

Coronary Angiogram

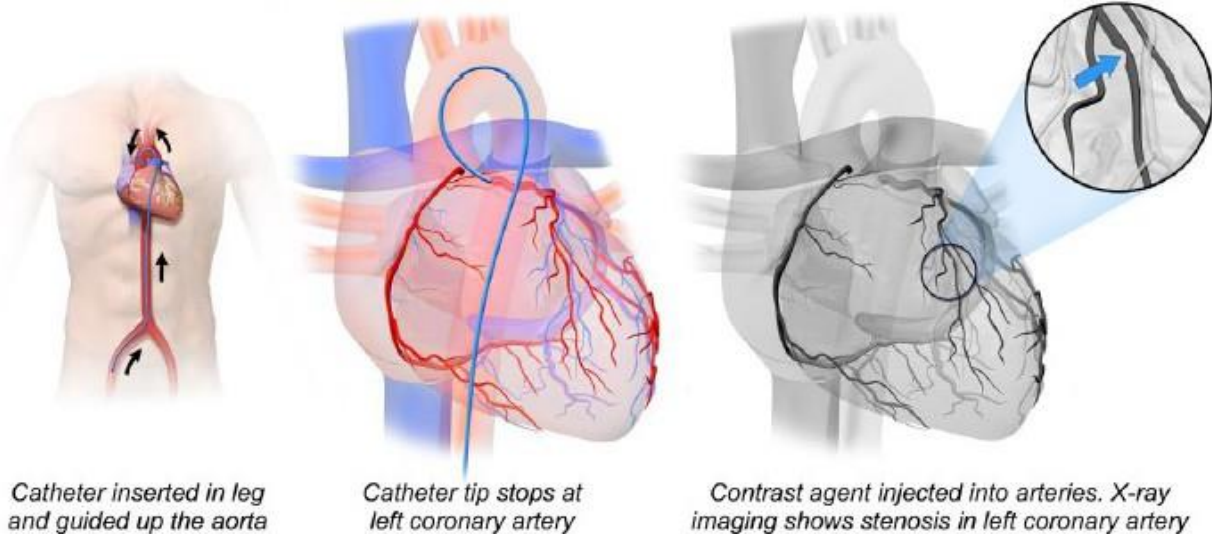
What is an Angiogram and why do we do it?

A coronary angiogram is an invasive test using contrast (X-ray dye) and x-ray to see if the coronary arteries which supply the blood to your heart, are narrowed or blocked. It involves placing a small plastic tube or catheter in an artery in the wrist or groin. The catheter is then passed to the heart and the doctor will inject contrast into the coronary arteries while using a special type of x-ray. This allows the doctor to see how well the contrast flows through the arteries and if there are any narrowings or blockages that may have caused or increase your risk of angina or a heart attack.

What to expect during an Angiogram?

You will be checked in by a nurse and doctor. Bloods will be taken and an IV Cannula inserted in your arm. The doctor will discuss the procedure with you and get you to sign a consent form. You will be brought into the procedure room and placed lying on your back on the x-ray table and attached to a monitor. There will be an x-ray machine over you to help us take the images. This will move during the angiogram but don't worry it won't harm you. The procedure can be done through your wrist or groin. The area is numbed with local anaesthetic. A small tube is then passed through the blood vessel and used to guide wires and catheters up to your heart. If the test is done through your arm, they will give you medications to relax the radial artery that may give you a burning sensation up your hand lasting about 10 seconds.

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Radiation

Ionising radiation is used to take images during this procedure. The Radiographer will optimise your X-ray examination, keeping your radiation dose as low as possible. As X-ray is used, women aged between 12 - 55 years old will be asked to provide the first date of their last menstrual period (LMP) and sign a “*Pregnancy Status Declaration*” form. If your period is overdue, a urine pregnancy test will be taken before your procedure. If you are aware that you are pregnant please inform the Nurse/Radiographer attending to you.

Radiation warning

Your procedure, which your doctor has recommended, involves the use of ionising radiation (X-rays). We monitor the radiation dose used throughout the case. High doses of radiation may be associated with some health risks, such as slightly elevated cancer risk or skin reddening. Although the doses of radiation usually incurred in a given procedure are small, it is possible that cumulative exposure received may produce a reaction such as skin reddening (very like sunburn). If levels measured indicate that the cumulative exposure could cause such skin reactions, then appropriate advice will be given and monitoring for any possible reactions instigated.

Sedation

Sedation is sometimes used during an angiogram. If sedation is required during the procedure please note the following;

- Sedation can cause drowsiness and increase your risk of falling.
- Do not drive for 24 hours. Please make arrangements for an adult to collect you to bring you home.
- Do not consume alcohol within 24 hours post procedure.
- Avoid making any legal decisions or signing any legal documentation.
- Do not operate heavy machinery.

Your role in the procedure

Please try to refrain from moving your legs or arms in the sterile working area. If you feel any discomfort or uncomfortable symptoms during the procedure for example chest pain, dizziness or shortness of breath please let your doctor or nurse know so they can assess you and take measures to help you get more comfortable.

Preparation

- You do not need to fast for this procedure
- Bring in a list of your regular medications
- If you are diabetic, eat & drink as normal and take your insulin/medications as usual.
- Ensure you have someone to collect you after the procedure. If you have nobody to collect you or stay overnight with you, contact us to inform us of same- 01 803-2312 as it may not be safe for us to proceed with your procedure without someone to look after you.

Blood Thinners

- If you are taking Aspirin and / or a second antiplatelet medication such as Clopidogrel (Plavix), Ticagrelor (Brilique) or Prasugrel (Effient), please continue these without any interruption
- If you are on Warfarin, you should skip 3 doses prior to your procedure
- If you are on Dabigatran (Pradaxa), Rivaroxaban (Xarelto), Apixaban (Eliquis) or Edoxaban (Lixiana), you should not take this the night before or on the morning of your procedure.
- If you are on your blood thinner because you have a metallic heart valve or because you have had a stroke or mini-stroke please call the cath lab nurses (01 803-2312) to confirm that it is safe and appropriate for you to stop your blood thinners prior to your procedure

Post procedure

The tube in your arm/leg will be removed at the end of the procedure. If the procedure is done through your leg, the doctor or nurse will press on the site for 10-15 minutes to stop any bleeding. You will need to lay flat for 4 hours. If it is done through your wrist, you will have a tight bracelet in place for 3-4 hours. As a result, recovery can take 4-5 hours.

Angiograms are usually performed as a day case. Occasionally patients need to proceed immediately to an intervention such as coronary angioplasty or stenting (see separate information leaflet) or you may be required to stay overnight.

Your doctor will discuss the results of the angiogram with you at the end of the procedure. A letter will be sent to your GP and or referring doctor detailing the results and any recommendations for further treatment.

On discharge

- You may be at an increased risk of falls due to the medications administered. Therefore, you will be advised to stay on a trolley until the nurse deems you safe to mobilise and for discharge. Please take care when leaving the hospital with supervision and for 24 hours at home.
- You cannot drive for 48 hours after your procedure.
- Risk of bleeding
 - Avoid heavy lifting
 - Avoid using your hand or applying pressure to the arm used for the procedure
 - Avoid immersing it in hot water
 - If femoral (groin) access, no bending
 - When coughing/sneezing , apply pressure to site

Potential Complications

- Bleeding, bruising, swelling at puncture site
- Pain or discomfort at site
- Change in colour, temperature appearance of the limb (arm/leg)
- Chest pain or shortness of breath
- Signs of infection or redness at site or new temperature

Uncommon complications (risk < 1 per 200)

- Heart attack
- Major internal bleeding
- Obstruction of a blood vessel requiring emergency intervention

Rare major complications (risk < 1 per 1,000)

- Stroke
- Death

Please contact the Cath lab if you develop any complications 01 803 2312 (08.00-20.00 Mon-Fri) for advice. However, if you become acutely unwell or notice sudden bleeding that doesn't stop after applying pressure, call 112 or attend your local A&E.

Useful websites:

https://www.rsa.ie/Documents/Licensed%20Drivers/Medical_Issues/Medical%20Fitness%20Guidelines.pdf
<https://www.hse.ie/eng/health/az/c/coronary-angiography/risks-of-a-coronary-angiography.html>



Catheterisation Laboratory

Mater Misericordiae University Hospital

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