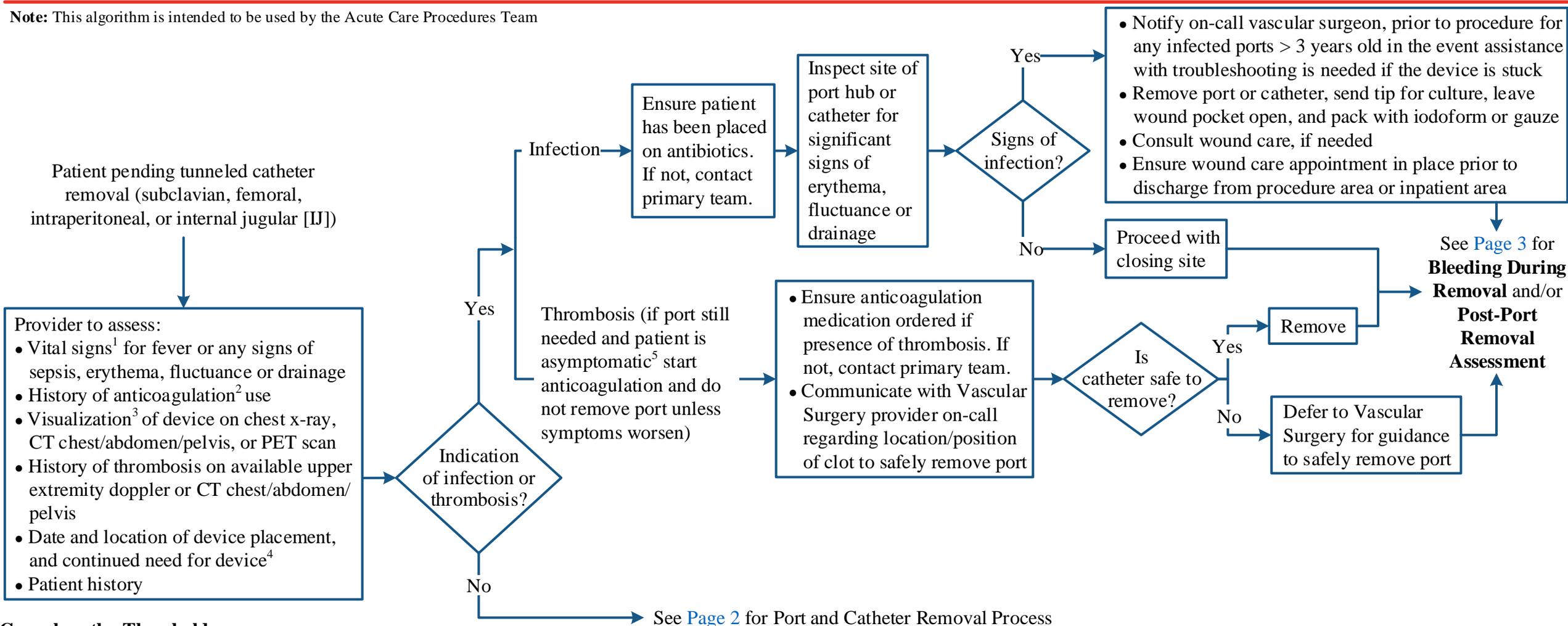


Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson's specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient's care.

**Note:** This algorithm is intended to be used by the Acute Care Procedures Team



### Coagulopathy Threshold

Procedure	Minimum platelet threshold	Threshold to infuse platelets during procedure	INR
Port catheter removal	20 K/microliter	10-20 K/microliter	2
Tunneled catheter removal	20 K/microliter	10-20 K/microliter	2

<sup>1</sup> Heart rate > 110 bpm or < 60 bpm, oxygen saturation < 92% and systolic blood pressure < 95 mmHg or > 170 mmHg

<sup>2</sup> Refer to [Peri-Procedure Management of Anticoagulants algorithm](#) prior to procedure

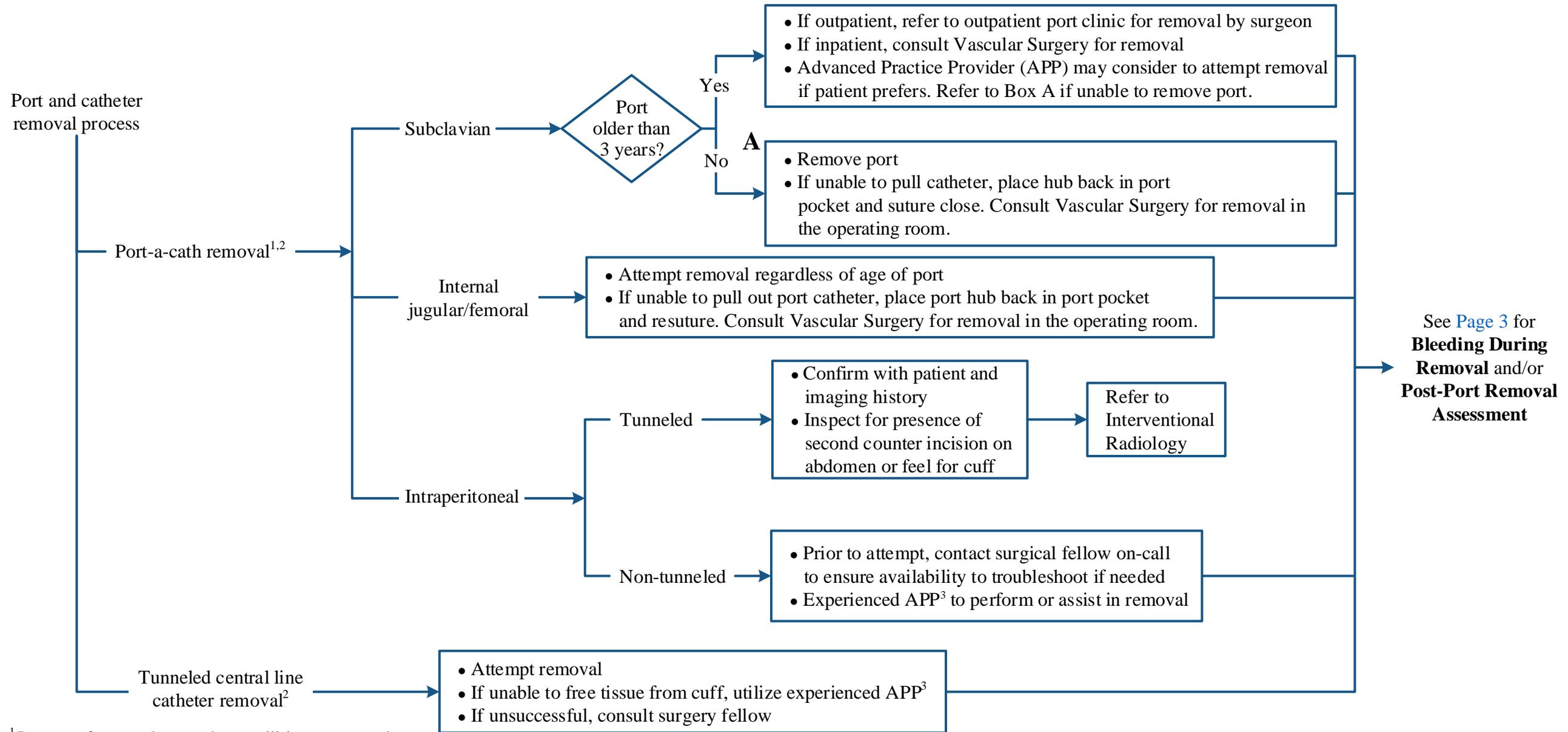
<sup>3</sup> Devices not captured on imaging and/or palpable on physical exam need to be sent to obtain a recent chest x-ray to visualize device before removal procedure

<sup>4</sup> For devices placed at MD Anderson that are still needed for access, contact provider/surgeon directly who placed device to assist with troubleshooting

<sup>5</sup> No pain and/or swelling

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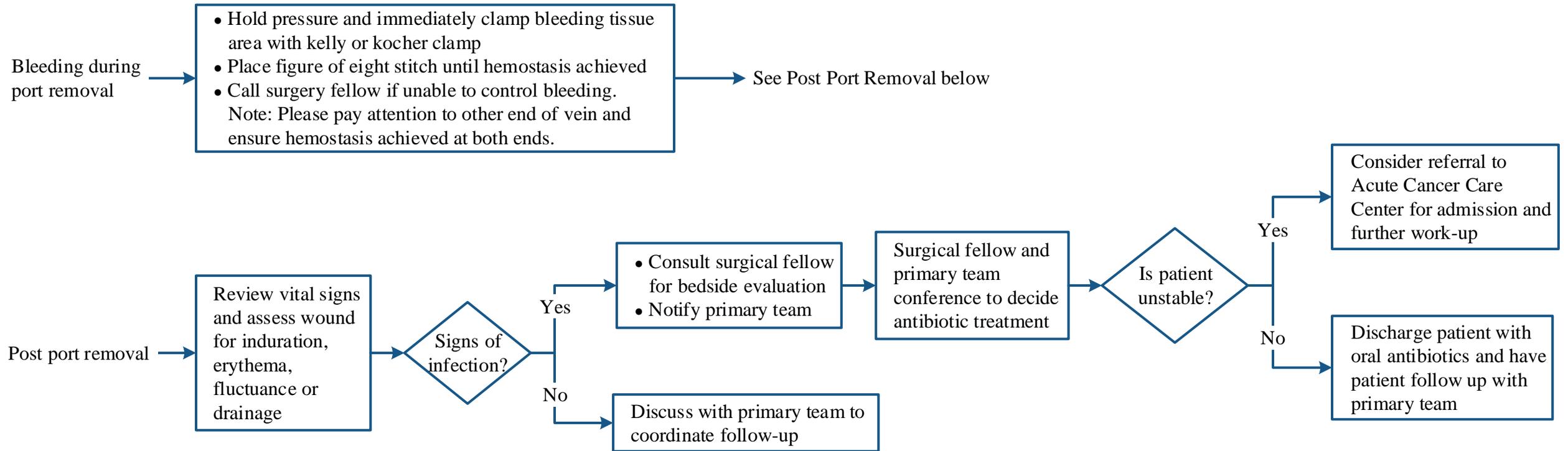
<sup>1</sup> Do not perform a catheter exchange utilizing a port-a-cath

<sup>2</sup> Patient must be supine for procedure

<sup>3</sup> APP with > 1 year experience in port removal

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## SUGGESTED READINGS

- Bishop, L., Dougherty, L., Bodenham, A., Mansi, J., Crowe, P., Kibbler, C., . . . Treleaven, J. (2007). Guidelines on the insertion and management of central venous access devices in adults. *International Journal of Laboratory Hematology*, 29(4), 261-278. <https://doi.org/10.1111/j.1751-553X.2007.00931.x>
- Chen, H., Sonnenday, C. J., Lillemoe, K. D., Ovid Technologies, I., & Johns Hopkins Hospital. (2000). *Manual of common bedside surgical procedures* (2nd ed.). Philadelphia: Lippincott Williams & Wilkins.
- Cerini, P., Guzzardi, G., Galbiati, A., Stanca, C., Del Sette, B., & Carriero, A. (2017). Endoluminal dilation technique to remove stuck port-A-cath: A case report. *Annals of Vascular Surgery*, 43, 317.e1-317.e3. <https://doi.org/10.1016/j.avsg.2017.04.042>
- Hong, J. H. (2009). An easy technique for the removal of a hemodialysis catheter stuck in central veins. *The Journal of Vascular Access*, 11(1), 59-62. <https://doi.org/10.1177/112972981001100112>

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## DEVELOPMENT CREDITS

This practice consensus statement is based on majority opinion of the Acute Care Services Department at the University of Texas MD Anderson Cancer Center for the patient population. These experts included:

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