

Taichung Armed Forces General Hospital
Leaflet of Inpatient Nursing Instructions

心導管之護理指導

Sir/Lady:

Nursing instructions for cardiac catheterization

I. Purpose:

To dilate the narrowed areas of coronary artery lesions to improve blood flow.

II. Examination method:

- (1) The doctor will personally insert a plastic catheter sheath into the patient's radial artery at the wrist or the femoral artery at the groin, guide a balloon catheter into the coronary artery, and inject a contrast dye, which allows clear visualization of the lesion location under X-ray fluoroscopy for diagnosis and treatment.
- (2) Coronary angioplasty: At the site of vascular narrowing, the doctor will inflate the balloon to compress the fat causing the blockage against the inner wall of the artery, thereby increasing the vessel diameter.
- (3) Coronary artery stenting: First, a percutaneous coronary angioplasty is performed at the lesion site. Then, another balloon catheter carrying a metal stent is inserted into the area that needs expansion to support the inner wall of the artery. The stent will fully expand, adhere tightly to the inner wall of the vessel, and remain permanently in place.

III. Precautions:

- (1) The "Cardiac Catheterization Intervention Information and Consent Form" must be filled out. If balloon angioplasty and stent placement are required, the "Coronary Balloon Angioplasty and Stent Placement Information and Consent Form" must also be completed. Before the examination, remove your necklace, rings, watch, and other accessories.
- (2) On the day of the examination, a nurse will administer an IV and change you into surgical attire (wear it with the placket at the front and tie straps at the front). Remove all undergarments (for those undergoing femoral puncture, shave both groin areas and remove underpants). Before you are sent to the cardiac catheterization room, please empty your bladder.
- (3) During the procedure: A local anesthetic will be used before the catheter is inserted. You may feel a warming sensation and a thumping sensation in your heart during the insertion. When the catheter is being advanced, you will be asked to cough or take a deep breath. The whole process will be monitored by ECG, and it will last approximately 2-3 hours.

IV. Precautions after examination:

- (1) If the procedure is performed through the radial artery at the wrist: After the procedure, you can get out of bed and move around. The wrist will be compressed with a hemostatic ball and elastic bandage to stop bleeding. Do not bend the affected limb or let it apply a force downward. Keep it straight for 4 hours, and elevate it. Avoid excessive movements, and keep the hand outside the blanket for easy observation of any bleeding. If there is no bleeding, the doctor will remove the bandage the next day.
- (2) If the procedure is performed through the leg (groin): You need to lie flat for 6 hours. If lying flat is uncomfortable, you can slightly adjust your body, massage your back, or slightly elevate your head, but avoid bending the knee on the affected side and refrain from coughing.

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After the catheter sheath is removed, apply continuous pressure with a 3-5 kg sandbag for 6 hours to stop the bleeding. You may not sit up until there is no bleeding.

- (3) After the procedure, if there is no discomfort, you may drink boiled water. If there is no vomiting, you can start eating. Drink plenty of boiled water to help eliminate the contrast dye.
- (4) If there is a feeling of dampness and warmth or swelling in the affected area, please ask the nurse to check for any signs of bleeding. For symptoms such as dark purple or pale discoloration, and numbness in the tip of any extremity, please immediately notify the nurse, who will reassess the situation and appropriately loosen the bandage.
- (5) During the bed rest period, please use a bedpan or urinal. If necessary, you may request assistance from the nurse for catheterization.
- (6) Monitor for allergic reactions: Chills, vomiting, fever, rash, headache, etc. If any of these symptoms occur, please notify the nursing staff.
- (7) After the "Percutaneous Coronary Angioplasty and Coronary Stenting," hospitalization is typically required for 3-7 days. If you experience any discomfort, chest pain, other symptoms of angina, or bleeding after discharge, you must immediately contact your doctor and the hospital. In the early stages after discharge, the doctor will require frequent follow-up visits to monitor the progress of recovery. Six months after the surgery, you will need to undergo another coronary catheterization for angiography to ensure that you are in good condition.
- (8) At 1-3 months after the procedure, once the stent adheres to the inner wall of the artery, you can resume normal activities without affecting your daily life. However, if you plan to engage in intense physical activity, please consult your doctor first.
- (9) You must follow the doctor's instructions to take anticoagulant medication to prevent blood clots from forming inside the stent, which can cause acute coronary artery obstruction.

If you are still unclear about something or have any questions, please contact the nursing station in the ward