

PORT PLACEMENT

Pre-Operative Instructions

Help us keep you safe during your surgery by telling us if any of the following apply to you:

- I take a blood thinner. Some examples include aspirin, heparin, warfarin (Coumadin), clopidogrel (Plavix), enoxaparin (Lovenox), dabigatran (Pradaxa), apixaban (Eliquis), and rivaroxaban (Xarelto).
- I take immunosuppressant medication.
- I take weight loss medication.
- I have a pacemaker, automatic implantable cardioverter-defibrillator, or other heart device.
- I have sleep apnea.
- I have had a problem with anesthesia in the past.
- I am allergic to certain medications or materials, including latex.

When to stop medications, herbal remedies, vitamins, and other dietary supplements:

- 7 days prior to surgery: Stop vitamins, herbal remedies, dietary supplements, and weekly dosed weight loss/diabetic GLP1 medications like Ozempic, Trulicity and others.
- 5 days prior to surgery: Stop Fenfluramine/Phentermine (Fen-Phen).
- 3 days prior to surgery: Stop taking NSAIDs such as ibuprofen (Advil, Motrin) and naproxen (Aleve) as well as daily dosed SGLT2 diabetic medication like Jardiance and others.
- Your surgeon will discuss when to stop blood thinners.
- Anesthesia will discuss all other medications when they call the day before your surgery.

When to stop eating and drinking before surgery:

- Do not eat any food after **midnight** the night before your surgery including gum, mints, or candy.
- Do not use any tobacco products after **midnight** the night before your surgery.
- You can drink clear liquids up to **4 hours** before your surgery. Examples of clear liquids include water, apple juice, black coffee (without cream or sweetener) and tea (without cream or sweetener).

Your surgery will be cancelled if these instructions are not followed.

Pre-operative checklist:

- ✓ Arrange for a responsible adult to take you home and be with you for 24 hours after outpatient surgery.
- ✓ Complete the pre-registration for your surgery facility.
- ✓ Refer to your ***Surgery Itinerary*** for check-in time and location of your surgery.
- ✓ Wear comfortable, loose-fitting clothing on the day of surgery.
- ✓ Please leave valuables and all jewelry, if possible, at home.

Post-Operative Instructions

Medications

Pain management is an important part of your post-surgery care. You should expect some discomfort after your surgery. It is important to take pain medication prior to your pain becoming intense in severity.

You will not need narcotic pain medications after this procedure. You may take ibuprofen (Advil or Motrin) 200-800 mg every 6-8 hours to help with pain control provided you do not have peptic ulcer disease or another medical condition that make NSAIDs unsafe. Do not exceed 3200 mg in a 24-hour period.

Mild swelling is normal following surgery. To help decrease inflammation and discomfort you should apply ice packs to the surgery area for the first 24-72 hours after your surgery and then as needed. Apply the ice pack for 20 minutes every 2 hours as you can throughout the day.

You may resume your previous medications, vitamins and herbal remedies unless instructed otherwise.

Incision/Dressing Care and Showering

You may shower 24 hours after your surgery if a clear plastic dressing was placed over your incision at the time of your surgery. No bathing or soaking for at least 2 weeks after your surgery.

Remove your dressing 4 days after your surgery. Remove the clear plastic outer dressing and gauze and leave the steri-strips (strips of tape) that cover your incision. Steri-strips should remain in place for 7-14 days. The strips will gradually loosen and come off. If they do not come off within two weeks, please remove them yourself.

It is normal to have some drainage on your dressing for the first couple of days after your surgery. It is normal to have some swelling around your incision.

Activity Restrictions

Avoid strenuous activity and heavy lifting (greater than 10 lbs.) for the first 2 days after surgery. After 2 days, you may gradually increase your activity level as tolerated.

You are ok to drive and return to work once you are no longer taking narcotic pain medication and feeling capable of performing safely.

Special Instructions & Follow-up

Your port will need to be flushed approximately every 4-6 weeks, if not being used more frequently. You will receive additional follow-up care and instructions from your oncologist. If you are not already scheduled with your oncologist, please call to schedule an appointment.

Things to Watch For

1. Chest pain or difficulty breathing.
2. Dressings saturated with blood.
3. Fever greater than 101.0.

4. Severe arm/chest pain coming from your port site.
5. Tingling, numbness, or cold sensation of your fingers.
6. Redness, swelling, bruising, red streaking or pain at port site.
7. Signs of a wound infection: increased swelling, redness, pain, drainage and/or odor.
8. Your incision separates or opens up.
9. Nausea and/or vomiting that continues for 12-24 hours.

If you are having a life-threatening emergency, please call 911.

If you need to contact us, call 541-735-3778. We check messages throughout the day. Please keep your messages brief and know that we will answer you as soon as possible. There is no need to leave the same message multiple times as this will only slow down our ability to respond to you. The office is open 9:00 am to 5:00 pm Monday through Friday. For urgent needs after office hours, call 541-222-9911 to speak with our surgeons.

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