

# Your implanted double lumen (Vortex®) port

Haemostasis and Thrombosis Centre

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Information for patients

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## What is an implanted double lumen port?

- It is a thin, flexible tube.
- It is placed in a large vein.
- It is connected to a double chamber or 'port' implanted under your skin. The double chamber is about 4cm long, 2cm wide and 1cm deep.
- The port is placed under the skin on your chest just below your collar bone.
- It can be used to take blood sample or give treatment without needing to find a vein. It can also be used for treatments such as red cell exchange or plasma exchange.
- When not in use, it is hidden under the skin. It has no external parts. You may be able to see and feel it as a 'lump' under the skin.
- The chamber has a raised centre or 'septum'. It is made from a self-sealing rubber material. It can be seen as a small, raised area under your skin.
- When we need to use it, we will insert a needle through the skin into the septum of the port.
- If you are having a red cell or plasma exchange, 2 needles will be used, 1 for taking and one for returning blood.
- When the treatment is finished the needles will be removed.
- There is no time limit on how long the Vortex® port can stay in. You can go home with it in place.

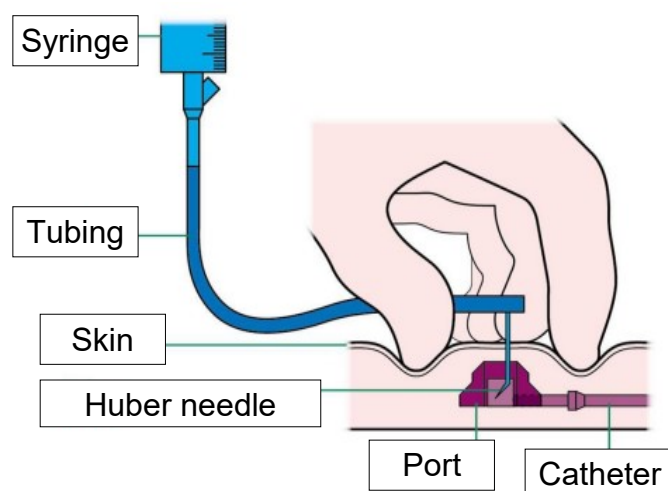


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## Why do I need this port?

Your doctor or nurse recommends it as you need to have blood tests and treatments often.

## How is the port inserted?

- The procedure takes about 45 minutes.
- It is done in an operating theatre.
- We take X-rays during the procedure to check the port is in the correct place.
- You may also be attached to a heart monitor and fitted with an oxygen mask.
- We insert Vortex® Ports under local anaesthetic. You may be able to have a sedative into your vein (intravenous) as well.
- It may also be done under general anaesthetic (whilst you are asleep). You can talk to your doctor or specialist nurse about this.
- You may be able to go home on the same day.

## How do I prepare for my appointment?

A haematologist or specialist nurse will arrange your Vortex® port insertion. A member of the team will give you detailed information about the arrangements. If you decide to have an intravenous sedative or general anaesthetic, you may be asked to attend a pre-assessment clinic before the day of the procedure.

Do not have any thing to eat or drink for 5 hours before the procedure. This is a simple safety precaution.

If you are taking any medicine to thin your blood, you may need to stop this for a short time before your port insertion. Please talk to your haematology consultant and your specialist nurse before your Vortex® Port insertion appointment.

You might need a red cell exchange transfusion a few days before the insertion. We will use your arm veins or a line put into a vein in your groin (femoral line).

The new Vortex® port cannot be used for the first 4 weeks after it is inserted.

## Using the port

A special needle (called a Huber needle) is used to access the port. Most patients feel a mild prick. Some may need a numbing cream or a local anaesthetic. This needle is removed before you are sent home.

## What happens after the procedure?

If you are an inpatient we will take you back to the ward after the procedure.

If you are an outpatient you will usually be able to go home on the same day as long as there are no complications. You should arrange for a friend or relative to go home with you. Someone should stay with you overnight.

You may have some bruising and be a little sore for a few days. You can take a mild painkiller such as paracetamol for this.

The port should be painless once the bruising has settled down. You may feel some brief discomfort each time the port is used as the needle is inserted through the skin.

We advise patients to wait 4 weeks before the Vortex® Port is used for a red cell exchange. This will let any swelling settle. If you need an exchange sooner than this we suggest using your arm or femoral veins in your thigh.

## What are the possible problems and how can they be prevented?

### Problems during insertion of the port

We do not tend to have any issues with most Vortex® Port insertions. Serious complications are extremely rare. You can talk to doctor who will be inserting your port about them.

**Infection:** You may develop an infection. They are usually treated with antibiotics. In some cases the port may need to be removed. Symptoms of infection include:

- a high temperature
- feeling shivery
- redness or swelling around the port

You should let the hospital know straight away if you notice any of these symptoms.

**Blood clot (thrombosis):** Having a Vortex® Port can cause a blood clot (thrombosis) in the vein. Signs of a blood clot include:

- swelling and pain in the shoulder, neck or arm,
- veins that stand out on the neck or chest on the same side as the port.

If you develop any of these symptoms, you should let us know straight away. If you develop a clot, we will usually give you medicine to dissolve it. The port does not always need to be removed.

**Malfunction:** In a small number of cases the Vortex® port does not work properly. This is usually due to the port being in the wrong position or becoming dislodged beneath the skin. If this happens the port will need to be removed and replaced.

**Blockage:** Vortex® ports can sometimes become blocked. We can usually unblock them by using a special flushing solution. Sometimes this fails. We will need to remove the port and replace it with another.

**Scarring:** Most patients will find they have a scar about 2cm long just to the side of the port. There will also be a small scar just above your collar bone. Some people are more likely to have more pronounced scarring called keloid scarring. It can happen to anybody but is more common in people with dark skin. Please discuss this with the doctor inserting the port. It may be possible to place the port so that the scars are less visible.

## What are the other options?

Talk to your doctor or specialist nurse about other options before you consent to having a Vortex® port inserted. There may be other options that may be right for you. The teams' contact details are at the end of this leaflet. It is your choice if you have a Vortex® port inserted or not.

## Caring for your port

- Do not do anything too strenuous (physical exercise, heavy lifting, etc.) for a few days.
- You will have 2 small dressings; 1 on the side of your neck and 1 next to the port. You will need to have these, and any stitches, removed 7 to 10 days after your port is inserted. Until this time you should keep the dressings in place. If you have transparent dressings you can shower or bath normally. Other types of dressings should be kept dry.
- After the stitches are removed you will not need a dressing.
- You can return to your normal activities such as bathing and showering.
- After each treatment, and every 4 weeks if the port is not used very often, the port needs flushing to stop it getting blocked. This flushing will happen in hospital. It will be done by a specially trained nurse.

## What to look out for at home

Contact the haematology helpline number right away on **0808 178 2212** if you have any of the following:

- feeling unwell
- a lot of pain at the port insertion site
- a rise in body temperature (fever)
- chills
- swelling in your neck or near the port site
- breathing difficulties

## Contact details

### Haematology Helpline Number (24 hours a day, 7 days a week):

Phone: 0808 178 2212

### Specialist teams (all office hours only, Monday to Friday):

#### Haemoglobinopathy Clinical Nurse Specialist:

Phone (office): 0116 258 6081

Mobile phone: 07950 891 490

#### Apheresis Team:

Phone : 0116 258 5261

#### Vascular Access Team:

Phone: 0116 258 6125

### Leicester's Hospitals (UHL) switchboard: 0300 303 1573

Leicester Royal Infirmary

Infirmary Square,

Leicester

LE1 5WW

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