

Patient Education Sheet

What is a Cardiac Catheterization or Coronary Angiography

What is a Cardiac Catheterization and why is this test ordered?

Cardiac Catheterization is a valuable diagnostic tool that allows the physician to view the arteries that feed the heart (coronary arteries) via x-ray. The doctor may also assess heart valve function and check the pumping ability of the heart.

This procedure might be ordered if you have been experiencing symptoms such as:

- Chest pain or discomfort
- Fatigue
- Difficulty breathing or shortness of breath
- Positive stress test

Other reasons could include:

- A pre-operative study
- Known cardiovascular disease

Cardiac cath (catheterization) is the insertion of a catheter (flexible tube) to the coronary arteries. X-ray dye (contrast) is injected through the catheter and into the coronary arteries. This allows the coronary arteries to be seen on x-ray.

How long will this test take?

The catheterization itself takes about 1 1/2 hours. However, the pre-procedure set up and post procedure care add more time.

Is there any special preparation prior to the procedure?

Do not eat or drink at least 6 hours before the procedure. Take all of your regular medications before your catheterization unless directed otherwise by your doctor. If you are a diabetic or on blood thinners, you may need to adjust your medication dosage before your catheterization. Contact your cardiologist.

If you are having this test done as an outpatient, you must arrange to have someone beside yourself drive you home.

Your cardiologist may order labwork prior to the procedure. If you have ever had a contrast or dye allergy, please let your Cardiologist's office know about this when they discuss booking your test.

Bring a current list of your medications with you. Wear comfortable clothing that is easy to change in and out of. Leave valuables at home such as jewelry, money, checkbook and credit cards.

What can I expect on the day of the procedure?

- Once you have arrived at the Patient Care Area, a nurse will greet you and escort you to your bay. You will be asked to change into a hospital gown.
- Your private bay will have a small television and a telephone.
- The nurse will obtain your height and weight, ask you about any allergies you may have, and ask you for a list of your current medications.
- You will be asked to empty your bladder.
- You will be connected to monitoring equipment including a blood pressure cuff, a finger clip to monitor your blood oxygen level and a heart monitor.
- Two intravenous lines will be started. The access site will be shaved. This is often the groin, but can also be the inner part of the elbow or the wrist.
- A Nurse Practitioner will obtain a medical history.
- The Cardiologist performing the procedure will explain the process with you and discuss informed consent. You will have the opportunity to ask questions about the catheterization.

- Once you and the team are ready and consent is signed, you will be brought to the cath lab on your stretcher. The staff will assist you onto the procedural table. You will need to lay flat, with 1-2 pillows under your head.
- The room may feel cool and you will see a lot of equipment including the x-ray tube, computer monitors and a sterile table.
- You will be connected to the monitoring equipment for the cath lab: blood pressure cuff, finger probe and heart monitor. Your blood pressure cuff will inflate and check your B/P approximately every 15 minutes.
- The staff will introduce themselves. There will be a Circulating Nurse whose job is to take care of you during the procedure. The scrub person and the Doctor will be in a sterile gown, gloves and mask. The scrub person will assist the doctor. A fourth person will be in and out of the room. It is their job to record information into the computer.
- Your gown will be removed (the metal snaps interfere with the picture). If you desire, warm blankets will be placed over you. Your privacy is important to us and you will not be exposed. A sterile drape will be placed over you.
- Most procedures are done with light sedation. It is important that you are able to talk to your nurse, and on occasion answer questions the Doctor may ask.
- At the start of the procedure, the skin in the area of the insertion site is numbed. An introducer sheath (a special tube) is inserted into a site in the groin, arm, or wrist. The sheath remains in place during the entire procedure.
- Different catheters will be placed through the introducer sheath and threaded through your arteries to the heart. You will not feel the passage of these catheters. You may feel a sensation of pressure at the sheath insertion site.
- Contrast is injected through the catheters to fill the coronary arteries. Several arteriograms,

or pictures will be taken of each artery. You will see the camera move around you during the procedure.

- Some catheterizations require a view of the left ventricle. This is called the LV-Gram, and you will be informed of this before it is performed. Most patients get a warm head to toe sensation when the dye for this picture is injected. The warmth is harmless and passes quickly.
- At the end of the procedure, the catheters are removed. Some patients receive a closure device to seal the insertion site; some patients require manual compression, or pressure at the site after the sheath is pulled. The closure method is determined by the patient's anatomy and the Doctor's decision on follow up care.
- You will be moved to the Patient Care Area.

What do I expect after my procedure?

At the conclusion of the test, the Doctor will go over the results with you. You will spend between 2-6 hours on bedrest after your procedure. The nurses in the Patient Care Area will review post procedure care with you and review your medications. You will have a signed copy of directions to follow upon discharge.

Directions to your appointment at Danbury Hospital

Park in the red garage on Locust Ave and enter the Stroock building lobby and check in. Take the Tower elevator to the 7th floor. Once off the elevator, take 2 left turns and proceed straight into the Patient Care Area.

If you have further questions, call your cardiologist or Danbury Hospital Invasive Cardiology at 739-7436.

Source: American Heart Association
@www.americanheart.org

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*For more information, or to learn about the specialized services and programs available, please visit
www.westernconnecticuthealthnetwork.org*