



Royal Papworth Hospital
NHS Foundation Trust

Cardiac catheterisation/ angiogram

Patient's guide and
agreement to consent form

Introduction

This guide is for patients who are having an examination of their coronary arteries, heart pump and heart valves - called a cardiac catheterisation. It explains what the catheter is for, what is involved, and any risks there may be.

The main purpose of the test is to show whether you have narrowings or blockages of the coronary arteries but it can also give information about how the heart is pumping and help with assessment of heart valves.

The results of the test will help the doctor make a decision about the best form of treatment for you.

Valuables

Please do not bring excess jewellery, credit cards or large sums of cash to the hospital.

Bring an overnight bag in case you need to stay overnight.

Preparation for the procedure

Usually you will come in to hospital on the morning of your procedure.

Please follow the instructions on your letter regarding medications.

If you take Warfarin tablets they may need to be stopped three days before the procedure, but you should check your pre-admission letter.

Please bring a list of all your medications and all of your medications with you in their containers.

If you are a diabetic on insulin please phone staff on 01223 638150 for advice. If you take Metformin, please omit on day of admission.

If you are not diabetic, please follow the instructions in your letter regarding eating and drinking.

Once shown to your bed the nursing team will assist you in preparing for the procedure. You will be asked to put your gown on and a pre-procedure check list will be completed.

Procedure

The cardiac catheterisation is performed in the X-ray department and usually takes 20-30 minutes. Occasionally if the patient is very nervous sedation may be administered.

The room is a little cold to prevent the apparatus from over-heating. The procedure is performed under local anaesthetic which is injected into the skin. A small tube (catheter) is passed into the artery in your groin or your wrist. The X-ray table and machine move around you to obtain the best pictures.

A dye which shows up under X-ray is injected into the catheter. This can cause a warm feeling all over the body for a few seconds. The X-rays are taken at this point. The cardiac catheterisation is not painful, but sometimes you may feel a slight discomfort in your chest. **Do not worry**, this does not mean anything is wrong, but do **tell the doctor**.

When the procedure has been completed you will be returned to the ward. A nurse will assess you on your return and pressure will be applied to the wrist or groin area, either manually or using a compression device to stop the bleeding. It is important to keep your leg/arm still for at least two hours after the procedure. Occasionally a device may be used called an angioseal which seals the hole in the artery in your groin.

In some circumstances the doctor may wish to assess the coronary arteries or stents in more detail using optical coherence tomography (OCT) or intravascular ultrasound (IVUS).

Interventional procedures information from NICE:

Please see NICE Interventional Procedure Guidance 481 for more information or visit <http://publications.nice.org.uk/optical-coherence-imaging-to-guide-procedures-on-the-arteries-supplying-the-heart-ifpip481>

Are there any risks?

This is a very safe test. On rare occasions there can be complications such as:

- A heart attack, stroke or death (combined risk: less than 1 in 1000). The risk may be increased if you are having angina or a heart attack at the time or if you have diabetes.
- Rarely the catheter can damage the artery, in which case you may have to stay in hospital to have it repaired (risk: 1 in 500).
- Bleeding and bruising especially around the area where the catheter was inserted. This can be made worse if you take anti-clotting drugs e.g. Warfarin.
- Allergic reaction to the dye, this is rare and usually very mild and temporary, such as a skin rash.

For some patients the risks may be higher, please speak to your specialist doctor before the procedure if you have any concerns.

Rarely it is necessary to be referred urgently for immediate stenting or immediate bypass surgery.

On return to the ward

You will be required to stay in bed for approximately two hours after the groin approach: one of these hours will be lying flat. After this you will be assisted to sit up and then mobilised.

If you are suitable for the angioseal you may sit up after your procedure and mobilise after ½ hour. It takes 90 days for the angioseal to dissolve.

If your wrist has been used you can sit up straight away.

Your blood pressure and pulse will be taken regularly after the procedure. You will be offered something to eat and drink after your procedure and you will be encouraged to drink plenty of water to flush the contrast dye from your body.

Delay

Sometimes your procedure may be unavoidably delayed due to emergency cases and, on rare occasions this may lead to your procedure being cancelled.

Results

Your results and the planned treatment will be discussed with you before you go home by both the doctor and the nurse. The nurse will give you a letter for your GP.

Going home

Cardiac catheterisation is normally performed as a day case procedure. You will need someone to drive you home, someone with you for your first night at home and have access to a telephone.

You can resume normal activities the next day but you should refrain from strenuous activity for 48 hours.

No driving for 24 hours.

Aftercare advice

If your groin bleeds, please do not panic. Lie down flat and get someone to apply pressure to your groin until the bleeding stops. This can take up to 10 to 15 minutes.

Radial

You will have a small wound on your wrist - the dressing can be removed in 48 hours following the procedure. It is safe to bath or shower when the dressing is in place. Keep your wound clean and do not put talcum powder or lotions on the surface of the wound until it is completely healed.

Angioseal and Sheath

It is common to have bruising on your groin and leg, which sometimes can spread to your abdomen.

Two to three days following the procedure, for up to a fortnight, you may notice a small pea or marble sized lump at the incision site - this is normal healing. If the lump is any bigger than this or if you experience any pain or redness around the area, please contact your GP.

You will have a small plaster over the incision site, which should be removed the day after your procedure. Please do not bath for four days following your procedure, although you may have a shower or strip wash until then. Avoid putting talcum powder on or around the wound for one week.

Research

Royal Papworth Hospital is a teaching hospital, and as such, you may be approached to participate in research.

Contact numbers

For further information please contact the Cardiac Booking Centre on **01223 638837**, who will answer your question directly, or put you in contact with someone who can.

Alternatively telephone the Cardiac Support Nurse team on **01223 638100**.

Royal Papworth Hospital NHS Foundation Trust

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www.royalpapworth.nhs.uk

A member of Cambridge University Health Partners

Telephone numbers you may need during your admission to hospital

Main Hospital Switchboard	01223 638000
5 North	01223 638375
5 South	01223 638648
3 South	01223 638370/01223 638911
Critical Care	01223 638400
Cardiac Rehabilitation	01223 638429

Cardiac Support Nurses helpline 01223 638100
(Monday to Friday 09:00 - 18:00 except Bank Holidays)

Author ID: Nursing Team
Department: Cardiac Day Ward
Reprinted: April 2019
Review due: July 2019
Version: 9
Leaflet number: PI 38

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alternative language
versions of this leaflet
can be made available
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