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PATIENT INFORMATION PACKET



PATIENT INFORMATION PACKET



Dignity
Thoughtful Evolution

medCOMP
CT Injectable

PATIENT IDENTIFICATION CARD

Patient's Name _____		Implant Date _____	
Port Location _____	Lot Number _____	<input type="checkbox"/> Titanium	<input type="checkbox"/> Plastic
Catheter Location _____	FR Size _____	<input type="checkbox"/> ChronoFlex® Polyurethane	<input type="checkbox"/> Silicone
Physician's Name _____		Physician's Number _____	

Thoughtful Evolution
CT Injectable

Dignity



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PN40298PIP-D REV. F 4/12



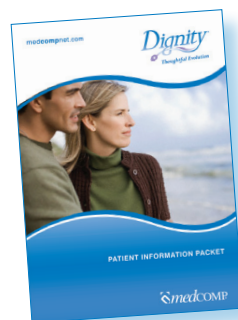
This packet contains important information for the patient, the patient's care givers, and infusion technicians. Please use these materials as a reference guide throughout your therapy and to indicate to medical professionals that you have a CT implantable port.


PACKET CONTAINS THE FOLLOWING:

Patient Information Guide: Having knowledge about your implanted device is powerful and can make you feel more in control of your situation. It is important to feel comfortable with your Dignity CT Port; the more you know the better you will feel. This guide will give you a variety of patient specific information informing you about the device and how to communicate with medical professionals about your Dignity CT Port.

Identification Card: Carry this card with you at all times. The card will contain an overview about your device and important information medical professionals will need to know.

Key Ring Tag: This key ring tag will serve as a reminder to inform medical professionals that you have a Dignity CT Port.






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***Always use a sterile technique for skin preparation.**

MAXIMUM FLOW RATES AND PRESSURE			
CT Injectable (Huber) Infusion Needle Size	19Ga.	20Ga.	22Ga.
Maximum Flow Rate	5ml/sec	5ml/sec	2ml/sec
Maximum Pressure	300psi		

DO NOT exceed the maximum flow rate or pressure setting indicated above when power injecting through the Dignity™ CT Port.

FLUSHING PROTOCOL
Port Not in Use: 5cc heparinized saline, every 4 weeks. After Each Infusion of Medication or TPN: 10cc of sterile normal saline, then 5cc of heparinized saline. After Blood Withdrawl: 20cc of sterile normal saline, then 5cc of heparinized saline. After Power Injection: 10cc of sterile normal saline, then 5cc of heparinized saline. CAUTION: Use only non-coring needles for access, and only a Power Injectable Infusion Huber Needle Set for power injection.



MR Conditional – 3 Tesla (artifacts may present imaging problems if MRI area of interest is on or near area where device is located)

CHRONOFLEX® AL85AB20 (20% Barium) – main ingredient in the catheter lumen CHRONOFLEX® is a registered trademark of AdvanSource Biomaterials, Inc.*

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PATIENT INFORMATION PACKET

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INTRODUCTION

Your doctor has prescribed and implanted a Dignity CT Port for your IV therapy treatments. This new kind of implanted port offers the unique ability to provide access for infusion therapy and power-injected Contrast-Enhanced Computed Tomography (CECT) scans. Power-injected CECT scans produce superior images of your body to help your medical team better manage your treatment. With your Dignity CT Port, you'll be able to receive IV therapy and CECT scans without having to undergo repeated needlesticks in your peripheral (arm or wrist) veins.

Please read all of the information contained in this Patient Guide. The information within will help you to feel more comfortable with your Dignity CT Port treatment. The Dignity CT Port is a technological advancement designed to accommodate power-injected CECT scans. Not all clinicians may be aware of the new capabilities of your device. The patient-specific information contained in this Guide will give you the power to inform clinicians about your Dignity CT Port and take advantage of power-injected CECT scans and avoid unnecessary needlesticks.

You should carry your Dignity CT Port Patient Identification Card with you at all times to show to clinicians whenever your port is accessed. It informs clinicians that you have a Dignity CT Port and provides a summary of important information they should know about the device.

If you need additional information about your Dignity CT Port, please talk with your doctor or nurse.



IDENTIFICATION

How to Know You Have a Dignity CT Port

There are several ways that you and your clinicians can recognize that you have a Dignity CT Port instead of a traditional type of implanted port.



Upon receiving your Dignity CT Port, you are provided with a Patient Information Packet that contains a Patient Guide, Identification Card, and Key Ring Tag identifying you as a patient with a Dignity CT Port. Carry your Dignity CT Port Patient Identification Card with you at all times. Show it to the clinician beforehand whenever your port is accessed for a procedure. You may place the key tag on your key ring as a convenient reminder that you have a Dignity CT Port.

In addition, if you have received a Dignity CT Port, your patient chart should show a CT injectable port record sticker noting this fact.

ATTACH THIS MEDCOMP® CT IMPLANTABLE PORT INFORMATION SHEET TO PATIENT'S CHART

medCOMP 1440 Dreyfus Drive, Haverlyville, PA 19030 • Ph: 215-256-4001 • Fax: 215-256-1787 • www.medcompport.com

IMPLANT RECORD This patient has a **MEDCOMP® CT Implantable Port** Product No. _____ Implant Date _____

Patient's Name _____
Implanting Physician's Name _____
Implant Site _____
Chest X-Ray Yes No CT Port Size: Mini Low Profile Mini Guard Standard
 ChronoFlex® Polyurethane Silicone Vessel Insertion Site _____
Length _____ French Size _____

FLUOROSCOPY PROTOCOL (see back of box)
After each insertion of Medcomp CT Implantable Port, the patient should be monitored for 30 minutes for any signs of complications. If any complications occur, the patient should be monitored for 30 minutes. If any complications occur, the patient should be monitored for 30 minutes. If any complications occur, the patient should be monitored for 30 minutes.

Place Product Identification Sticker Here

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See the Difference!

Your Dignity CT Port has a unique print, which can be detected by x-ray that distinguishes it from traditional ports. Trained clinicians can recognize the “CT” text printed on the base of the device by reading your x-ray of your Dignity CT Port.

Ask your doctor or nurse to help you see the difference with your new Dignity CT Port.



*Dignity CT Port
X-ray (top view)*

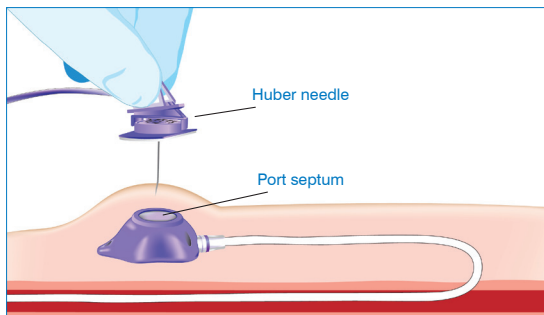


*Dignity CT Port
(bottom view)*

ACCESS

How Your Dignity CT Port is Accessed

Your clinicians will use a Dignity CT Port whenever they need to infuse medications or fluids into your body or withdraw samples of your blood. To do this, they will first access the Dignity CT Port by inserting a special needle into the soft top of the device. Ask the clinician about what to expect in your own procedure.



Huber needle accessing port septum.

HEPARIN LOCKS

About Heparin Locks

Sometimes blood clots can block the catheter, preventing medications and fluids from flowing through it. However, blood will not clot when it is thinned with a medication called heparin. To help prevent clots from forming, implanted ports are typically filled with sterile heparinized saline after each use. This process is called a heparin lock. If your Dignity CT Port will not be used for long periods of time, the clinician will typically change the heparin lock every four weeks.

If you have been diagnosed as being allergic to heparin or as having heparin induced thrombocytopenia (HIT), it is important to remind the clinician of this fact anytime your Dignity CT Port is accessed.

POWER INJECTION/CECT SCANS

What to Expect During Power Injection for CECT Scans

About Power-Injected CECT Scans

Contrast-Enhanced Computed Tomography (CECT) scans are simple, safe and non-invasive procedures that provide quick and accurate diagnostic information to help your medical team manage your care. These scans are many times more sensitive than conventional x-rays. Radiologists can distinguish small differences in your soft tissues that may not be detected with x-rays.

Before performing a CECT scan the radiology team will inject a contrast agent, which is a special fluid that acts like a dye, into your body to help produce clearer pictures during the CECT scan procedure. Your Dignity CT Port used with a Power Injectable Safety Huber Needle Set has the unique ability to allow clinicians to perform power-injected CECT scans without having to make a needlestick in your arm or wrist veins.

What Your Clinician Should Know

Always show your Dignity CT Port Patient Identification Card to clinicians who perform your CECT scan. It informs them that you have a Dignity CT Port.

Q & A

Common Questions and Answers

How do I take care of my Dignity CT Port?

During the first few days after receiving the Dignity CT Port, avoid heavy exertion and follow the instructions your doctor or nurse has given you for taking care of the small incision. Once the incision has healed, the benefit of your Dignity CT Port is that you do not have to take any special care of it, and you can resume normal daily activities.

Will the Dignity CT Port affect my daily activities?

Once the incision heals following implantation, you should be able to return to your normal daily activities, such as bathing, swimming or jogging. Ask your doctor or nurse about specific activities and the appropriate time to resume them.

Will I need to wear a bandage over the Dignity CT Port?

A bandage will be required until your incision heals. After the incision has healed, a bandage is not required when the Dignity CT Port is not being used. If you are receiving continuous infusion of fluids, a bandage may be applied to stabilize and protect the needle while it is in place.

Do I have to stop wearing certain types of clothing?

Ask your doctor or nurse because the answer will depend on where your Dignity CT Port is placed.

Who pays for the Dignity CT Port?

Insurance policies vary, so check with your insurance company first.

Will the Dignity CT Port activate security alarms?

Security systems most likely will not detect the device as it is made mostly of plastic. If it does occur, simply show your Dignity CT Port Patient Identification Card.

How long will I have my Dignity CT Port?

The Dignity CT Port can stay in place for as long as your doctor determines that you need it.


Will my Dignity CT Port need to be accessed when not in use?

Yes. It will need to be flushed every 4 weeks.

Can the Dignity CT Port be removed if I no longer need it?

Yes. When no longer needed, the Dignity CT Port can be removed in a simple procedure similar to the one used to implant it.

Is the Dignity CT Port safe with CT and MRI?

Yes. The materials used in Dignity CT Ports are latex free, non ferromagnetic and safe with CT, CECT, and magnetic resonance imaging (MRI) procedures.  , MR Conditional up to 3 Tesla.

WARNING: Artifacts may be present that could cause visual distortion if the MR imaging area of interest is in or near the area where this device is located.

What if the clinician has not seen a patient with a Dignity CT Port before?

Dignity CT Ports are a new technology. It may not yet be familiar to all clinicians involved in your care. Always show your clinicians your Dignity CT Port Patient Identification Card, especially if your Dignity CT Port will be accessed for power-injected CECT scans. Your Dignity CT Port Patient Identification Card contains a summary of important information for the clinician.

As a new patient with a Dignity CT Port, you've got the power to take an active role in your treatment. The best way you can be involved is to share information and concerns you have with your clinician. Let your clinician know if you notice anything that seems unusual.

What to Report to Your Clinician

Here are some important things to tell your clinician:

- You have a **Dignity CT Port** port.
- If you notice any redness or inflammation at the site of your **Dignity CT Port** after the incision heals.
- If you have a fever.
- If you have allergies to any medications or materials.
- If you have an allergy to heparin.
- If you have heparin induced thrombocytopenia (blood-thinning) due to medications such as heparin or warfarin.
- If you have previously been treated with radiation.
- If you have ever been diagnosed with lung disease.
- If you have ever been diagnosed with, or treated for venous thrombosis.
- If you have ever been diagnosed with any tissue diseases or suffered from tissue erosion.
- If you have ever been diagnosed or tested for “pinch-off” syndrome.
- If other clinicians have ever had difficulty withdrawing blood or infusing fluids through your implanted port, including whether other clinicians have ever required you to change position to allow blood or fluid to flow.