

Patient information leaflet on
Coronary Angiogram

What is a coronary angiogram?

A cardiac catheterisation or coronary angiogram is a diagnostic procedure which looks at your coronary arteries. It helps to diagnose coronary artery disease. It shows if there are any narrowing's or blockages in your coronary arteries and how severe they are. The results of this test will help the doctor to decide the best course of treatment for you.

Pre-admission Clinic

You will receive a letter inviting you to attend a pre-admission clinic where you will learn more about the test and what to expect on the day of the procedure. You report to the Cardiac Investigations Department on the 1st floor in the Peterborough City Hospital.

During this appointment you will be seen by a cardiac nurse who will explain what the test is, what you can expect on procedure day and take a brief medical history, as well as blood samples and an electrocardiogram (ECG). It is necessary for you to bring all your current medication or a current prescription with you. You would be informed should you need to omit any medication prior to the procedure. A time will be arranged for you to arrive for your procedure. You are encouraged to express any concerns about the procedure at this appointment.

Preparation for the Procedure

On the day of your procedure, you will be admitted to the Coronary Angiography Suite. You are advised to have a light, early breakfast before coming in (usually two hours prior procedure). If you are to have the procedure through an artery in your groin, you will have been asked to shave your right groin before coming into hospital. However, if you have difficulty in doing this nursing staff will assist you on your arrival.

Please note that friends and relatives will not be able to stay with you in the department on the day of your procedure. There are various waiting areas within the hospital where they can wait if they wish; also there is a restaurant and tea/coffee facilities within the hospital.

The Procedure

An angiogram is performed in our catheterisation lab and usually takes approximately 30 minutes. You'll be given local anaesthetic in your wrist or your groin to numb the area. A catheter is then passed into the artery in your wrist or groin. An x-ray is used to guide the catheter through the artery and into your heart. A special dye is injected into the catheter- you may feel a hot, flushing sensation at this point. Some people can experience some chest pain or a metallic taste in the mouth,

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lasting a few seconds. Under x-ray, the dye will reveal the coronary arteries and any narrowed areas or blockages.

At the end of the procedure, the doctor decides on the most appropriate method to seal the artery. Usually a plastic wrist band is used to seal the artery on the wrist.

On Return to the Ward

You are monitored by the nursing team for 2 hours. The type of monitoring determines on the route used to perform the procedure. Following your procedure, it is important that you drink at least one litre of water to flush the special dye from your system via your kidneys. It is important to do this as you may feel dehydrated and experience headaches otherwise. Your blood pressure and pulse are checked regularly after the procedure.

The doctor will discuss the results of your test and any planned treatment with you before discharge. You will be issued a discharge letter as well as post angiogram discharge advice.

Going Home

This test is usually performed as a day case. In the unlikely event of any complications, it is important that you have someone to stay with you for the first night following the test. You will have been advised during the Pre-Admission Clinic visit **not to lift any heavy weight or drive for at least 48 hours** after your procedure.

What are the Risks?

On rare occasions there can be complications such as:

- Bleeding and bruising especially around the area where the catheter was inserted. This may be made worse if you take anti-coagulants.
- A risk of 1 in 100 of an allergic reaction to the dye. This is usually very mild and temporary, such as a skin rash.
- Rarely the catheter can damage the artery, in which case you may have to remain in hospital to have it repaired. This is a risk of 1 in 500.
- A risk less than 1 in 2000 of a heart attack, stroke or death. These risks may be increased if you are diabetic or are having angina or a heart attack at the time.

For some patients the risks may be higher. Please speak to the consultant before the procedure if you have any concerns.

If you have any queries regarding this procedure please contact the Angiography Unit 01733 673793 where you had the procedure done between 8am and 5pm Monday to Friday.