

**MAINTENANCE OF
FULLY IMPLANTED
CATHETER: RESULTS
OF SALINIZATION
PRACTICE IN
AN ONCOLOGY
OUTPATIENT IN
THE SOUTH OF THE
COUNTRY**

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Abstract: Introduction: The fully implanted catheter used in the field of oncology stands out as the most widely used alternative to venous devices. However, its use is not free from complications, which may be associated with the quality of the device, the surgical implantation procedure or its handling. Its obstruction represents one of the main non-infectious complications linked to its manipulation and use. Maintenance is carried out when the device is not being used to infuse medications, and it is imperative to puncture and infuse a solution to preserve permeability. The appropriate technique and time interval required for such maintenance are provided by the catheter manufacturer. However, the nursing team does not always have access to this information, since the devices are implemented in healthcare institutions. different, which results in loss of control over catheter care. **Goal:** Demonstrate the effectiveness of the salinization practice, the time interval adopted and the procedures involved in maintaining the fully implanted catheter. **Methods:** A quantitative study was carried out on the number of salinization procedures performed on fully implanted catheters, with an 8-week interval between each maintenance. The technique used comprised the use of swirling and positive pressure, covering the period from March 2021 to July 2023. **Results:** During the period from March 2021 to July 2023, 857 maintenance interventions performed on fully implanted catheters, covering a total of 98 patients. The saline solution was administered through syringes filled with 20 ml. The swirling and positive pressure technique was applied through brief compression movements on the syringe until the final quantity in milliliters, followed by closing the needle extender. Regarding the brand and manufacturer of the catheter, such information was not available to the nursing team, therefore, the same care

protocols and time interval were adopted for all patients. Regarding complications, with obstruction representing the most common risk, no lumen occlusion in the catheters used was observed. **Conclusion:** The results suggest that the practice of salinizing the fully implanted catheter, using a 20 ml saline solution and an interval of 8 weeks, with the swirling technique and placement of positive pressure, demonstrates effectiveness in maintaining the permeability of the device, even when it is not has the manufacturer's knowledge. Occlusion prevention is based on adequate washing and blocking techniques with normal saline. **Implications for Practice:** It is imperative that evaluation and observation of this practice be continued and that the need to conduct further comparative studies regarding the clinical efficacy and long-term safety of saline be recognized and addressed.

Keywords: CENTRAL VENOUS CATHETER; SODIUM CHLORIDE; ONCOLOGY NURSING.