Port Removal—For Patients

What is a port?
A port is a small medical appliance that is installed beneath the skin. A catheter connects the port to a vein. Under the skin, the port has a septum through which drugs can be injected and blood samples can be drawn many times, usually with less discomfort for the patient than a more typical "needle stick".

Ports are used mostly to treat hematology and oncology patients, but recently ports have been adapted also for hemodialysis patients.

The port is usually inserted in the upper chest, just below the clavicle or collar bone, leaving the patient's hands free.

How does a port work?
A port consists of a reservoir compartment (the portal) that has a silicone bubble for needle insertion (the septum), with an attached plastic tube (the catheter). The device is surgically inserted under the skin in the upper chest or in the arm and appears as a bump under the skin. It requires no special maintenance and is completely internal so swimming and bathing are not a problem. The catheter runs from the portal and is surgically inserted into a vein (usually the jugular vein, subclavian vein, or superior vena cava). Ideally, the catheter terminates in the superior vena cava, just upstream of the right atrium. This position allows infused agents to be spread throughout the body quickly and efficiently.

Will I be put to sleep (under anesthesia) during the procedure?
No. It is typically performed under both local anesthesia and conscious sedation.

What should I expect after surgery?
You should expect some bruising, swelling, and tenderness to the area of your body where the port was removed. These symptoms usually go away gradually over the next 3-5 days. You may take Tylenol or Advil if you are not allergic to these medications for relief of the discomfort.

How do I care for my incisions?
Leave the dressing in place for 24 hours.

After 24 hours:
If you have stitches, then do the following: Remove the dressing over the stitches and pat clean around the incision with a well wrung out soapy clean washcloth. Avoid washing the incision itself. Pat the site dry. Do NOT scrub. Apply new sterile 4 inch x 4 inch gauze dressing over the site after cleaning and replace every day as needed until the site is healed. Keep the site dry and avoid getting this area wet during showers. Delay getting the site wet during baths until physician approval, which will be about 10-14 days.

Will I be able to take a bath after the procedure?
You must keep all stitched sites and dressings dry while bathing and showering. Here is how: Carefully cover the incision and dressing with plastic wrap like Saran wrap or press-n-seal. Apply the wrap to cover the entire incision and dressing. Use tape
to seal the edges all around so that no water runs behind the plastic wrap. After the shower, remove the plastic wrap and dressing. This is the best time to clean and redress the sites. No swimming or immersing the port removal site until approved by your physician. It will generally take two weeks to heal.

Be gentle with the incision. Do NOT let the water beat on it.

**What kind of problems should I report to my physician after the procedure?**

- Increase bruising, swelling or tenderness.
- More redness or pain at your incision site.
- Fever or chills.
- Increased bleeding or drainage from your incisions.
- Any problem or concerns or unusual symptoms with your port.

**How do I care for my wound after port removal?**

Our goal is for your wound to heal as well as possible with the least amount of scarring. Scarring is inevitable. But by watching closely for signs and symptoms of infection and keeping the wound clean and covered, you can significantly minimize your chances of a poor result with wound healing. You play an important part in this entire process of healing. Some important principles to follow are:

- **A dressing has been applied to your wound to catch any drainage from wound and to protect the wound from the environment. This dressing should be left on for 48-72 hrs and then changed for a new dressing. If the dressing gets wet or there is breakthrough drainage, then the dressing should be changed sooner than 48 hrs. After that, change the dressing as needed when it becomes wet or dirty. Try to rotate the adhesive portion of the dressing that contacts the skin so it will not cause skin irritation.**

- **No bathing or showering on or around the wound for now and only after approved by your doctor. Keep the wound dry at all times by using plastic wrap, press and seal, saran wrap, tegaderm, or similar products. After removal of this first dressing or at any time, if you notice worsening of swelling or redness or any problem/questions, please notify us immediately for instructions.**

- **If bleeding or bloody drainage occurs from the wound, hold mild pressure directly on the site with your fingertips over a clean cloth. Apply gentle but constant pressure (just enough to stop the bleeding) for 10 to 15 minutes. Do not let up until the time has elapsed. If the bleeding does not stop after trying this method twice, notify us or go see your doctor. If no one is available, go to an urgent care clinic or to the ER.**

- **To clean the skin around the wound, use hydrogen peroxide. Soak a cotton ball, Q-tip, or soft cloth in the hydrogen peroxide solution. Gently pat the skin until the skin is dry. Avoid vigorous rubbing. A good time to clean the skin is when you are changing the dressing.**

- **Although your wound may appear well healed in 2-4 weeks, it will take 2-3 months for good healing to occur. During that time you should avoid activities that cause excessive tension across or stretching of the healing wound site. Your scar may be very noticeable initially, but with time (usually several months) the pink color will improve and irregularities will become smoother. Do not rub, scratch, or sleep on the wound.**

- **Do not hesitate to call our office should any problems or questions arise with your port site. Our office number is 205-934-0152 (alternative 205-934-7245). Continue seeing your doctors. Call their office for an appointment.**
If I have other questions, who do I contact?
For further questions or concerns about your port removal, please contact Interventional Radiology at 205-934-0152, 205-934-7245, 205-975-4850.