

FREQUENTLY ASKED QUESTIONS?

1. Are there any risks involved?

Ans: Overall the procedure is very safe and well tolerated. The risk of major complications like death is less than 1 in 1000. Less serious risks include bleeding, bruising or swelling at the puncture site (1-3%)

2. Do I always have to undergo an angioplasty with stents after an angiography?

Ans: NO! If the angiography reveals minor blocks, medicines to treat them will suffice. Critical blocks may require an angioplasty or bypass surgery. Except in the case of a heart attack (myocardial infarction), there may not be a need for proceeding for angioplasty with stents at the same time. However, if necessary, angioplasty with stenting at the same time completes the treatment through the same access avoiding another procedure or hospitalization.

3. How soon will I be discharged after an angiography?

Ans: After a radial angiography which is done through the wrist (90% of angiographies are done through the radial route), you will be discharged in 6 hours. It may take 10-12 hours for discharge after a groin procedure.

CONTACT US

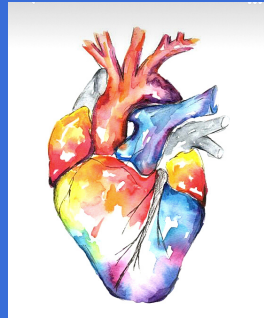


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CORONARY ANGIOGRAPHY



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WHAT IS CORONARY ANGIOGRAPHY?

A coronary angiogram is a special X-ray test done to visualize your coronary arteries. The coronary arteries are the vessels that supply blood to the heart muscle. They can be blocked or narrowed by build up of cholesterol and other deposits causing angina and increasing the chances of a heart attack. An angiogram shows whether the coronary arteries are blocked or narrowed, where and by how much. An angiogram can help your doctor see if you need treatment such as angioplasty with a stent, coronary artery bypass surgery (CABG) or medical therapy.



PREPARING FOR THE TEST

- Your doctor will ask you about medications you are currently taking, allergy to any drug or dye, any history of bleeding problems you may have, any surgery or dental work you may be due soon.
- If you are a woman, your doctor may also want to know whether you are pregnant or nursing, or have any plans to get pregnant.
- Some routine investigations, including blood tests (CBC, Creatinine, Viral markers) an ECG and a chest X-ray may be done before the procedure.
- You will normally fast 6-8 hours before the procedure.
- You will also need to sign a consent form after your doctor has explained to you the risks of the procedure.

WHAT HAPPENS DURING THE TEST?

- At the time of your test, you will be asked to empty your bladder and skin shaving, usually of your groin and upper thighs, hand and chest will be done.
- You will be placed on a movable table, with X-ray cameras and LCD monitors around you

- A nurse will clean your groin or wrist and then drape you with sterile towels. After an injection of a local anesthetic, a plastic tube called a sheath is inserted in a large artery in the groin or wrist. This will hurt no more than a blood test prick.
- Through this sheath, another long and narrow tube (catheter) is advanced to the origin of the coronary arteries. The contrast is injected and fluoroscopic images are recorded.

WHAT HAPPENS AFTER THE TEST?

- The catheter will be taken out. A nurse or doctor will apply direct pressure for 15 minutes or longer where the catheter was inserted to make sure there is no internal bleeding.
- You will be asked to lie quietly on your back for several hours. You won't have to lie on your back if the catheterization was performed from an arm artery.
- You will go back to your hospital room or Cardiac Care Unit (CCU).
- You may feel sore where the catheter was inserted or from lying on your back.
- Your doctor will talk to you about the results.