

## Having A Port-A-Catheter Removed in the Clinic

This provides information about a port-a-catheter removal, including the benefits, risks and alternatives.

If you have any further questions, please speak to a doctor or nurse caring for you in the clinic.

### Are there any risks?

Serious risks and complications of having a port-a-catheter inserted are rare. However, as with any procedure, some risks or complications may occur.

- Bruising or mild swelling. This is not uncommon and normally goes away a few days after the procedure.
- Infection. The removal procedure is carried out in a sterile condition to reduce any sources of infection. Rarely, infection of the incision may still occur from bacteria on the skin or from the bloodstream. Infections can be treated with antibiotics – in extreme cases, we may have to reopen the incision. The overall risk of infection is low, but is higher if the port-a-catheter is left in place.
- It is possible that a new port-a-catheter would need to be inserted in the future if your medical condition changed, and therefore the port-a-catheter should only be removed after a discussion with your treating physician and after your current treatment that required the port-a-catheter is completed

### Are there any alternatives?

The alternative would be not to remove the port-a-catheter, but you would need to continue to flush the port-a-catheter on a regular and ongoing basis. The exact timing for the need to flush can vary.

### What do I need to do to prepare for the procedure?

- If you are taking any medicines that thin your blood, such as antiplatelet medicines (for example aspirin or clopidogrel) or anticoagulant medicines (for example warfarin or rivaroxaban), please tell your doctor or the nurse as you may need to stop them temporarily before your surgery.
- If you have coronary stents or metal heart valves in place, then you should not stop these drugs but please let the department know before coming to the hospital.
- If you have received certain types of chemotherapy within two months, a blood test may be needed prior to the removal procedure. Your physician will let you know if any bloodwork will be needed.

## What happens before the procedure?

After you have arrived at the clinic, you will be examined and assessed by the clinic nurse and may be given a hospital gown to wear.

You will be given the opportunity to ask the doctor or advance practice provider (nurse practitioner or physician assistant) any questions you may have.

You will also need to sign a consent form before the procedure can take place to say that you understand what it involves. If you would like more information about our consent process, please speak to a member of the staff that is caring for you.

## How is the port-a-catheter removed?

You will be asked to lie on the procedure table. The area for the removal will be cleaned with antiseptic fluid and draped with sterile towels.

The provider will inject some local anesthetic into your skin on your chest (using the previous incision) to numb the area. This may sting a little as it goes in. After this, you should only feel pressure, not pain. Please let the nurse or provider know if you are uncomfortable.

The provider will make one cut in the skin through the old incision. The port-a-catheter will be slipped out from the space that was created under the skin. The incision is then usually stitched closed with dissolvable sutures and glue is used to seal the skin.

## Will I feel any pain?

The local anesthetic injection will sting briefly while it takes effect. The procedure should be pain-free but you may still feel pressure where the doctor is working. If you experience any pain during the procedure, please tell the nurse so more local anesthetic can be given to you.

Once the local anesthetic wears off you may have some mild pain or discomfort. Pain medication such as acetaminophen (Tylenol) can be taken to ease the discomfort.

## What happens after the port-a-catheter has been removed?

After the removal you can go home. You will not have any stitches that will need to be removed as they will be located under the skin and will dissolve over time. You will have glue sealing the skin of the incision so germs cannot get in. After 48 hours you may take a shower and get the incision wet, **do not scrub**, just allow the soapy water to wash over the incision and pat dry. **Please do not remove the glue**, this will fall off in about 2-3 weeks.

## How will I know if something is wrong with the previous port-a-catheter site?

If you have a temperature, chills or feel unwell, please let your medical team know. This could be an early sign of infection.

Also, let your doctor or nurse know if you are experiencing pain, redness, drainage, or swelling of the pocket or surgical site, or if your arm, chest, neck, or shoulder feels swollen and painful.

## **Contact us**

If you have any questions or concerns about having a port-a-catheter removed, please contact your surgeon at Baptist MD Anderson at 904-202-7300.