

PREOPERATIVE DIAGNOSIS:, Metastatic glossal carcinoma, needing chemotherapy and a port.,POSTOPERATIVE DIAGNOSIS: , Metastatic glossal carcinoma, needing chemotherapy and a port.,PROCEDURES,1. Open exploration of the left subclavian/axillary vein.,2. Insertion of a double lumen port through the left femoral vein, radiological guidance.,DESCRIPTION OF PROCEDURE: , After obtaining the informed consent, the patient was electively taken to the operating room, where he underwent a general anesthetic through his tracheostomy. The left deltopectoral and cervical areas were prepped and draped in the usual fashion. Local anesthetic was infiltrated in the area. There was some evidence that surgical procedure had happened in the area nearby and also there was collateral venous circulation under the skin, which made us suspicious that may be \_\_\_\_\_, but at any rate I tried to cannulate it subcutaneously and I was unsuccessful. Therefore, I proceeded to make an incision and was able to isolate the vein, which would look very sclerotic. I tried to cannulate it, but I could not advance the wire.,At that moment, I decided that there was no way we are going to put a port though that area. I packed the incision and we prepped and redraped the patient including both groins. Local anesthetic was infiltrated and then the left femoral vein was percutaneously cannulated without any difficulty. The introducer was placed and then a wire and then the catheter of the double lumen port, which had been trimmed to position it near the heart. It was done with radiological guidance.

Again, I was able to position the catheter in the junction of inferior vena cava and right atrium. The catheter was looked upwards and the double lumen port was inserted subcutaneously towards the iliac area. The port had been aspirated satisfactorily and irrigated with heparin solution. The drain incision was closed in layers including subcuticular suture with Monocryl. Then, we went up to the left shoulder and closed that incision in layers. Dressings were applied.,The patient tolerated the procedure well and was sent back to recovery room in satisfactory condition.