Implanted ports have become invaluable for treating patients with cancer. Central venous access devices are used for obtaining blood samples and administering chemotherapy and other supportive medications. Implanted ports have advantages over tunneled central venous catheters, as they are concealed beneath the skin as opposed to tunneled catheters or peripherally inserted central venous catheters, and often are preferred by patients requiring therapy because they require less maintenance (Sansivero, 2010).

Oncology nurses increasingly are aware of the need to use sound, scientific-based research to support clinical practice. The value of evidence-based practice is summed up by Eaton and Tipton (2009): “The ability to provide evidence for nursing interventions is critical to all aspects of patient care” (p. 2). But what do oncology nurses do when no evidence exists or the effectiveness of a particular practice has yet to be established?

The controversy surrounding the sterile versus clean techniques for accessing ports has been a source of discussion for a number of years. The Infusion Nurses Society advocated the use of the sterile technique in 2006 standards, and continued that recommendation in the current 2011 Standard of Practice (Infusion Nurses Society, 2006). Camp-Sorrell and Cope (2010) suggest that the sterile technique is preferred for central venous catheter insertion.

The controversy surrounding the sterile versus clean techniques for accessing ports has been the subject of numerous studies. In 1987, Schulmeister compared central venous catheter insertion and found no difference in infection rates, but no recent studies have compared the sterile and nonsterile techniques. In 2008, a retrospective study of patients undergoing oncology treatment found that the sterile technique was associated with a lower incidence of infection.

Seth Eisenberg, RN, OCN®, is a professional practice coordinator in infusion services at Seattle Cancer Care Alliance in Washington. The author takes full responsibility for the content of the article. The author did not receive honoraria for this work. No financial relationships relevant to the content of this article have been disclosed by the author or editorial staff.