Port-a-Cath Insertion (Implantable Venous Access Port) Interventional Radiology

This leaflet provides information about the procedure, what to expect on the day, the potential risks and important information for afterwards.

Prior to the procedure, you may have a pre-assessment or telephone consultation, where you will have the opportunity to ask further questions.

Please note that this leaflet is not meant to replace discussion between you and your doctor. You should raise any questions you may have with the doctor who has referred you or with the doctor who will be performing the procedure.

What is a Port-a-Cath?

A Port-a-Cath (also known as an implantable venous access port) is a small medical device placed completely under the skin, usually in the upper chest. It consists of a small reservoir (port) connected to a thin tube (catheter) that sits inside a large vein.

The port can be accessed through the skin using a special needle and is used to give medications, chemotherapy, fluids, or blood products, as well as for taking blood samples.

Ports are designed for long-term use and allow repeated access without the need for frequent needle insertions into arm veins.

Why do I need a Port-a-Cath?

You may be offered a Port-a-Cath if:

- You require long-term intravenous treatment (such as chemotherapy)
- You have poor or difficult peripheral venous access
- You need frequent blood tests or infusions
- You require a more permanent and discreet central venous access device
- A PICC line or Hickman line is not suitable / desired

Tel: 01932 723470 **Email:** asp-tr.ir-referrals@nhs.net

How do I prepare for Port-a-Cath insertion?

You should stop eating 6 hours prior the procedure, however you can drink 1 cup of clear water per hour until the procedure starts.

As it's a day case procedure, you need to arrange for an adult to collect you from the department and someone to stay with you overnight.

The procedure will take place in the Interventional Radiology (IR), within the Radiology Department at St. Peter's Hospital. When you arrive, you will be given a hospital gown to change into, and a staff will insert an IV cannula.

The doctor will discuss the procedure with you; answer any questions you may have and ask you to sign the consent form if you are happy to proceed.

The procedure will likely be performed under local anaesthetic. Intravenous pain relief and light sedation may also be given, to ensure you are as comfortable as possible.

If you are feeling unwell closer to the day of the procedure, please let the team know.

How is a Port-a-Cath inserted?

You will lie on a procedure table. The skin on the chest and neck is cleaned with antiseptic solution and numbed with local anaesthetic. You may be offered light conscious sedation.

A small incision is made in the chest to create a pocket under the skin for the port. A catheter is inserted into a large vein in the neck using ultrasound and X-ray guidance. The catheter is then connected to the port, which is placed under the skin.

The incisions are closed with dissolvable sutures and covered with a dressing. The position of the port is confirmed using x-ray.

The procedure usually takes 60 minutes.

What are the potential risks and complications of Port-a-Cath insertion?

Port-a-Cath insertion is a common and generally safe procedure. However, as with all medical procedures, there are some risks:

Pain or discomfort

- Pain or tenderness at the insertion site is common for a few days and usually settles with simple pain relief.

Bruising or bleeding

- Bruising or mild bleeding around the insertion site can occur in up to **5-10%** of patients and usually settles without treatment.

Infection

- Infection involving the port or bloodstream occurs in **around 1-2%** of cases.
- Infection may require antibiotics or removal of the port.

Pneumothorax (collapsed lung)

- Air leakage around the lung or puncture of the lung can occur during vein access and is uncommon (**<1-2%**).
- Most cases are small; a chest drain is rarely required.

Thrombosis (blood clot)

- A blood clot in the vein can occur in **around 1-3%** of patients.

Port or catheter malfunction

- The port may become blocked, change in position, or stop working properly.
- This may require further intervention or replacement.

Line movement or displacement

- Movement of the catheter or port is uncommon but may require repositioning.

Injury to nearby structures

- Injury to nearby blood vessels or nerves is rare (<1%) due to ultrasound guidance.

Radiation exposure

- The procedure uses X-ray guidance. The radiation dose is kept as low as reasonably achievable.

What happens afterwards?

After the procedure:

- You will be monitored in a recovery area for at least 2hours.
- If the procedure involves sedation, then there will be a small delay before you can eat or drink after the procedure.
- Most patients can go home the same day

You should:

- Keep the dressing clean and dry for 7 days
- Avoid heavy lifting and strenuous activity for 7 days
- Expect some mild discomfort or bruising

When should I seek medical advice?

Contact your healthcare team urgently if you experience:

- Increasing redness, swelling, pain, or discharge at the port site
- Fever or chills
- Swelling of the arm, neck or face

Follow-up

You will need to come back to Interventional Radiology 1 week after the procedure for a dressing check. Follow-up arrangements and ongoing care of your Port-a-Cath will be discussed with your referring team or specialist nurses.

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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Interventional Radiology

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We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.

You can use Text Relay to turn telephone communications into text. Use the Relay UK app on your phone, tablet or PC. You can also use Relay UK via Minicom or Uniphone.

اگر نیاز به ترجمه دارید، لطفا با شماره 01932 723553 تماس بگیرید.

ਜੇ ਤੁਹਾਨੂੰ ਤਰਜਮੇ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ ਫੋਨ ਕਰੋ: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

Se precisa de uma tradução por favor contacte: 01932 723553

আপনার অনুবাদের দরকার হলে এখানে যোগাযোগ করুন : 01932 723553

यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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