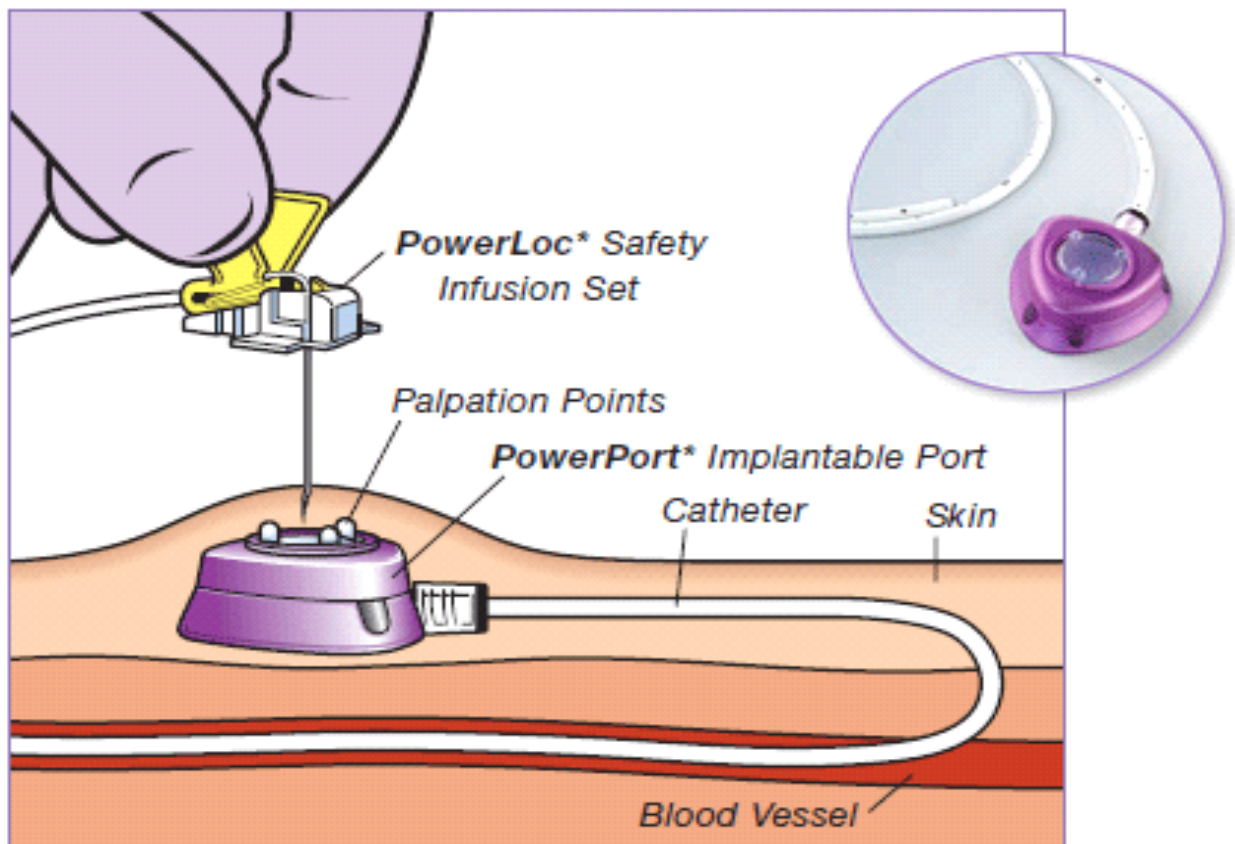


Infusing in to a Port-A-Cath



WORDS TO KNOW:

Aseptic Technique: means that in performing any procedure care is taken not to introduce bacteria to any part of the intravenous (IV) device. Asepsis is the absence of organisms that can cause infection.

Heparin: is a drug (anticoagulant) that is left in the central line (port) when it is not in use. If blood backs up in the catheter, the heparin will prevent it from clotting and blocking.

To prime or priming the needle: To fill the IV tubing or port needle with fluid to ensure all the air is out of the fluid path and none is infused into the patient.

THE IMPORTANT THINGS TO REMEMBER:

Infection: is one of the major complications of central lines. Wash your hands well and practice good aseptic technique. If the port looks red, swollen or is tender call the Hemophilia Treatment Center (HTC).

Clotting: is another big concern with ports. Sometimes a clot can form inside and you may not be able to infuse fluid in or get blood return back. If this happens call the HTC.

Air should not be injected into the port. Make sure you prime the needle well, the connections are snug and the syringes do not have air in them.

ACCESSING THE PORT- Step by Step:

- 1) Make a designated, quiet time for accessing the port and giving the factor
- 2) *****Put Emla on 45-60 min prior if needed**
- 3) Gather up all the supplies you will need for accessing the port and giving the factor. Double check you have everything you will need prior to putting on sterile gloves
 - *Infusion mat*
 - *Sterile gloves*
 - *Sterile 2x2's (4)*
 - *Chlorhexidine swabs x 3*
 - *Alcohol swabs to clean top of factor vial (2)*
 - *Pre-loaded 10 ml normal saline syringe (3 required), waste 5 mls out of one of the syringes*
 - *Pre-filled Heparin syringe 3 ml (1) waste 1.5 ml*
 - *Factor Concentrate (mix prior to accessing port and let sit to settle bubbles)*
 - *Gripper needle (22G $\frac{3}{4}$ inch)*
 - *Gripper needle cap*
 - *Button band aid*
 - *Sharps container*
 - *Clean 2x2's, not sterile*
- 4) Wash hands
- 5) Prepare your clean area
 - Clean the infusion mat with antibacterial wipes and let it dry

- 6) Prepare the factor concentrate for infusion
- 7) Set up your infusion mat; sterile gloves, syringes, factor, gripper needle, swabs, etc.
- 8) Remove EMLA patch, wipe excess cream off with 2x2 or tissue
- 9) Check PORT site for signs of infection, redness, swelling, warmth, drainage
- 10) Put on sterile gloves
- 11) Screw the blue cap on to the port needle and take one of the saline flushes to prime the port needle with saline, clamp the line afterwards
- 12) Clean the port site in a circular motion, starting at the centre (the cleanest spot) and work outwards. Do this three times. Let it then dry for about 1 min.
- 13) Use your non-dominant hand and feel the port edges then stabilize the port between your fingers. Pick-up the port needle in your dominant hand with your index finger on the centre. Count to three.
- 14) Insert the needle so it is at a 90 degree angle to the port and into the centre of the port. Push with even pressure until you feel the back of the port
- 15) Screw on the 10 ml saline syringe (the one that has 5 mls in it, and withdraw 3 mls of blood) clamp the line, keep holding the cap end with your non-dominant hand, unscrew the waste syringe and attach the factor concentrate syringe. If the cap end is touched with your hand wipe it with an alcohol swab first
- 16) Unclamp the line, give factor, clamp line
(*remember to give factor using a stop and go

- method to ensure there is 1) no reaction to factor and 2) no damage to the PORT internally)
- 17) Remove factor syringe and attach first saline flush, unclamp and flush 10 ml saline using stop and go method, clamp (repeat this x 2)
 - 18) Remove saline flush and attach Heparin flush (1.5 ml syringe), unclamp and flush 1.5 mls of heparin in to PORT, clamp line
 - 19) Stabilize the port edges with your non-dominant hand, grasp the needle firmly. Count to three and pull it out with big motion, making sure you hear the 'click'.
 - 20) Use 2x2 to put mild pressure on port site until bleeding has stopped (3-5 mins), apply band-aid
 - 21) Clean up, putting your needles in the sharp container

Congratulations! You're done! Good Job!

Call the clinic if you require any assistance;

Lisa/Megan 613-549-6666 ext. 6999 or pager 613-536-7570 or seek emergency care if;

**you cannot get blood back*

**you cannot infuse into the port*

**the port site is sore, swollen, or tender*

**you have any questions.*