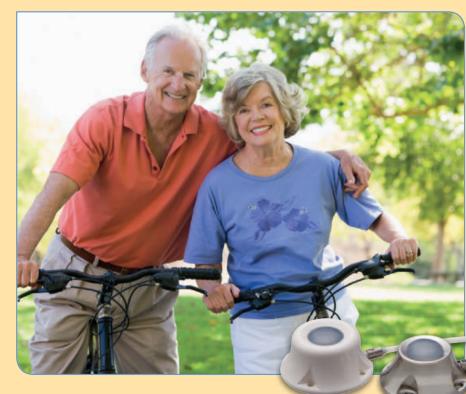
smiths medical

Patient Information



PORT-A-CATH[®] Implantable Venous Access Systems





Your doctor has prescribed treatment that requires the frequent administration of medications or other fluids directly into your bloodstream and has recommended a PORT-A-CATH° implantable

venous access system as the best way for you to receive medications or other fluids.

This patient information guide is provided to help answer general questions you may have about your access system. This is only a guide; if you still have questions after reading it, please contact your nurse or doctor.

What is a PORT-A-CATH[®] implantable venous access system?

The systems are called *implantable venous access systems* or, more commonly, an *implanted port*, because they are placed completely under the skin - usually in a convenient but inconspicuous location on your chest or arm.

The systems consist of three parts:

- > The portal a small chamber, sealed at the top with a septum made of self-sealing silicone
- > The catheter a thin, flexible tube
- > The catheter connector a component that connects the catheter to the portal

What are the PORT-A-CATH[®] systems made of?

There are several different styles of PORT-A-CATH[®] implantable venous access systems.

The following styles have portals that are made of titanium:

- > PORT-A-CATH[®] system
- > PORT-A-CATH[®] POWER P.A.C. system
- > P.A.S. PORT[®] T2 system
- > P.A.S. PORT[®] T2 POWER P.A.C. system

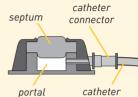
The following styles have portals that are made of titanium and plastic:

- > PORT-A-CATH® II system
- > PORT-A-CATH® II POWER P.A.C. system
- > P.A.S. PORT® Elite system

The following style has a portal that is made entirely of plastic:

> ProPort[®] system

These systems are implanted, used and maintained in the same way. The catheters are made from flexible materials called silicone or polyurethane. The connectors are made of titanium and/or plastic.



PORT-A-CATH® system



P.A.S. PORT[®] Elite system



Pro Port[®] system

How are the systems placed in the body?

Implantation of a PORT-A-CATH[®] system involves a brief surgical procedure. It is placed completely inside the body. One end of the catheter is inserted into the vein, while the other end is connected to the portal, which is placed completely under the skin. The tip of the catheter is located in a vein at a point just above the heart. Once the portal and catheter are in place and the incisions are healed, you will only notice a small *bump* under your skin.

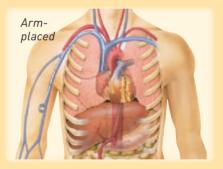
Chest-placed systems

These systems are placed under the skin with the catheter inserted into a vein in the chest. The tip of the catheter is located in the vein at a point just above the heart.

Arm-placed systems

These systems are placed under the skin, with the catheter inserted into a vein in the upper or lower arm. The tip of the catheter is located in the vein at a point just above the heart.



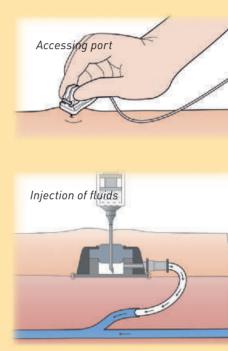


How are medications and fluids delivered through the system?

After the port is implanted, clinicians can use it for the delivery of fluids and medications as well as for obtaining blood samples. To access your implanted port, the clinician will insert a special non-coring needle through your skin and the portal septum. Because the needle goes through the skin, you will probably

feel a pricking sensation. If you find the needle insertion procedure uncomfortable, your physician or nurse may use a local anesthetic to temporarily numb the skin. This sensation may decrease over time.

The medication or fluid flows through the needle, into the portal chamber and through the catheter directly into the bloodstream. The medications or fluids are administered into the system using a syringe, sometimes called *IV push*, or as a continuous infusion through IV tubing attached to a medication bag with or without the use of an infusion pump.



Caring for your PORT-A-CATH® system

Your implanted port requires minimal care between uses because it is completely under the skin. You will receive specific instructions from your clinician. Below are some general guidelines.

Cleaning the site

When a portal access needle is in place, a dressing will cover the needle and portal site. This helps to secure the needle and keep the area clean. The dressing should be kept clean and dry. You should inspect the needle site area regularly.

If you do not have a needle in place, you may wash and bathe normally. You should inspect the portal area regularly.



If the portal and/or needle seems to have moved, or you notice swelling, bruising, redness, or tenderness, contact your clinician.

Flushing the systems

The implanted port must be flushed with a heparin solution to prevent blood clots from forming inside the catheter. This creates what is usually referred to as a heparin lock. It is recommended that the implanted port be flushed after an infusion or injection, and every four weeks when not in use.

Dual lumen ports

Caring for a double or *dual lumen* port is the same as caring for a single lumen port. At times both portal chambers may be accessed simultaneously. Both lumens should also be flushed after an infusion or every four weeks when not in use.

Identification of your implanted port

At the time your port is implanted, you will receive a wallet – sized identification card. You should always have this card with you when you visit your physician, hospital or clinic so that information on your implanted port will be readily available.

If you had a **PORT-A-CATH®**, **PORT-A-CATH® II, or a P.A.S. PORT® T2 POWER P.A.C.** system placed, you will receive a wallet-sized identification card and a key ring identification card.

The **PORT-A-CATH**[®] **POWER P.A.C.** implanted ports have the added feature of being able to provide access to your blood stream for *power injecting* contrast media which is required for certain types of diagnostic imaging scans. This means that the contrast media, also known as intravenous dye, can be injected at a higher flow rate into your blood stream. The contrast media highlights certain tissues in your body on diagnostic images.

Before having one of these types of diagnostic imaging scans, your clinician will require at least one form of valid proof that you have a PORT-A-CATH® POWER P.A.C. system implanted before using it for power injecting.

There are three valid forms of system identification. These include your patient identification wallet-sized card, key ring identification card, or the implantation record sticker in your medical record. Each of these identification pieces must show the lot number and re-order number of the implanted port you have for positive verification.



Key ring identification card



Wallet-sized identification card

Using the PORT-A-CATH[®] POWER P.A.C. system for power injecting contrast media

Once your PORT-A-CATH® POWER P.A.C. system has been positively identified, it will be accessed with a special needle that is also indicated for power injection, such as the GRIPPER PLUS® POWER P.A.C. safety huber needle.

Common questions concerning your implanted port

How long can my port stay in place?

Your nurse or doctor can answer this question best. If your implanted port is properly inserted and cared for, it should last for the duration of your therapy.

What restrictions do I need to be aware of after the port is implanted?

Check with your doctor prior to engaging in activities which involve excessive and/or repetitive motion. Certain occupations, or physical activities, such as golfing, swimming or weight lifting may increase the possibility of catheter damage, i.e. fragmentation.

Can I have an MRI with my implanted port in?

Smiths Medical's implantable ports are constructed of various materials and are labeled as *MRI Conditional*. This means that they may safely undergo magnetic resonance (MR) imaging using MR systems with static magnetic field strengths of 3.0 Tesla or lower. You will be asked about any implanted devices prior to receiving an MRI.

What if my clinician is unfamiliar with my portal system?

Always show your clinician your identification card and/or the key ring identification card (depending on the type of port you have implanted). These identification pieces include vital information that will be useful to your clinician. If your clinician needs more information about your implanted port, they may contact Smiths Medical Clinical Services at 1-800-258-5361.

Can I go through airport security with my implanted port?

Airport metal detectors will not harm your PORT-A-CATH[®] system. In most situations, the PORT-A-CATH[®] device will not set off the airport metal detector. However, the sensitivity of metal detectors varies. The total amount of incidental metal that you may be wearing (jewelry, watches, zippers, coins, etc.) may be enough to set off the metal detector. You may want to consider carrying your identification card with you.

Additional guidelines for caring for your implanted port

If you or a family member have been instructed to access your port and/or care for your system at home between treatments, remember:

- > Do not tilt or rock the needle once it is inserted.
- > Do not leave the needle or attached tubing open to the air while the needle is inside the portal.
- Do not put any fluids or solutions in the system unless your nurse or doctor specifically recommends it.
- > Always stop the infusion and call your clinician at once if fluids injected/ infused into the system do not flow freely.



> Always call your clinician if you have any questions or problems, or notice changes in the appearance of the area around the injection site.

If your system will be used for power injecting contrast media, be aware of the following guidelines:

- > Always carry your patient identification card and/or key ring identification card with you when your system will be accessed for a procedure.
- > Always ensure that a GRIPPER PLUS® POWER P.A.C. safety needle or other power-injectable non-coring needle is used to access your system for the power injection procedure.

Potential complications

Use of PORT-A-CATH[®] implantable port systems involve potential risks normally associated with the insertion or use of any implanted device or indwelling catheter, including catheter disconnection or fragmentation with possible embolization of catheter. Ask your doctor or nurse to review these and other potential complications with you. Always consult with your clinician if you have any questions regarding potential complications.



Notes	

Smiths Medical Offers Outstanding Support

- > Clinical and technical support
 24 hours a day, 7 days a week
- Education and training materials for clinicians and patients

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Smiths Medical ASD, Inc.

St. Paul, MN 55112, USA Phone: 1-214-618-0218 Toll-Free USA: 1-800-258-5361

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Smiths Medical Canada Ltd.

Markham, Ontario, Canada, L3R 4Y8 Phone: 905-477-2000 Toll-Free: 1-800-387-4346

Customer and Clinical Services 1-800-258-5361

www.smiths-medical.com

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