

Cardiac Catheter Pathway

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Introduction

Who has a cardiac catheter?

Diagnostic/gain more information

- *To confirm cardiac condition
- *Measuring pressures in heart and lungs
- *Coronary angiograms – to assess the blood flow to the myocardium.

Interventional

- *Valvuloplasty- used to widen stenotic valves
- * Septal defect closure - Devices can be used to close holes that shouldn't be there
- *Angioplasty to open blocked vessels and placement of stents
- *Closure of systemic to pulmonary shunts eg, PDAs
- *Atrial septostomy for infants with TGA prior to arterial switch

Electrophysiological studies

- *Test to evaluate the hearts electrical system
- *cardiac ablation –procedure that scars tissue in the heart to block abnormal electrical signals.

Pre Catheter

- Assessment by cardiologist
- Patients discussed in JCC re surgery/catheter intervention decision
- Attend pre admission clinic with cardiac nurse specialist
- Echo and ECG within 3 months of procedure
- MRSA swabs/Covid test
- Dental check / endocarditis awareness
- Pre catheter chat parents/carers
- SHO clerk / consent
- Review of medication
- Shave groin if appropriate
- Pregnancy test over 12 yrs

Day of the procedure

- *Admitted to ward 1C day of procedure
- * Baseline observations
- *Procedure normally take 2-4 hrs
- *NBM according to hospital policy
- *Maybe discharged day of the procedure but advised to prepare for overnight stay.

The catheter Lab

- General anaesthetic
- Access via one or both groins /occasional via neck
- A needle into the vein or artery / guide wire/catheter till it reaches the heart
- X-Rays are used to visualise the catheter in the heart and shows the dye when injected.
- The cardiologist will the carry out the required procedure

Are there any risks ?

- *Anaesthetic
- *Small risk loss of device, arrhythmias, damage to heart , stroke .
- *Infection
- *Bleeding from groin site
- *Small risk blood flow being blocked in the veins and may need heparin for approximately 24 hours till pulses return

What happens afterwards .

- *Encouraged to stay in bed for the first few hours as there is a risk of bleeding from puncture sites.
- *Pain relief / local injected into site post procedure
- *Pressure dressing will be in place on the sites normally removed 24 hours post procedure , no sutures in wound .
 - * Regular post op observations and review of catheter site and limbs to check perfusion and pulses .
- *May need 3 doses of IV antibiotics
- *Post procedure Echo or ECG if required depending on intervention.

When you go home

- * Post catheter discharge advice given
- * If discharged day of procedure pack given to remove dressing .
- * Advised to keep the wound clean.
- * Pain relief as required normally paracetamol
- * Some bruising to site may be present
- * Can return to normal activities around 1 week

Advantages

If suitable for cardiac catheter pathway

- * Less invasive
- * Reduced risk
- * Able to return to normal activities quickly
- * Short hospital stay

Any Questions

