

We describe a modification of the implantation technique that we use in our department in order to improve the cosmetic result of a TIVAD” Kehagias and Tsetis (2016).

Abstract:

PURPOSE: Venous port catheters, also known as “totally implantable venous access devices” (TIVADs), are now the standard of care in patients requiring long-term intermittent intravenous drug administration. We describe a modification of the implantation technique that we use in our department in order to improve the cosmetic result of a TIVAD.

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METHODS: After ultrasound-guided venous access in the internal jugular vein (IJV) or another appropriate vein has been obtained, we create a port pocket in the deltopectoral groove, in the upper-lateral chest wall, in a “far-lateral-oblique” orientation, respecting the individual patient’s relaxed skin tension lines. Then we create a subcutaneous tunnel using a straight metal tunneler in two steps: first tunneling cranially and perpendicular to the port incision for a small distance, and then, after turning the tunneler at a right angle continuing in a straight line until we exit at the venous access site.

RESULTS: This configuration not only prevents catheter kinking, to ensure uninhibited flow, but also allows us to place the port pocket in a more discreet position, in order to offer a better cosmetic result to our patients.

CONCLUSIONS: Adoption of a “far-lateral-oblique” port implantation site along with the “L-shaped tunneling technique” will offer doctors who are implanting TIVADs a useful alternative for a better cosmetic result.

Reference:

Kehagias, E. and Tsetis, D. (2016) The “L-shaped tunneling technique”: a modified



technique facilitating a more discreet implantable port positioning. The Journal of Vascular Access. January 20th. .

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