
POST OPERATIVE INSTRUCTIONS FOR
PORTS / IMPLANTABLE VENOUS ACCESS DEVICES

- **Normal activities** may be resumed as tolerated.
- You may **shower** the day of surgery. Your wounds will generally be closed with dissolvable sutures and a surgical skin glue. No sutures will need to be removed unless specified by the surgeon.
- Recommended **pain management** regimen:
 - Meloxicam (If prescribed): 1 tablet daily OR Ibuprofen: 400-600mg every 8hrs as needed.
 - These are anti-inflammatory drugs. **Do not take ibuprofen and meloxicam together.** If you have a sensitivity to anti-inflammatories, history of stomach ulcers, or kidney disease do not take anti-inflammatories.
 - Tylenol: This is over the counter. Take 1000mg 3x/daily as needed. Max of 4000mg/24hrs.
 - Oxycodone (or other prescribed narcotic medication): 1-2 tablets every 4-6 hours as needed for breakthrough pain.
- A **firm bump** on your chest wall is to be expected after port placement. This is the actual port mechanism. A **firm tube** will likely be present overlying your collar bone. This is the catheter. A **small knot** will likely be present at the base of your neck. This will disappear over the next few weeks.
- If you experience **fevers greater than 101 degrees Fahrenheit**, chills, or any drainage other than a thin red color fluid, please call the office at 303.449.3642.
- **Driving** may be resumed when off all narcotic pain medications and you can turn or twist your neck comfortably without restrictions. Do not hesitate to move your head after surgery.
- A routine **post-operative visit** is generally not formally scheduled as most patients are followed by their referring physicians for general port maintenance and usage. Please call the office at 303.449.3642 for any post-operative questions or concerns.