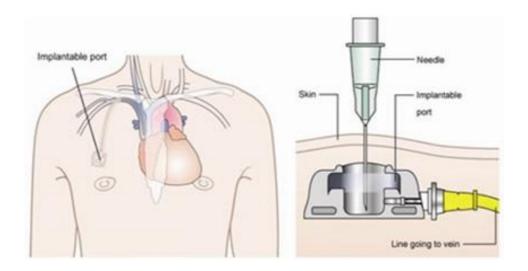


# Intravenous Antibiotics via a Port-a-Cath at home for Cystic Fibrosis, using an infusion device

## **Information for Parents/Carers**

	Addressograph
Name:	
Address:	
DOB:	/
NHS No	



## Signature of care givers

Name (printed)	Signature	Designation/Role



The aim of this leaflet is to ensure that parents/carers will feel safe and confident in giving antibiotic treatment at home.

Following training and reading this leaflet you should:

- Know the procedure for administering antibiotic treatment via a port-a-cath.
- Be aware of how to deal with problems that can occur when administering antibiotics
- Know how to acquire general advice and emergency help.

If you have any concerns or questions regarding your child's treatment, telephone the Children and Young People's Home Care Team (C&YPHCT) on 01270 612071. Available Monday to Friday, 8.30am - 4.00pm.

Outside these times, contact the Child and Adolescent Unit (CAU) on 01270 612073.

The timing of your child's antibiotic therapy will depend largely on the drug prescribed.

Where the drug is given 3 times a day, intervals of 8 hours should be aimed for. However, a routine of 1 dose before school, 1 dose after school and 1 dose last thing at night is most reasonable.

Where the drug is given 4 times a day the most practical times are 6.00am, 12 midday, 6.00pm and midnight.

Some antibiotics e.g. Tobramycin require the monitoring of drug levels by blood sampling. This will be arranged with you and carried out in the Children's Outpatients Department.



# Possible problems with a Port-a-cath

Problem	Solution
Infection – signs of infection can be	Contact the C&YPHCT or CAU
pain, inflammation, redness or swelling	(telephone numbers above). They will
around site.	advise you on action to take which may
	include attending the hospital.
Adverse reaction – if your child	Contact the C&YPHCT or CAU.
develops a rash, itching, nausea or	
vomiting during antibiotic therapy this	If the child is unwell or collapsed call an
may be a sign of an adverse reaction	ambulance and place the child in the
although this is rare as this usually	recovery position.
occurs during initial treatment in hospital.	
Leakage – if leakage out of the port	Contact the C&YPHCT or CAU. They will
occurs you may inject into the	advise you on action to take which may
surrounding tissue, signs of leakage can	include attending the hospital
be pain, inflammation, redness or	Stop the infusion immediately
swelling around site.	



## Procedure for Administering Antibiotics via a Port-a-cath

Ensure you have the correct equipment prior to commencing preparation of the antibiotics.

#### For each course of antibiotics you will need:

- Pre-mixed Antibiotics for injection usually 2 antibiotics are given and will be prepared by Baxters for you. (These will be prepared in an infusion device. Remove from the fridge 4- 6 hours before use or as directed)
- Prepared 20ml syringe of Sodium chloride 0.9% ("saline")
- 10mls Heparinised saline ampoule (10 units/ml)
- 10ml syringe
- Sterile dressing pack
- Non needle connector (Needle free device) to be changed every 5 days
- Gripper needle/ straw x 2
- Sanicloths
- I.V. 3000 dressing
- Tray
- Hibiscrub to wash hands
- Manusept hand rub
- Skin cleanser
- Sharps box
- Tape to secure administration set

It is best to prepare the antibiotics for injection in a quiet, clean place where equipment can be stored nearby and hand washing facilities are available close at hand.

#### When administering your treatment at home it is important that:

Action	Rationale
Any hoovering or dusting has finished at least one hour prior to administration of treatment. All doors and windows are closed. Only people who may be helping you are present in the room. No pets are in the room.	To reduce the risk of infection.
Collect together the items you require.	To reduce the need to interrupt the procedure which could lead to an increased risk of infection.
Check that none of the packaging is wet or damaged.	To reduce the risk of infection.
Check correct drugs are available and are within the expiry date.	To reduce the risk of incorrect or out of date drugs being administered.
Wash hands using Hibiscrub and dry with kitchen towel.	To reduce the risk of infection.
Clean tray with a Sanicloth.	To provide a clean surface upon which to lay out all equipment and to reduce the risk of infection.



Action	Rationale
Action	
Open sterile dressing pack using the	To provide a sterile area to work on.
corners to open the outer sterile sheet.	
Empty all equipment onto the sterile	To maintain sterility of equipment to
area without touching.	reduce the risk of infection.
area without touching.	reduce the risk of infection.
Clean the outside of the pre-mixed	Although prepared in a sterile
syringe, and the infusion devices with	environment the syringes are packed in a
the antibiotics with a Sanicloth then	non-sterile area.
place onto a sterile area.	non sterile area.
Wash hands again with Hibiscrub or	To ensure hands are clean after opening
clean hands with Manusept hand rub	and preparing equipment so as to reduce
and allow them to dry.	the risk of infection.
Prepare Antibiotics.	To reduce the risk of infection.
Ready-made antibiotics are prepared	To roddoo and rick of infloction.
by Baxters.	
Preparation of 1 <sup>st</sup> Antibiotic using an in	fusion device
The antibiotic is prepared by Baxters	To reduce the risk of infection.
in a small plastic bottle called an	
intermate.	
Check label for correct name, dose	To prevent incorrect drug administration.
and expiry date.	
Remove the Winged luer cap from the	To prime the extension set and prevent
end of the infusor tubing. Check to	air being infused into the central venous
make sure the liquid has moved to the	line.
end of the tubing.	
Replace the winged luer cap.	
Sodium Chloride	
20mls of Sodium chloride 0.9% will be	Some drugs cannot be mixed
prepared in pharmacy to be used for a	together, therefore it is essential that
flush.	Sodium Chloride is used before and
	between each drug - this includes
	flushing before Heparinised Saline is
	finally used to lock the IV line.
Remove plastic stopper and remove	To avoid the risk of air in the Central
air bubbles.	venous line.
Heparin	10540 iiii0.
5mls of Heparinised saline (10 units in	Heparin is used as a 'lock' to prevent
1 ml) –	blood clotting in the Port-a-cath.
Attach a filter straw or needle to the	and a second sec
syringe, then using a piece of gauze	
open the vial of heparin.	
Put the filter straw/ needle into the	
open vial of heparin and withdraw 5	
mls. Now put back onto your dressing	
pack until the end of the antibiotics.	
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Action	Rationale
Administration of Autilities	
Administration of Antibiotics	
Always give the exact dosage set by the hospital which will be written on your prescribed drugs.	
Observe site of Port-a-cath.	To observe for any signs of infection - redness, swelling, pain or leakage.
Expose the Needle free device on the exit site of Port-a-cath extension.	To give a firm-hold onto the line.
Hold line and bionnector with a clean Sanicloth.	
Clean Needle free device with a clean Sanicloth for 20 seconds and discard wipe.	To prevent contamination of the line - Chlorhexidine is antifungal and antibacterial.
Allow to dry.	
Remove needle and attach syringe containing sodium chloride 0.9% to needle free device.	
Unclamp the line	
Slowly inject 5mls sodium chloride	To avoid drug going out of the Port-a-
observing for any signs of leakage,	cath and into the surrounding tissues.
swelling or pain.	
Stop injecting if you feel any	
resistance or see any signs of	
leakage, swelling or if any pain.	
Clamp the line.  Administration of 1 <sup>st</sup> Antibiotic	
Remove the winged luer cap and	
attach extension set to needle free device.	
Open clip and unclamp line.	
Fold sterile sheet over clean area until infusion completed.	
Once antibiotic completed clamp the line and detach the antibiotic tubing and then attach the syringe containing Sodium chloride.	
Unclamp the line and slowly inject 10mls Sodium chloride observing for	To flush the line between drugs.



Action	Rationale
any signs of leakage, swelling or pain.	Rationale
any signs of leakage, swelling of pain.	
Very slowly infuse 10mls Sodium chloride over 10 mins	To avoid remaining Antibiotic in the line being given too quickly
Clamp the line.	
Remove syringe containing Sodium chloride.	
Administration of 2 <sup>nd</sup> Antibiotic using in	nfusion device
Remove the winged luer cap and attach extension set to needle free device.	Ensure body temperature is maintained to facilitate effective infusion (avoid extremes of heat and cold).
Open clip and unclamp the line.	To ensure total volume of drug is infused slowly. The antibiotic is infused slowly
Fold sterile sheet over clean area until infusion completed.	through the device, it must be given slowly to avoid any complications.  To keep sterile area clean while antibiotic infused.
When infusion is completed	illiuseu.
Wash hands with Hibiscrub and dry.	To ensure hands are clean.
Clean connection between extension set and needle free device using an Sanicloth and remove extension set	
Attach syringe containing Sodium chloride 0.9%.	To flush the line between drugs.
Unclamp the line.	
Very slowly infuse 10mls Sodium chloride over 10 mins	To avoid remaining Antibiotic in the line being given too quickly
Ask assistant to clamp the line.	
Remove syringe containing Sodium chloride.	
Attach syringe containing Heparinised saline (10 units per ml) to needle free device.	
Unclamp the line.	
Slowly inject 5mls Heparinised saline (10 units per ml) Stop injecting if you feel any resistance or see any signs of leakage, swelling or if any pain.	



Action	Rationale
As you reach the last 0.5 ml clamp the line as you continue to inject Heparin.	To create a 'Heparin lock' which will prevent clotting of the line.
Check needle free device is secure and dressing intact.	To prevent blood clotting in the Port-a-cath while it is not in use.
When the last dose of the 2 week course of antibiotics has been given it is necessary to flush the Port-a-cath with Heparinised saline 100 units/ml x 4mls.	
Tidying up	
All needles, ampoules and syringes should go into sharps box.	To prevent injury to self and others.
Disposing of all other waste into carrier bag or as advised e.g. recycling.	
Store all equipment safely, dry, cool and out of reach of children.	To prevent damage to items and injury to children.



# Teaching Checklist for Administering Antibiotics via a Port-a-cath

		Tick when completed
Hygiene	Hand washing	
	Preparation of the antibiotics	
Preparation	Preparation of the child	
	Preparation of the equipment	
	Check correct antibiotic – name, dose expiry date	
Procedure	Priming line	
	How to administer antibiotics	
	Flushing line	
	How to administer heparin	
Recording and	Care of equipment	
reporting	Disposal of waste	
	Knowledge of complications	
Any other care requirements or instructions		
)ate		



rocedure		•••
rent/carers name (p	orinted)	
	l, explained and dated (signature)	
Date	Practice / Observation	Signature



## **Certificate of Instruction**

## **Child and Adolescent Unit**

# Children and Young People's Home Care Team

Patient's name:		DOB:	
I agree that I have receiv	ed written guidelines and been ins	tructed how to:	
and now feel confident a	nd competent to carry out this proc	edure/treatment.	
I understand what proble	ms may arise and what to do if the	y occur.	
Parent / legal guardian /	patient's signature: (print & sign)		
Date:	<u> </u>		
	nurse assessing competency:	(print & sign)	
		(print & sign)	
	nurse assessing competency:	(print & sign)	
Signature of registered	nurse assessing competency:		
Signature of registered  Date:	nurse assessing competency:  Date for review	/:	
Signature of registered  Date:	nurse assessing competency:  Date for review Parent / legal guardian	v: Nurse assessor	
Signature of registered  Date:	nurse assessing competency:  Date for review Parent / legal guardian	v: Nurse assessor	
Signature of registered  Date:  Review Date	nurse assessing competency:  Date for review Parent / legal guardian	v: Nurse assessor	

This information is available in audio, Braille, large print and other languages. To request a copy, please telephone 01270 612071.

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