



Interventional procedures

Interventional procedures are non surgical procedures used to open blockages in the heart and improve blood flow to the heart. These procedures start out the same way as cardiac catheterizations and are performed by cardiologists specializing in interventional cardiology.

Preparing for the Study

1. You will need to obtain a chest x-ray and routine laboratory tests several days prior to or on the day of your procedure.
2. Do not eat or drink after midnight of the evening prior to the procedure.
3. Take medications only with a small sip of water. If you have Diabetes, you will receive special instructions from your nurse or physician.
4. Prepare for an overnight stay in the hospital.

What to Expect

An interventional procedure starts out in the same way as a diagnostic cardiac catheterization. Once the catheter engages the artery with the blockage, the doctor will perform one of several interventional procedures to open the artery **including balloon angioplasty (PTCA)** -A small balloon at the tip of a specially designed catheter is inflated to compress the fatty matter into the artery wall and stretch the artery open to increase blood flow to the heart, **cutting balloon angioplasty** - A catheter with a special balloon tip with small blades is inserted into the narrowed artery and after inflation, the blades are activated and score the plaque and the balloon compresses the fatty matter into the artery wall, and **stenting** - a small, metal mesh cylinder is inserted into the narrowed artery with a balloon catheter. When the balloon tip is inflated, the stent expands to the size of the artery and holds it open. The balloon is deflated and removed, and the stent stays in place permanently. Some stents may be coated with special medications to prevent clotting or restenosis. The procedure usually lasts about 1 1/2 to 2 1/2 hours, but the preparation and recovery time add several hours. For most people, blood flow to the heart is increased, chest pain diminishes, and the risk of heart attack is decreased. To prevent restenosis (re-closure of an opened artery), medications may be prescribed.

After the procedure

1. You will need to lie flat and keep the leg straight for two to six hours to prevent bleeding (less time if a plug was used). Your head cannot be raised more than 30 degrees (2 pillows high). You should not try to sit or stand. A sterile dressing will be placed on the groin area to protect it from infection. The nurse will check your bandage regularly, but call your nurse if you think you are bleeding (have a wet, warm sensation) or if your toes begin to tingle or feel numb.
2. Your blood pressure and pulses will be monitored.
3. Notify the nurses of any bleeding or pain.

4. Within 24 hours of the procedure you will be asked to walk. You must be able to walk unassisted and without pain prior to discharge.
5. Prior to discharge your doctor will go over interventional results with you and discuss discharge instructions and medications.
6. **After the procedure, it is common to develop a nontender bruise (black and blue) and mild numbness around the puncture site. However, hematomas (hard, painful, tender black and blue), drainage or pain should not develop. If it does, notify your doctor.**

Date of Procedure _____ **Hospital** _____

Your follow up appointment is scheduled on _____ at _____.

Thank you for allowing the cardiologists of the Florida Medical Clinic to participate in your healthcare needs.