THE STUDY VAULT

Clinical Chaos

Port Access

SKILL SNAPSHOT

Purpose

- Accesses an implanted venous port with a noncoring needle while preserving sterility, septum integrity, and central-line safety.

When to use

- Ordered IV therapy, blood sampling, flush/lock, or other central access after port placement is confirmed usable.

Supplies needed

- Correct noncoring needle; sterile port kit; mask; sterile gloves; CHG/alcohol antiseptic; flushes; transparent dressing; needleless connector.

PREP + PATIENT SETUP

- Verify order, port type/location, needle length, allergies, tip/use confirmation, and flush/lock plan.
- Assess skin, pocket, pain, swelling, redness, drainage, and prior access issues.
- Position patient; have patient turn head away or

VAULT TIP

- A correctly sized needle sits securely in the septum without tenting skin or excessive pressure.

STEP-BY-STEP

1. Hand hygiene; identify patient; explain procedure and position comfortably.
2. Apply masks to nurse and patient per policy. Palpate port through intact skin to identify septum and depth.
3. Open sterile kit and supplies. Prime noncoring needle/tubing/connector with saline and clamp.
4. Apply sterile gloves. Clean skin with approved antiseptic using friction for required time and allow it to dry completely.
5. Stabilize port firmly with nondominant hand using sterile technique.
6. Insert noncoring needle perpendicular through skin and septum until needle contacts back of reservoir; do not rock or angle it.
7. Secure needle while maintaining control. Unclamp and gently aspirate for blood return per policy.
8. Flush with prescribed saline using pulsatile technique. Never force; stop for pain, swelling, resistance, leakage, or absent expected blood return.
9. Apply sterile stabilization/foam support if needed without placing pressure on needle.
10. Cover with sterile transparent semipermeable dressing; keep insertion site visible and label date/time/initials.
11. Connect ordered infusion using aseptic technique and verify settings, or lock/clamp as ordered.
12. Reassess site, dressing, line, and patient during use. When deaccessing, flush/lock, stabilize port, withdraw straight out, and apply pressure/dressing.

SAFETY REMINDERS

- Use only a noncoring port needle.
- Never use with swelling, pain, leakage, or suspected extravasation.
- Do not force flush.
- Maintain sterile technique and allow antiseptic to dry.

COMMON MISTAKES

- Using wrong needle length.
- Angling/rocking needle.
- Connecting without patency assessment.
- Covering a wet antiseptic site.

DOCUMENTATION

- Port/site assessment.
- Needle gauge/length and access date/time.
- Blood return/patency and flush/lock.
- Dressing and infusion/lumen use.
- Tolerance, complications, notifications.