

Procedures/Diagnostic Tests: Interventional Radiology

Angiogram/Arteriogram

You are scheduled for an angiogram using fluoroscopy (x ray). This procedure is done to take pictures of your blood vessels (arteries/veins) and sometimes to obtain blood samples. During the procedure, the radiologist will inject contrast dye through very small spaghetti-like tubes (catheters) to make your blood vessels easier to see on the pictures.

This routine test is called “minimally invasive” because it is not surgery. The catheter is placed in your artery through a small (less than ¼ inch) incision or puncture. Complications from procedures like this are unlikely, but they may include bleeding, infection, or pain.

Preparation

- You will have a history and physical (H & P) no more than 30 days before the procedure
- You will have your blood drawn for a complete blood count, acute care panel, an coagulation studies within 1 week of the procedure.
- Please do not eat or drink anything after midnight on the day of the procedure.
Note: Some doctors may allow clear liquids up to a few hours before the procedure, but check with your doctor.
- Ask your doctor if you should take your regular medications with a sip of water, such as blood pressure, heart or pain medications.
- * If you take a medication for diabetes that contains Metformin, you should stop taking it for 48 hours after the procedure. Your kidney function (BUN/creatinine) must be checked by your doctor BEFORE restarting it. Your doctor will discuss the need for taking any other diabetes medications with you.

Immediately before the procedure

- The radiologist and nurse will discuss the procedure with you and answer your questions. They will then ask for you to sign a consent form for procedure. A parent or legal guardian is required to sign the consent form for patients under 18 years old.
- You will change into a hospital gown.
- A nurse will insert an intravenous line. (This is not needed if you already have an I.V).

Procedure

- A member of the interventional radiology team will clean the site with antiseptic soap and cover you with sterile sheets. (During any procedure where skin is broken, there is a small risk of infection or bleeding, and this helps prevent infection.) We will ask you to keep your hands at your sides during the procedure to keep the sheets sterile.
- You may receive intravenous pain and relaxing medication depending on your needs.
- You will receive a local anesthetic, such as Lidocaine, to numb this area.
- Your heart, vessel, and lung function (vital signs) will be continuously monitored with an EKG, pulse oximetry, and blood pressure cuff.
- Your nurse will stay with you during the procedure to make sure your needs are met.
- To help assist the radiologist during the procedure, he or she will use ultrasound and fluoroscopy.
- The procedure will last 2 to 4 hours or more, depending on how complex the angiogram is.
- When the catheter(s) is removed, firm pressure will be held to the site generally for 10 to 20 minutes, or longer if necessary, to stop bleeding.

The medications you received for your angiogram included:

After the procedure:

- You will be returned to your room on a stretcher. A dressing (similar to a Band-Aid) will be put over the site where the I.V. was placed.
- Do not bend your leg for 6 to 8 hours.
- Stay on bed rest for 6 to 8 hours.
- Your nurse will check the site for bleeding, swelling and pain.
- If you need to cough, sneeze, or lift your head, hold firm pressure with your fingers on the site.
- If you notice bleeding, firmly press with your fingers on the site and call your nurse.
- Drink plenty of fluids to clear the contrast dye from your body.
- If you received sedation, you may feel drowsy or sleepy.
- Slowly resume your regular diet, unless your clinic staff tells you otherwise.
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- Rest today and limit your physical activity for 3 days unless your clinic or unit staff tells you otherwise.

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- Do not lift anything heavy (over 10 pounds) for 3 days unless your clinic or floor staff tells you otherwise. You may remove your bandage tomorrow.
 - You may shower tomorrow.
 - If you received sedation or anesthesia, do not drive a car, operate machinery, make legal/ important decisions, or drink alcoholic beverages for at least 24 hours or as directed by your clinic/floor staff.
 - Ask your physician when to resume taking aspirin, ibuprofen (Motrin), naproxen (Aleve) or blood thinners.

Special instructions

Please call your clinic doctor if you have any of the following symptoms in the next 24 to 48 hours:

- Fever/chills over 38.5 C or 101F or as directed by your clinic/floor staff
- Increasing redness, bleeding or swelling
- Increasing or severe pain
- Weakness or dizziness
- Shortness of breath/difficulty breathing

After discharge if you have any symptoms that you feel are severe, call 911 or go to your closest Emergency Room and bring this sheet.

NIH Clinic/Doctor _____ Phone _____

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