



Procedure Information – Percutaneous Coronary Intervention

Visit No.: Dept.:
Name: Sex/Age:
Doc. No.: Adm. Date:
Attn. Dr.:
Patient No.: PN

Page No:

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affix patient's label*

Introduction

Percutaneous coronary intervention (PCI) is a procedure used to dilate and maintain patency for any narrowing of the coronary arteries (arteries supplying blood to heart muscle). This procedure is performed with the use of X-ray through percutaneous method (commonly through femoral or radial arteries).

Importance of Procedure

PCI is an invasive procedure that may follow coronary angiogram. Coronary angiogram provides a clear picture of the severity and location of narrowing in the coronary arteries. The procedure may follow directly after diagnostic coronary angiogram. PCI serves to open up the artery and improve heart function. In emergency situation caused by acute coronary syndrome (heart attack), this procedure is important and can be life-saving. If this procedure is refused, the consequence can be detrimental. Alternative treatment modalities include bypass surgery or medical therapy. Please consider different options carefully and ask your doctor for details.

The Procedure

1. This is an invasive procedure performed under local anesthesia in a cardiac catheterization centre.
2. Electrodes are adhered to the chest to monitor the heart rate and rhythm. Blood oxygen monitor through your finger tip will be set up. Blood pressure will be measured from your arm at regular intervals during the examination.
3. A small wound is made either from the groin or around the wrist for access to arteries or veins.
4. Catheters are advanced to the heart under X-ray guidance.
5. Contrast is injected into coronary arteries and films are taken using X-ray. Narrowing in the coronary arteries is identified.
6. In general, a special catheter is placed at the opening of the coronary artery with narrowing. A thin guide wire is advanced across the narrowing. The guide wire serves as a track to allow a balloon to go to the narrowing. The balloon is inflated to open up the artery. A stent (usually made of metallic scaffold) is then implanted permanently inside the artery to keep it patent.
7. During the procedure, you may be asked to hold your breath or cough. Transient chest pain may be experienced during the procedure. If you experience severe or persistent chest pain, dizzy spell or any discomfort, you need to inform the staff.

Risks and Complications

- The procedure carries certain risks which vary according to patient factors, lesion factors and clinical circumstances. For instance, PCI in high risk clinical situation like heart attack with shock (unstable blood pressure and rhythm) is associated with higher risk but successful PCI can be life saving.
- Major complications include death (1.27% range 0.65-4.81%), periprocedural myocardial infarction (less than 15%), stroke (0.22%) and emergency bypass surgery (0.4%).
- Other major complications include coronary artery perforation, heart failure, arrhythmias, vascular complications, contrast related anaphylaxis, acute renal failure.
- Minor complications include contrast allergy, nausea, or groin complications. Bruising around the wound site is common.
- Re-narrowing of the dilated or stented coronary lesion might occur in 5-40% of the cases a few months after the procedure. The rate varies according to many different factors. The use of different types of stents is an example.



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Before the Procedure

1. Your doctor will explain the reason, procedure and complications. You will need to sign a consent form.
2. You will undergo some preliminary tests including electrocardiogram, and blood tests. We will also check your allergy history.
3. Blood thinning drug (warfarin) or diabetic drugs (metformin) may have to be stopped several days before the procedure. Special anti-platelet drugs (Clopidogrel, Ticagrelor or Prasugrel) should be taken before the intervention. Steroid will be given if there is history of allergy.
4. Fasting of 4-6 hours is required prior to the procedure. An intravenous drip will be set up. Shaving may be required over the puncture site.
5. If you are a female, please provide your last menstrual period (LMP) and avoid pregnancy before the procedure as this procedure involves exposure to radiation.

After the Procedure

A. Hospital care

1. After the procedure, catheters will be removed. The wound site will be compressed or sutured to stop bleeding. Sometimes, special devices may be used to stop bleeding.
2. Nursing staff will check your blood pressure, pulse and wound regularly.
3. Bed rest is necessary for a few hours. In particular, do not move or bend the affected limb. If the wound is over the groin, please apply pressure with your hand when you cough or sneeze so as to avoid re-bleeding.
4. You should inform your nurse if you have any discomfort; particularly chest discomfort or find blood oozing from the wound site.

B. Follow up

1. Usually you can be discharged 1 day after the procedure.
2. It is very important that you follow the exact prescription of antiplatelet drugs (aspirin, clopidogrel or ticagrelor or prasugrel) by your doctor. Premature termination of antiplatelet drugs can lead to fatal blood clots in your stents.
3. The wound will be inspected and covered with light dressing. Please keep the wound site clean and change dressing if wet. In general, shower is allowed after 1-2 day. Please avoid vigorous activities (household or exercise) in the first few days after the procedure. Bruising around the wound site is common and usually subsides 2-3 weeks later. If you notice any signs of infection, increase in swelling or pain over the wound, please come back to the hospital or visit a nearby Accident and Emergency Department immediately.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. Should a complication occur, another life-saving procedure or treatment may be required immediately. For further information please contact your doctor.

Reference

Hospital Authority – Smart Patient Website

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. _____. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Patient / Relative Name

Signature

Relationship (if any)

Date