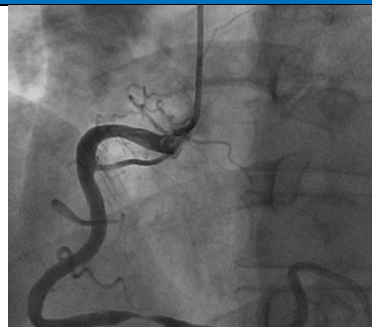


CORONARY ANGIOGRAPHY – INFORMATION SHEET

WHAT IS CORONARY ANGIOGRAPHY?

It is a special x-ray of coronary (heart) arteries. X-ray dye (also known as iodinated contrast) is injected and pictures taken to check for blockages or narrowing.



BEFORE YOUR PROCEDURE

Preparations for the test

- You must not eat or drink for 4 hours before the procedure.
- You may have sips of water up to 2 hours before the procedure.
- Remove jewellery around neck, chest and right-hand including finger rings.

I am on blood thinners – what do I do?

- Blood thinners like **Aspirin, Clopidogrel (Plavix), Prasugrel (Effient), Ticagrelor (Brillinta)** **must be continued. Take your dose even on the day of the procedure with sips of water.**
- Blood thinners like Warfarin (Coumadin), Pradaxa (Dabigatran), Xarelto (Riovroxaban) or Eliquis (Apixaban) are usually stopped for 2-5 days before the test. Rarely they are not interrupted (especially if you have metallic artificial heart valve). Please talk with your cardiologist, if you are not sure.

I have diabetes – how do I manage my sugar pills before the test?

- Special care is necessary for diabetic patients as fasting may result in low blood sugar or hypoglycaemia. Some diabetes pills also interact with x-ray dye with increased risk of toxicity particularly if you have poor kidney function.
- You must check blood sugar at home on days when you are holding pills. If high, please review this with your local doctor (GP).
- Always request a nurse to check finger prick blood sugar on arrival at hospital.

Diabetes Medications (Common trade names)	Recommended duration of interruption
Metformin (Diabex, Diaformin, Metex XR)	Stop for 48 hours before and 48 hours after the angiogram
Emplagliflozin or Dapagliflozin (Forxiga, Xigduo, Jardiance, Jardiamet, Glyxambi or Qtern)	Stop for 3 days before and 2 days after the angiogram
Insulin	<ul style="list-style-type: none">➤ Trulicity – weekly – Continue usual dose.➤ Short acting insulin – Take ½ dose with snack 4 hours pre procedure

DURING THE PROCEDURE

How is the test done?

- You will be admitted to hospital and asked to change in a hospital gown. A cannula will be inserted in your vein and a drip with medication given.
- You will then be transferred to a special room called 'cardiac cath lab' which looks like an operating theatre. The 'cath lab' is a sterile area. Only patient and hospital staff are allowed inside. Staff will be wearing mask, caps, and sterile gowns.
- You will be lying flat on your back on a narrow table. Your groin and wrist will be exposed and cleaned with cold antiseptic solution. You will be covered in sterile drape (sheet). It is important you stay still under the drape.
- The cardiologist will inject a local anaesthetic into the skin, and they may give a light sedative in the drip. Generally, you are awake and can talk during the procedure. The passage of the catheters into your arteries is usually painless.
- When the dye is injected you may feel warmth or a hot flush.
- On completion of procedure the catheter is removed, and firm pressure is applied at the puncture site to avoid bleeding. Alternatively, the artery may be closed with a special plug or suture.

How long does it take for the procedure?

- A straightforward angiogram can take up to 30 minutes.
- The procedure can last longer if you require a stent.

When and how is a coronary stent implanted?

- A stent is used to relieve a severe blockage to improve blood flow to the heart.
- A balloon is first inflated to open the blockage. Thereafter stent is inserted, where appropriate and possible.
- A stent is a small expandable metallic wire tube, guided in position over a wire and locked into position by inflating/deflating a balloon. Generally, drug eluting stents (stents coated with medication) are used to reduce risk of re-narrowing.

What are the risks of this procedure?

- An angiogram is recommended after balancing the benefits and risks of the procedure, taking into context your clinical history and investigations.
- The risks are higher if you had a prior bypass surgery, kidney disease, stroke, or additional blockages in the arteries of the leg or neck (carotid artery).
- Your specialist and hospital team are trained to identify and treat complications.

Common (approx. 5%) risks and complications include:

- Minor bruising at the puncture site.
- Loss of pulse in the arm after a radial artery (arm) procedure.

Typical radial artery compression band after procedure



Rare (less than 1%) risks and complications include:

- Abnormal heart rhythm that may need an electric energy to reset rhythm to normal.
- Surgical repair of the groin/arm puncture site or blood vessel.
- Allergic reaction to x-ray dye, such as breathlessness or drop in blood pressure.
- Loss of kidney function (Usually, transient). Permanent damage is rare.
- A stroke. This can cause long term disability.
- Heart attack.
- Need for emergency heart surgery or angioplasty.
- A higher lifetime risk of cancer from x-ray exposure.
- Mortality because of the procedure is rare. The risk is lower for planned hospital admissions. It is higher when patients undergo angiogram for an acute heart attack presenting through emergency or require complex stents.

AFTER THE PROCEDURE (Please refer to post procedure care info sheet....)

- You will be asked to rest in bed for 2-4 hours.
- If your groin was punctured, it is important to keep your leg straight for 4 hours.
- If your wrist was punctured, avoid bending wrist or using a mobile phone on same hand for 24 hours.
- Chest pain after the procedure should be reported to the nurse immediately.

WHEN WILL I BE DISCHARGED?

If you are stable after the angiogram, you may be discharged same day.

If you received a coronary stent, you may have to stay overnight.

PREADMISSION CHECKLIST

- If I have allergy to x-ray or CT scan dye (a.k.a Iodine contrast). I have made Dr Thakkar aware of this. I have prescription and instructions on using steroid tablet the night before and on the morning of angiogram even before I drive to hospital.
- I have removed all jewellery around neck, chest, particularly rings from the right hand.
- I have packed my medications and will take them with me to the hospital.
- I have a friend or family to drive me back home. (It is unsafe to go home alone by taxi).
- I have planned for a friend or family to stay with me overnight. (This is essential even if you feel well, as there will anaesthetic medication in your body for 24-48 hours and you may also need help if there is a late bleed from the puncture site). Alternatively, I may have to spend a night in hospital.
- I have packed my pyjamas; in case I have to stay overnight (optional).