HEART AND VASCULAR CENTER OF LAKE COUNTY 1 S. Greenleaf Ave., Suite I | Gurnee, Illinois 60031 | P: 847.336.1600



Cardiac Catheterization

- Cardiac Catheterization is most often used to evaluate chest pain. It may also be done during a heart attack to identify narrowed or blocked coronary arteries. You also may need this procedure if other tests suggest you have coronary artery disease.
- Notify the doctor prior to the procedure if you have any upcoming surgeries, bleeding issues or contraindications for long-term Plavix/Asprin use.
- If you have a stent, especially a drug-coated stent, **Plavix must be taken every day**. If STOPPED, the stent can clog. This is a very serious complication which can cause death. **Your cardiologist is the only one who can decide if you should stop this medication.**
- If you have a stent, you will likely be kept overnight in the hospital. If your doctor says you can go home the same day, you must arrange for a ride home from the hospital. It is not safe to drive within 48 hrs of the procedure.
- A small bruise may develop at the site where the catheter was inserted. That area may feel sore or tender for about a week. You need to let your doctor know if you have a lot of bleeding from that area or any possible signs of infection. You may have to avoid certain activities, such as heavy lifting, for a short time following the procedure.

What to Expect Before Cardiac Catheterization

- **NO FOOD or DRINK** at least 8 -10 hrs prior.
- Glucophage/Metformin should be stopped 48 hours before the procedure.
- ASA 325 should be taken on the day of the procedure. Take ALL of your medications unless
 advise otherwise.
- If you have kidney disease, Mucomyst may be started. You may also need to see the kidney doctor before the procedure.
- If you have diabetes, kidney disease or another condition, we may require taking extra steps during or after the procedure to avoid complications.

What to Expect During Cardiac Catheterization

During a Cardiac Catheterization, you're kept on your back, awake and comfortable. That way, you can follow your doctor's instructions during the procedure. You will be given medicine to help you relax. Your doctor will numb the area where the catheter will be inserted (most commonly, the upper thigh or sometimes, your arm). A needle is used to make a small hole in the blood vessel and a small plastic tube called a sheath is inserted in the blood vessel. Your doctor then puts a catheter through the sheath and slides it over the guide wire and into the coronary arteries. During the procedure, your doctor may put a special dye in the catheter. Once the dye reaches your heart, it will make the inside of your heart's arteries show up on an x-ray (called an angiogram). This test is called "coronary angiography". If the angiogram, or intracoronary ultrasound, shows blockages or other possible problems in the heart's arteries, your doctor may use angioplasty to open up the blocked arteries. The opening left in the blood vessel will then be closed up and bandaged. A small weight may be put on top of the bandage for a few hours to apply more pressure. This will help prevent major bleeding from the site.

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What to Expect After Cardiac Catheterization

- You will be moved to a special care area, where you will rest for several hours or possibly,
 overnight. During that time, your movement will be limited. Avoid lifting your head off of the
 pillow because it increases bleeding from the site where the catheter was inserted. Nurses will
 check your heart rate and blood pressure and check for bleeding from the catheter insertion site.
- A small bruise may develop where the catheter was inserted. That area may feel sore or tender
- for about a week.
- If you have a stent, especially a drug-coated stent, **Plavix must be taken every day**. If STOPPED, the stent can clog. This is a very serious complication which can cause death. **Your cardiologist is the only one who can decide if you should stop this medication.** Always carry your stent card in your wallet.
- Avoid certain activities, such as heavy lifting (no more than 25 lbs) for 5 days.

Be sure to let your doctor know if you develop problems such as:

- A constant or large amount of bleeding at the insertion site that can't be stopped with a
- small bandage.
- Unusual pain, swelling, redness or other signs of infection at or near the insertion site.

What are the Risks of Cardiac Catheterization?

Cardiac Catheterization is a common medical procedure that rarely causes serious problems. Generally, the risk of serious complications ranges from one in 1,000 to one in 500.

- Bleeding, infection and/or pain where the catheter was inserted.
- Damage to blood vessels. This is a very rare complication caused by the catheter scraping or poking a hole in a blood vessel as it is threaded to the heart.
- An allergic reaction to the dye used.
- Other less common complications of the procedure include:
 - An arrhythmia (irregular heartbeat), which often goes away on its own, but may need treatment if it persists.
 - o Damage to the kidneys caused by the dye used.
 - o Blood clots that can trigger strokes, heart attacks or other serious problems.
 - o A buildup of blood or fluid in the sac that surrounds the heart. This fluid can prevent the heart from beating properly.
 - o Emergency Bypass surgery.

As with any procedure involving the heart, complications can sometimes, although rarely, be fatal. The risk of complications with Cardiac Catheterization is higher if you have diabetes or kidney disease or if you're 75 years old or older. The risk of complications also is greater in women and people having Cardiac Catheterization on an emergency basis.

http://www.cardiosmart.org/HeartDisease/CTT.aspx?id=318 (original document)