Implanted Venous Access Port

Your doctor has recommended that you have an implanted venous access port (also called a “mediport” or just “port”) placed to give you medications treatments in your veins. The port is a small, round device, which is usually placed under the skin in the upper chest. The port device attaches to a catheter (a thin tube) that enters a large blood vessel. This allows your doctors to give you chemotherapy (if needed for a cancer treatment), IV fluids or other medications, and/or blood products as needed for various treatment regimens, without “sticking” the small veins in your hands or arms each time medication is needed.

The port is made of a plastic or metal material with a self-sealing cover over the top. A special needle is put through the skin to “access” the port; these needles do not put holes in the port when it enters or exits. Only health care workers who are trained in port care should access your implanted port. This is to prevent complications or infection of the port.

Surgery for Port Placement

The surgery is usually done in operating room, with anesthesia (you may not need to be completely asleep). The surgeon will inject numbing medicine in the area where the port will be placed in the upper chest. The surgeon will make a small incision (about 1 inch) and create a little “pocket” under the skin for the port. The surgeon will thread the catheter (thin plastic tube) into the vein in your neck or under your collarbone, using ultrasound guidance. The vein goes into the heart and the end of the catheter sits in the major vein just above your heart. The port and the catheter are secured in place and the skin is closed over it; the port is not visible but you may see and feel a small, hard lump under the skin.

Generally patients will go home the same day. You will have a dressing in place over the port. If you will be receiving chemotherapy or other treatment immediately after surgery (that day or the following day), the surgeon may leave the port accessed (meaning that the needle is left in the port). If your port is kept accessed, you should contact your oncology provider for specific instructions. You may not shower while the port is accessed.

Risks of Port Placement Include (but not limited to):

- Bleeding or injury to the vein
- Infection of the port, which may require removal of the port
- Blood clot in the vein
- Collapsed lung (this could be caused by a needle puncture into the lung during surgery; the risk of this is very low when using ultrasound guidance)