Coronary Intervention (Balloon or Stent Procedure)

This pamphlet will help you learn about having a coronary intervention.

What is a coronary intervention?
This is a non-surgical treatment used to open blocked arteries in the heart.

How is a coronary intervention done?
• You will be awake during the procedure. You will be given a mild sedative before the procedure to help you relax.
• The doctor will freeze your groin or wrist area so you should feel no pain.
• Small catheters (hollow tubes) will be passed through an artery in your groin or wrist.
• The catheters are passed up to your heart where a special dye is injected into your arteries. This will let the doctor see where your arteries are blocked.
• Each catheter has a small balloon on the tip. Once the catheter is placed at the site of your blockage, the balloon is inflated (filled with air) and deflated (the air is let out) several times. This stretches your artery and flattens the plaque (fatty deposits) against your artery.
wall. This lets the blood flow through your artery to your heart muscle.

- After the balloon procedure, your doctor may place a stent in the artery he or she just opened.

**What is a stent?**

A stent is a tube made of stainless steel. It is a mesh-like device that will hold your artery open. It will stop your artery from narrowing again after the coronary intervention. The stent may also have a special medication (‘drug-eluting’ stent) that will help to keep your artery open. Your doctor will give you more information if this is an option for you.

A stent cannot be used if your artery is too small or twisted. If the doctor thinks your artery may be suitable for a stent, you will be started on a special medication.
Are there any risks with this procedure?
There are some risks with this procedure. Your doctor will talk about these risks with you.

How do I get ready?

- A nurse will measure your height and weight. This information helps your doctor decide how much dye to use during your procedure.
- An ECG (heart test) may be done.
- A sample of blood may be taken.
- The nurse will clip hair from the areas where the catheter may be inserted. The catheter may be inserted into an artery in your wrist or your groin.
- A nurse will answer any questions you have.
- A doctor will examine you and explain the procedure to you.
- The doctor will explain the risks of the procedure and then sign a consent form with you.

Can I take my usual medications?
You may take your usual medications on the evening before the procedure and during the night. The nurse will review your medications with you. Sometimes, certain medications should not be taken on the morning of the procedure. Ask your nurse if you have questions.
Can I eat and drink before the procedure?
Do not eat or drink after midnight on the night before your procedure. You may take a small amount of water with your medications.

Day of the procedure
• If you are a day patient, you will be taken to your room when it is ready.
• A nurse will clip hair from the areas where the catheter may be inserted using surgical clippers.
• You will need 1 or 2 intravenous (IV) lines started. These will be used to give you fluids and medications before, during, and after your procedure.
• When it is time for your procedure, you will be asked to empty your bladder (pee) and put on a “johnny shirt”.
• Underwear, socks, slippers, and jewelry should be removed. You may wear glasses, dentures, and a hearing aid if needed.
• The nurse will give you a light sedative (usually Valium®). You will be taken down the hall to the Cardiac Cath Lab on a stretcher.
How long will I be in bed after the procedure?

• You may be in bed for up to 10 hours after the procedure. The sheath (tube used to pass the catheter up to your heart) may stay in the artery in your groin for up to 4 hours. You will need to stay in bed for a period of time after the tube is removed. This will prevent bleeding and give the puncture site time to heal.

• If your wrist was used for the test, the time you will need to stay in bed is shorter.

• A nurse will tell you how long you need to stay in bed.

Remember – after a procedure through the artery in your groin:

› Lie flat on your back.
› Do not lift your head from the pillow. You may turn your head from side to side.
› Do not put your elbows above your shoulders or your arms behind your head.
› Do not cross or bend your legs.
› You may wiggle your toes and flex your feet.
› The head of the bed can be raised up to 30 degrees.
› Avoid stretching, such as reaching for things on your bedside table. Ask for help.
How can I prevent bleeding from the puncture site?

• If you think this area is bleeding, call the nurse.
  › If the procedure was done through the artery in your wrist, you will see the blood.
  › If the procedure was done through the artery in your groin, a warm, wet, trickling feeling in your groin area is often a sign of bleeding.

• If the procedure was done through the artery in your wrist:
  › You will have a pressure band over the puncture site. The nurse will loosen this band over time until it can be removed.
  › A transparent dressing will be put on after the band is removed. This is taken off in 24 hours and replaced with a Band-Aid®.
  › If you see any bleeding after the band is removed, apply direct pressure to the site and call your nurse.

• If the procedure was done through the artery in your groin:
  › Do not try to apply pressure while the sheath is still in place.
  › Once the sheath has been removed, you can help prevent bleeding by applying firm
pressure over the Band-Aid® whenever you laugh, cough, sneeze, or pass your urine (pee).

› You can help your nurse by checking your Band-Aid® every 30 minutes. Do this by applying light pressure over the Band-Aid® with the fingertips of your closest hand. Next, bring that hand close to your face (don’t lift your head) and check for blood on your fingertips. If you see blood, do not panic. Put the same hand back down over the Band-Aid® and apply firm pressure. Using your other hand, ring for your nurse right away.

› If you feel a lump under the Band-Aid®, apply firm pressure and ring for your nurse right away.

May I eat after my procedure?

• If the procedure was done through the artery in your wrist, you may eat after the procedure.

• If the procedure was done through the artery in your groin and the sheath has been removed, you may eat ‘finger foods’ such as a sandwich. These are easy to eat while lying flat.

• If the procedure was done through the artery in your groin and the sheath is still in place, you may only have liquids.
What can I do if I have back pain from lying flat?
If your back begins to bother you, please tell your nurse. She or he may be able to help by changing your position. You may also be given some pain medication.

How will I go to the bathroom when I am on bed rest?
You will use a urinal (bottle) or bedpan. If you have problems with this, please talk to your nurse.

When will my intravenous (IV) be taken out?
Day Patient – Your IV will be removed after you are eating and drinking well.
In-Patient – The doctor will decide when you no longer need an IV.

Can friends and family visit after my procedure?
Friends and family members may visit before and after your procedure. They may be asked to step outside the room during nursing care.
Who will help me get out of bed for the first time?

• Do not get up alone. Ring for your nurse to help you.
• The first time you get up, you will do it slowly and with the help of a nurse.
• Continue to watch for bleeding and do not leave the nursing unit. Stay close to the nursing station so help is nearby if you need it.

What are your questions?
Please ask. We are here to help you.

Who do I talk to if I have more questions?
Please talk with your nurse if you have any questions or concerns.
Your nurse will give you a pamphlet called Going Home After Your Coronary Intervention. This may answer many of your questions.