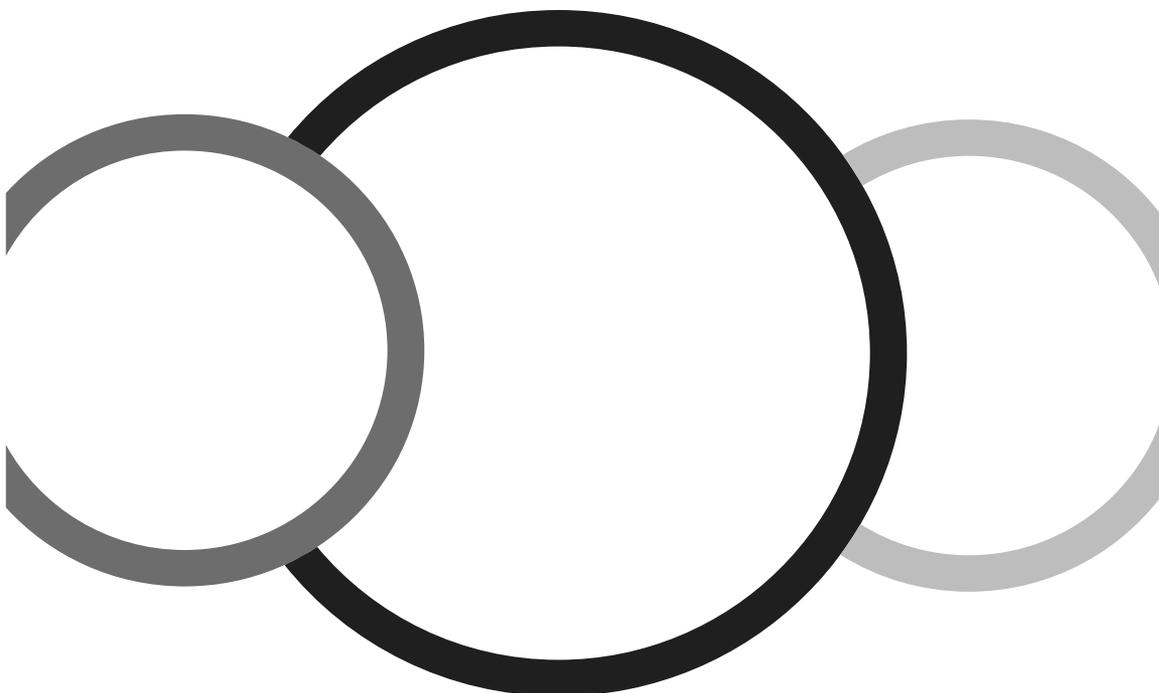


Patient information

Cardiac angiogram



The purpose of this leaflet is to inform and prepare you for your procedure.

You have been referred to Basildon Hospital for a procedure called a cardiac angiogram. This leaflet describes the procedure, so that you know what to expect. If you have any questions, please do not hesitate to ask.

What is a cardiac angiogram?

A cardiac angiogram, also known as cardiac catheterisation, is a type of x-ray using a special dye, which shows if an artery is narrowed or blocked. The artery can be viewed or recorded on film / video.

What happens before the procedure?

- You will need to arrange for somebody to bring you to the hospital and collect you by car, or taxi. You will not be able to drive yourself. You will not be able to travel by public transport.
- Unless you need someone to stay to interpret or assist with special needs, we ask that relatives or friends return to collect you when you are ready to go home.

- If you need ambulance transport because of your medical condition, this can be arranged for you.
- Please contact the hospital on 01268 524 900 ext 4065 or 4536.
- For security reasons, please do not bring jewellery, large amounts of money or anything of great value to you. The hospital regrets that it cannot accept responsibility for loss or damage to property belonging to patients.
- Please do not wear jewellery, makeup or nail varnish. Your wedding ring may be left on if you wish and we will cover it with tape.
- Have a light breakfast before 7am on the day of your procedure. Thereafter only drink water until after your procedure.

Should I take my normal medication?

Prior to your procedure, you will be seen by a nurse in pre-assessment clinic. The nurse will inform you whether you can take your usual medications.

What happens during an angiogram?

- You will be shown to your bed.
- You will be fitted with a wrist band with your details on. This is so that staff can identify you correctly and give you the right care. It is important that you do not remove it until you go home.
- The procedure will be explained to you, including any possible complications. Please let us know if you have had any allergic reactions in the past, or if you are or think you might be, pregnant. If you have any questions, please ask. You will be asked to sign a consent form.
- Before your procedure you will be asked to sign a consent form. If you have any questions regarding the procedure, please ask the medical staff on the ward. If you do not understand what you are signing, you should ask the doctor to explain more clearly. If you have not already been given the white patient copy of the consent form, please ask the staff to give this to you for your health files at home.
- You will be asked to remove your clothing, and will be given a gown to wear.
- A nurse will check your blood pressure, pulse, temperature and oxygen levels.
- A small sample of blood may be taken to make sure it is not too thin.
- A small tube (cannula) may be inserted into a vein in your arm, so that you can be given sedation and other drugs intravenously.
- You will be asked to remove any loose fitting dentures just before the procedure. Please tell us if you have any capped or loose teeth or tongue piercings.
- You will be taken to the cardiac catheter lab for your procedure.
- You will be given a local anaesthetic in either your groin or wrist, depending on where your doctor would like to insert the sheath. You may be given a mild sedative.
- You will be awake throughout the procedure.
- A thin flexible tube called a catheter is passed in to the artery. The catheter will be moved, under X-ray guidance, until it reaches the correct position in your heart. Dye is then injected into the

catheter. This can be seen on the screen .

- X-rays are taken as the dye passes through your arteries, outlining the blood supply to your heart.
- Some people experience a hot flushing sensation from the dye, which will last for a few seconds only. You will be told when this will happen

Are there any risks or possible complications?

The most common side effect of the procedure is bleeding or bruising at the site of sheath insertion (wrist or groin). This is usually minor but can be more significant and rarely may require a small operation to correct the bleeding.

Some patients may have a reaction to the contrast or drugs used during the procedure but this is usually corrected quickly and does not have any long lasting effects.

In some cases the dye can cause kidney damage as your kidneys need to filter the dye from bloodstream (risk of serious damage: less than 1 in 100, risk of needing dialysis: less than 1 in 500).

The dye used in your procedure

contains Iodine. There is a small chance that you may develop a delayed skin reaction to the dye up to one week after your procedure. The risk is higher if you already have problems with your kidneys or have diabetes.

There are some infrequent complications that can be serious, for example: perforation of the coronary artery, acute blockage of the artery, tearing of the artery or aorta (the large artery that arises from the heart). These complications happen in approximately 1:1000 cases (less than 1%) and can have serious effects including heart attack and death. These serious complications are more likely in cases of more technical difficulty.

However, overall the benefits of angiogram far outweigh the risks and the vast majority of patients have an uncomplicated procedure.

What happens after the procedure?

- You may be asked to lay flat for a while after your procedure. Your nurse will tell you how long this is likely to be.
- It may be necessary for the nurse to remove the tube in your leg, which the catheter was passed through. This

involves pressing in the groin area for a length of time. It is important that you remain as relaxed as possible and follow the instructions that the nurse gives you.

- Your wound will be checked regularly and the nurse will record your blood pressure, pulse and feet.
- You will be encouraged to observe your wound site and tell the nurse of any bleeding, swelling, pins and needles or pain. If you need to cough or sneeze, you should apply pressure to the wound to prevent bleeding.
- You should avoid eating while you are lying flat. Once you are allowed to sit up you will be able to eat and drink as normal.
- You may need to stay in hospital overnight. If there are no complications you will be allowed to go home the same day. Please do not leave until you have seen the nurse.
- You will be told about any changes to your medication and how to care for your wound before going home.

What happens when I leave hospital?

- You will need to be collected by car. Sit in the front passenger seat in a reclining

position or in the back with your leg straight (if your wound is in your leg).

- Lie on a couch or bed when you get home to keep your leg as straight as possible.
- You should drink plenty for the first 24 hours.

Taking care of your wound

- You can remove the clear dressing after 24 hours. Always wash your hands before dealing with your wound.
- You can have shower from next day and will be advised about bath on discharge according to the method of wound closure. Ensure the wound is dry before getting dressed. Use your own personal towel for showering.
- If your wound is on the wrist, do not lift or use your wrist for 48 hours after the procedure. Please keep it clean and dry for 24 hours.
- You should expect bruising around the wound for up to two weeks afterwards.

Signs of infection on the wound include:

- Local tenderness, swelling.
- Sensation of heat.
- Redness which increases and causes pain that worsens

rather than getting better.

- Flu-like symptoms - headache, temperature, generally feeling unwell.
- The wound may ooze fluid or pus.

Are there any side effects or possible complications?

If the wound becomes red and itchy or you develop a temperature, consult your GP as soon as possible.

If there is any bleeding from the wound in your leg, lie flat and press directly over the site. If the wound is on the wrist, raise your hand and apply pressure above the wound.

Please attend your local Accident and Emergency department or, if you are concerned, dial 999.

Returning to normal activity

- Avoid any strenuous activity for 48 hours.
- Keep your leg as straight as possible when going up or down stairs and sit down or ask someone to assist you when putting on shoes and socks. Do not bend down or do any heavy lifting for at least 48 hours.
- You are advised not to operate any heavy machinery

or household appliances and rest as much as possible.

- Please wear clothing that is comfortable and warm with sensible shoes to avoid tripping or slipping.
- You must arrange for an adult to remain with you overnight following your procedure. You must have immediate access to a phone.
- We aim to provide high standards of care and patient satisfaction at all times. If you are not happy with the standard of care, attention or the attitude of staff at any point during your stay in hospital, please bring this to the attention of staff before you leave.
- Please ask to speak to a senior member of staff - either the Senior Sister in charge or the Matron.
- We have Quality Assurance systems in place to provide consistent quality standards and these are audited against national profiles within the NHS. We aim to maintain these standards at all times.
- Our services and standards are audited against NICE (National Institute of Clinical Excellence) and CNST (Clinical Negligence Schemes

for Trusts) regulations, two of the leading organisations to monitor standards of care and practice.

- We have a legal requirement under health and safety law and Quality Care Commission to maintain safe standards at all times and protect the public. All clinical incidents, accidents and errors are reported through the Risk Management systems in place. All such incidents are thoroughly investigated and recommendations made to improve standards of care.
- We have strict guidelines and procedures in place to reduce the risk of hospital acquired infection.
- We would welcome your comments, suggestions and concerns as you have a right to be provided with a response and an answer to any questions you may have regarding your care and treatment.
- All staff have to undertake annual mandatory training and professional development is supported. They also have regular appraisals, where development and educational needs are identified.
- If you are not happy with the way your concerns,

complaints or questions are dealt with, please ask to speak to one of the senior nurses in charge. Alternatively, you may take your complaint to the hospital PALS office.

- We hope your procedure goes well and wish you a speedy recovery.

Returning to work

- You can return to work 48 hours after your angiogram.

Driving

- Do not use public transport for 48 hours.
- Do not drive for 48 hours.

Who should I contact if I have any questions?

If you need to contact us for advice regarding your procedure, please telephone the waiting list co-ordinator on 01268 524900 ext 4065 or 4536.

Getting to hospital

If you are coming to the hospital by car, please allow extra time for parking. The car park has an entry ticket and pay station scheme; please ensure you pay at the pay station before returning to your car. Disabled parking spaces are available and the bus stop is just a few yards from the entrance at Basildon Hospital.

Not to be photocopied

This information can be provided in a different language or format (e.g. large print, Braille or audio version) on request.

Basildon and Thurrock University Hospital is a smoke free environment.

For help and advice to stop smoking you can call the national helpline on 0300 123 1044 or visit: www.nhs.uk/smokefree

The Trust will not tolerate aggression, intimidation or violence.

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www.basildonandthurrock.nhs.uk

Patient Advice and Liaison Service (PALS)
01268 394440 pals@btuh.nhs.uk