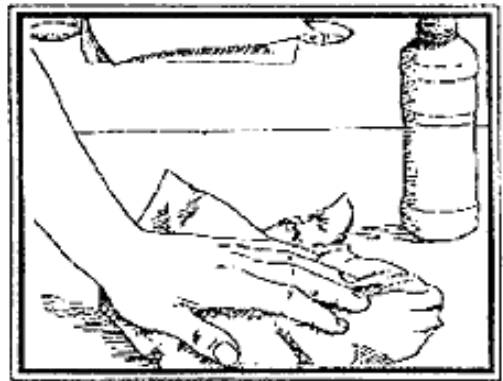
## Equipment

- sterile injection cap
- heparin flush
- alcohol swabs

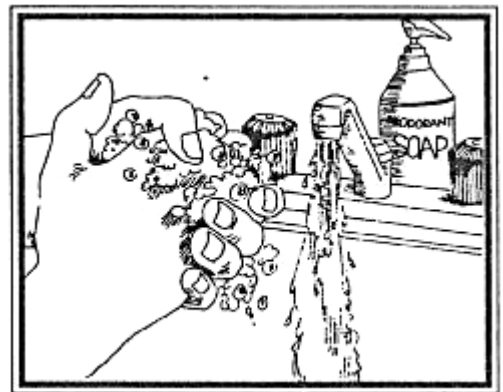
## Procedure

1. To get ready to change your injection cap:

- Gather your equipment.
- Clean your work area.

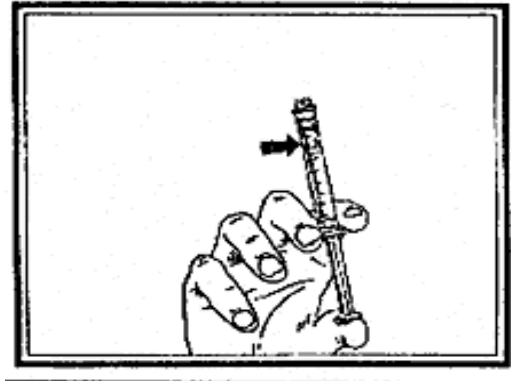


- Wash your hands thoroughly.



# Changing Your Injection Cap (continued)

2. Prepare your heparin flush.



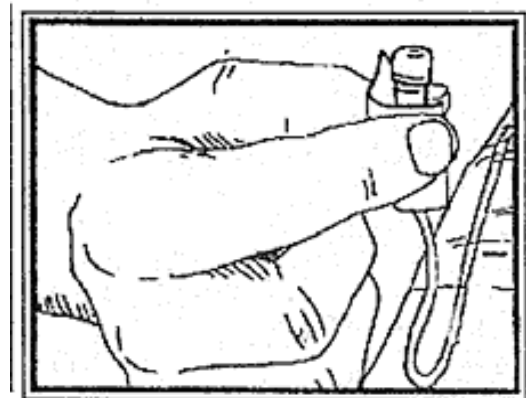
3. Clamp the extension tubing on your infusion port needle.

*If a caregiver is changing your cap, nonsterile gloves are put on now.*

4. To remove the “old” injection cap:

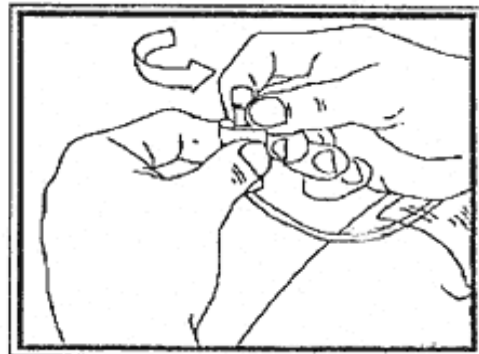
Clean the junction (connection) of the injection cap and catheter tubing thoroughly with an alcohol wipe using friction.

- Using a new alcohol wipe, grasp the hub of the catheter tubing.



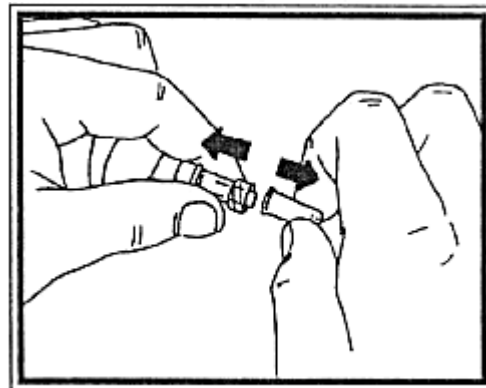
# Changing Your Injection Cap (continued)

Using a twisting motion, remove the old injection cap.

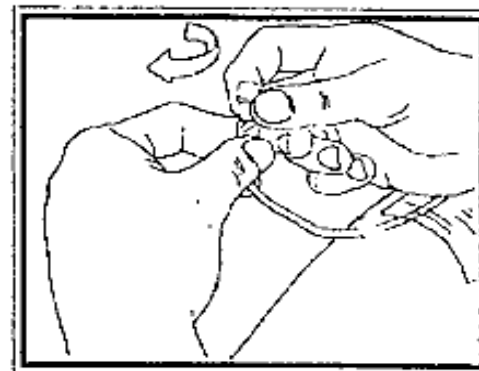


5. To put on the “new” injection cap:

- Remove the protective cover from the new injection cap. **DO NOT** touch the exposed end. It is **STERILE**.



- Place the new injection cap onto the catheter hub. Secure the cap in place with a twist.

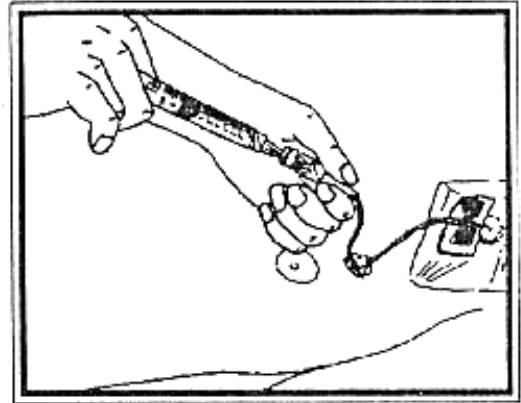


6. Unclamp the attached infusion port extension tubing, and use tape to secure the extension tubing to the dressing, if necessary.

# Changing Your Injection Cap (continued)

7. To complete your injection cap change:

- clean the end of the injection cap with a new alcohol wipe.
- flush with **heparin** solution.
- reclamp the infusion port extension tubing if you have been instructed to do this.
- dispose of used cap and syringe as your nurse instructed.



# Care and Maintenance of Your Infusion Port

## Changing Your Dressing

It is necessary to change your dressing *if* it becomes *wet, loose or soiled*. Good, consistent care of your dressing will reduce the possibility of infection.

### Equipment:

You will need a dressing kit containing:

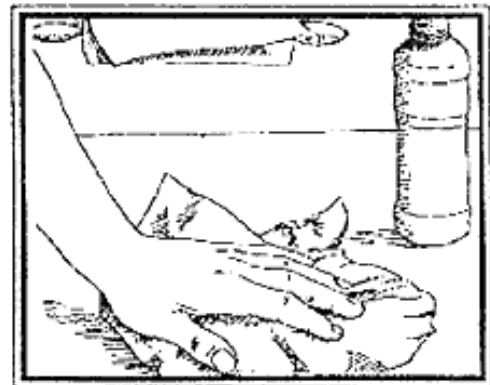
- 1 mask
- 1 pair of sterile gloves
- 1 Chloraprep swabstick
- 1 protective dressing swabstick
- gauze of various sizes
- 1 transparent dressing
- tape

**REMEMBER** to have a waste container within easy reach

### Procedure

1. To get ready to change your dressing:

- Gather your equipment.
- Clean your work area
- Remove your clothing to expose the infusion port site.

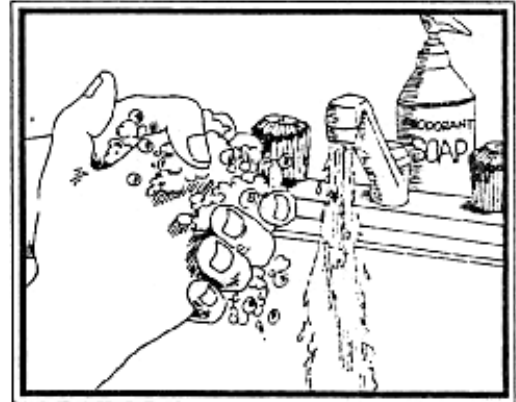


Sit comfortably with a good view of the site.

If a caregiver is changing your dressing for you, you may lie down.

## Changing Your Dressing (continued)

- Wash your hands thoroughly.



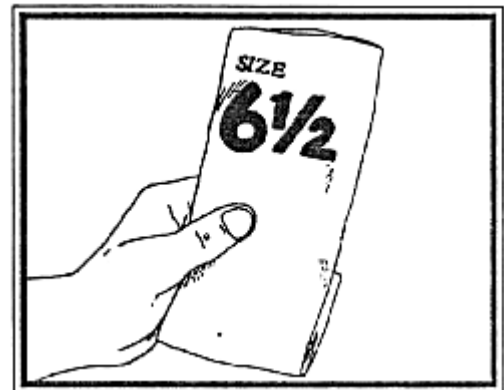
2. To prepare the dressing kit:
  - Open the outer flap of the dressing kit.
  - Put on the mask provided.
  - Unfold the packaging, being careful NOT to touch the inside surface of the dressing kit wrapper.

*The inside of the wrapper is STERILE.*

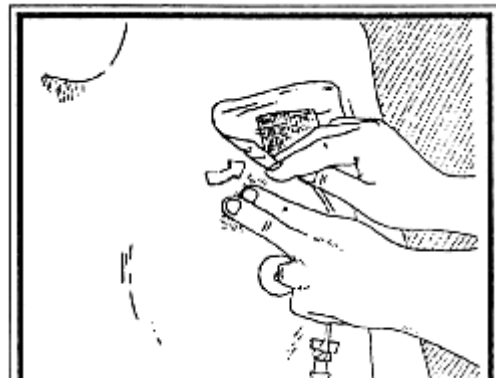


- Set aside the sterile gloves packet.

*If a caregiver is changing your Dressing, nonsterile gloves are put on now.*

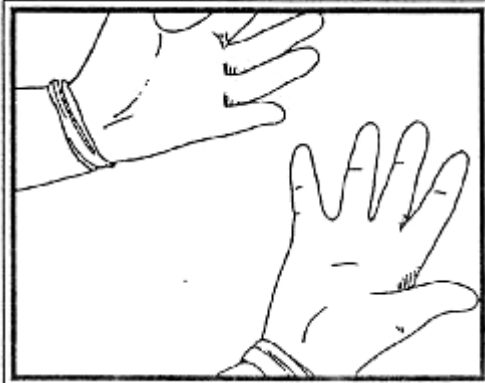
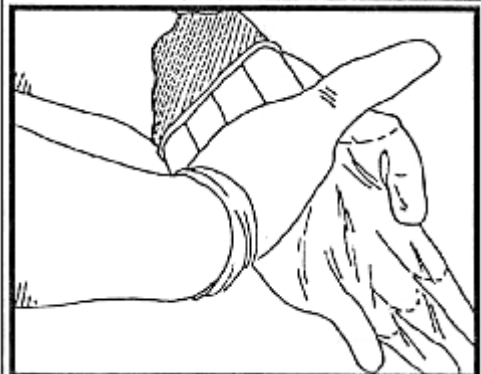
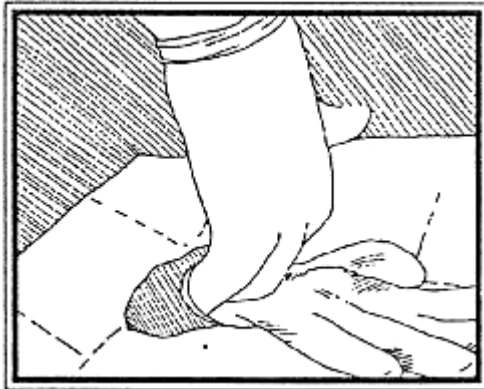
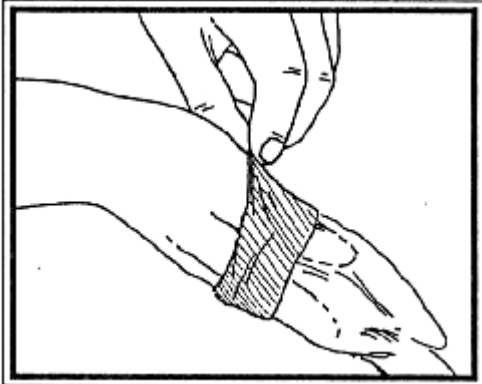
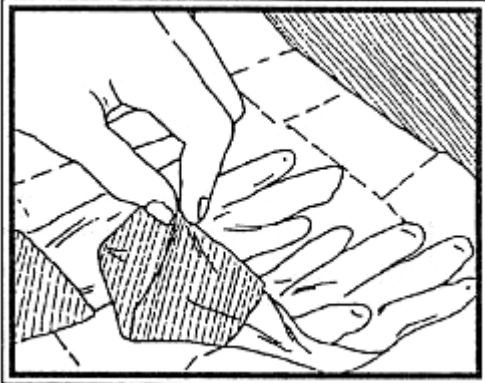
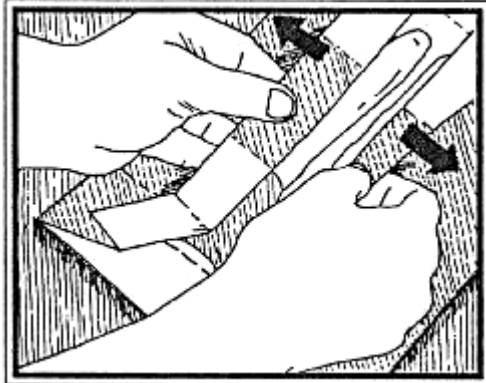
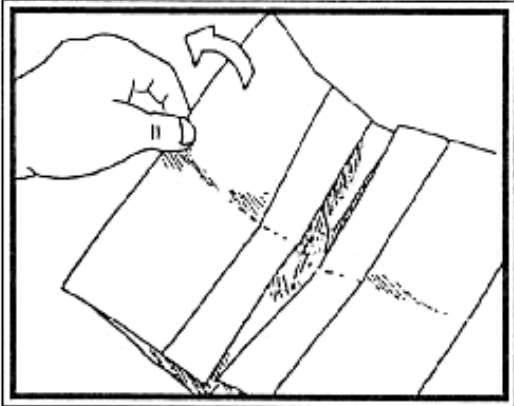
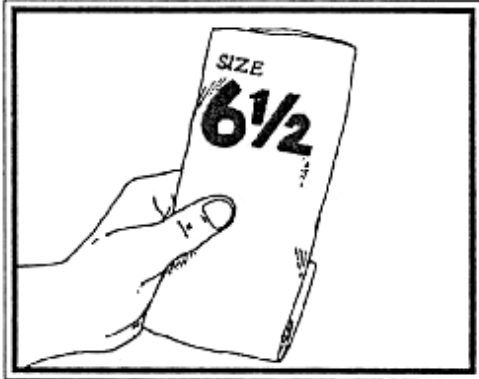


3. Remove the transparent dressing, tape, and gauze that is securing the needle in place, being careful not to dislodge the needle.



# Changing Your Dressing (continued)

To put on your sterile gloves:

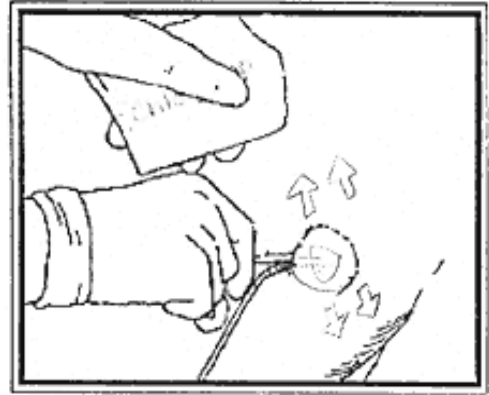


# Changing Your Dressing (continued)

4. Open the Chloraprep packet.

Apply Chloraprep to the dressing area using a back-and-forth friction scrub for 30 seconds.

Do not blot or wipe away solution. Allow the area to dry for 30 seconds

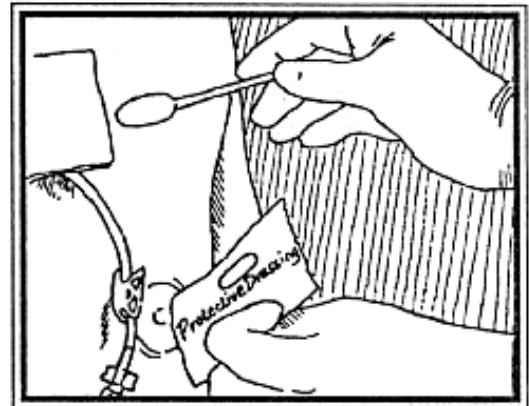


To prepare the site for the dressing:

At this point you may place a small folded gauze under the wings of the needle to provide gentle padding, if your nurse has instructed you to do this.

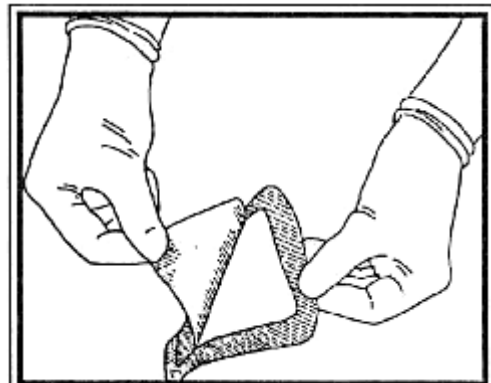
4. Open the protective dressing packet.

- Use the skin protectant swabstick to swab the area around the infusion port and needle. As the liquid dries, your skin will become “tacky” to touch.



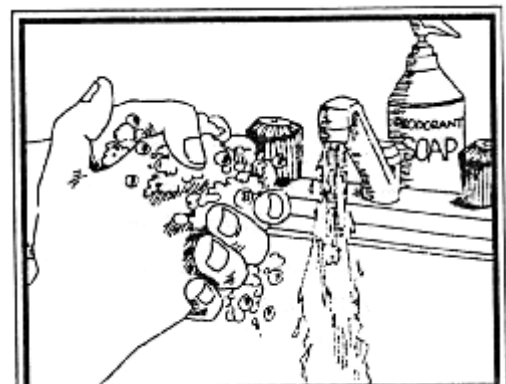
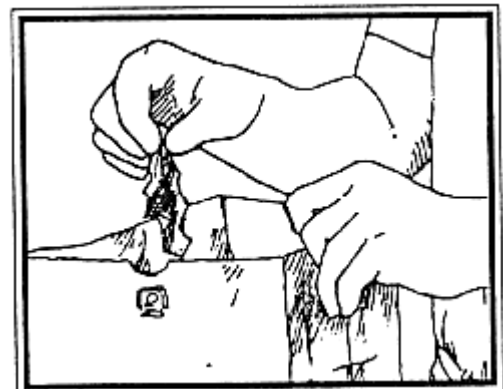
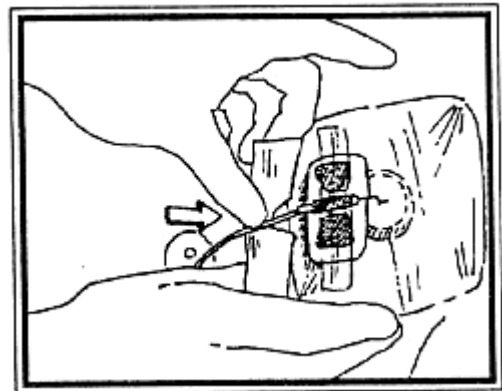
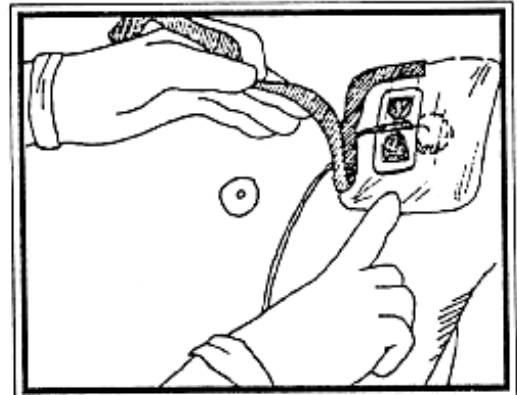
6. Now you are ready to put on your “new” dressing:

- Prepare the transparent dressing by removing the paper window.
- Carefully remove the printed adhesive side.



# Changing Your Dressing (continued)

7. Place the transparent dressing directly over the Huber needle, molding it around the wings and tubing with your gloved fingers.
8. Remove the paper edge of the dressing, tracing the edge of the dressing with your finger to mold it securely to your skin.
9. Secure the lower portion of the dressing with tape if instructed by your nurse.
10. To complete your dressing change:
  - Place all used supplies in your waste container.
  - Remove and discard your gloves.



- Wash your hands thoroughly.

# Troubleshooting Your Infusion Port

Your infusion port will not interfere with your daily activities if proper care is taken. On occasion, a problem may occur. A list of some of these problems, possible causes, and what you should do about them is provided below. Your nurse may provide you with additional instructions.

## **Points to Remember:**

- **NEVER** use scissors near the extension tubing.

<b>Problem</b>	<b>Possible Cause</b>	<b>What to Do</b>
<b>BLOOD VISIBLE IN EXTENSION TUBING</b>	<ul style="list-style-type: none"><li>• Connections are loose or disconnected</li><li>• Cap needs to be changed</li><li>• Damaged extension tubing</li></ul>	<ul style="list-style-type: none"><li>• Check cap and connections, tighten if necessary.</li><li>• Check the injection cap for excessive punctures - you may need to replace it.</li><li>• Flush your port and tape the extension tubing securely to your chest.</li><li>• Check for tubing damage.</li><li>• If the problem continues, call your nurse.</li></ul>
<b>RESISTANCE TO CATHETER FLUSHING</b> <b>MEDICATION WILL NOT RUN OR RUNS SLOWLY</b>	<ul style="list-style-type: none"><li>• Tubing is clamped</li><li>• Bag spiked incorrectly</li><li>• Clotting in catheter</li><li>• Incorrect position of Huber needle.</li></ul>	<ul style="list-style-type: none"><li>• Check if the extension tubing or IV tubing is clamped or kinked.</li><li>• Make certain that the IV bag is spiked correctly.</li><li>• Check the height of the bag.</li><li>• Flush your port with saline, and attempt to restart the infusion.</li><li>• Use gentle pressure to push the Huber needle to the back of your infusion port.</li><li>• If the problem persists, call your nurse.</li></ul>

<p><b>Infection</b></p> <ul style="list-style-type: none"> <li>• fever, sweating, or chills</li> <li>• tenderness or redness at Huber needle or along the course of the vein</li> <li>• drainage and/or pain at the infusion port site</li> </ul>	<ul style="list-style-type: none"> <li>• Possible catheter infection</li> <li>• Possible infection from other causes</li> </ul>	<ul style="list-style-type: none"> <li>• Call your nurse if you find any of these symptoms.</li> </ul>
<p><b>VENOUS THROMBOSIS</b></p> <ul style="list-style-type: none"> <li>• swelling at the through the infusion port or along the vein</li> <li>• pain in chest, neck, or arm on the same side as your port</li> </ul>	<ul style="list-style-type: none"> <li>• Irritating medications given through the infusion port</li> <li>• Clotting at the catheter tip</li> </ul>	<ul style="list-style-type: none"> <li>• Call your nurse if you note any of these symptoms.</li> </ul>
<p><b>SUDDEN SHORTNESS OF BREATH, COUGHING, OR CHEST PAIN</b> (possible Air Embolism)</p>	<ul style="list-style-type: none"> <li>• Catheter connections are loose or disconnected</li> <li>• Catheter damage</li> <li>• Improper priming of I.V. tubing</li> <li>• Large amount of air entering the catheter.</li> </ul>	<ul style="list-style-type: none"> <li>• Clamp the extension tubing.</li> <li>• Lie on your left side with your head down.</li> <li>• Call for emergency assistance 911 or your local medical emergency number.</li> </ul>