Utilization of a New and Improved Dressing for Implanted Ports

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PURPOSE
To decrease needlesticks related to de-accessing implanted ports.

BACKGROUND
Between 2012 and 2014, there have been twelve needlesticks related to implanted ports on a 47 bed Oncology Unit. Eleven out of the twelve needlesticks were related to de-accessing the implanted port needle with ten related to the safety not retracting due to the dressing sticking to the top of the needle. The nurses were unable to safely utilize the safety mechanism put in place for the needle. Needlesticks can place healthcare workers at risk for diseases such as, hepatitis and HIV. Needlesticks also cost the hospital money with follow-up care for the employee.

STRATEGY AND IMPLEMENTATION
Trial of a new improved CHG dressing for implanted port needles with a non-adherent center that does not adhere to the Huber needles and a CHG-gel pad that adheres to the skin under the needle versus a traditional antimicrobial disc. The center of the dressing provides better skin protection and during the trial was also found to cause less skin irritation for the patient. The dressing is large enough to accommodate implantable port needles of various sizes. The dressing is removed effortlessly and safely from the patient due to the non-adherent center.

RESULTS
Over a two month trial of the product, no needlesticks were reported related to implantable ports. Subjectively, nurses saw an overall improvement of the patient’s skin around the port and the patients complained of less itching and irritation. Nurses also noted there was less manipulation of the needle during insertion due to the CHG gel pad versus the CHG disc.

IMPLICATIONS
Needlestick injuries are a real patient and nurse safety concern. OSHA recommends the use of needle safety devices. Oncology patient skin is also at higher risk of adhesive-related skin trauma and skin irritation, and may benefit from a more gentle dressing. Any patient with an accessed implanted port would have this dressing placed. The CHG-gel antimicrobial component of this dressing may provide an added benefit to an immune suppressed patient population.

CONCLUSION
Utilizing this improved CHG dressing for implanted ports can effectively decrease needlesticks related to de-accessing port needles. Needlestick safety is crucial for the safety of nurses and the healthcare team. This trial also has shown to provide better skin protection and less irritation for the patient. The trial of this new dressing has proved its effectiveness and will be utilized hospital wide for all implanted ports.

REFERENCES
- https://www.osha.gov/SLTC/bloodbornepathogens