



Peripheral angiography *Information for patients*

You have been scheduled for peripheral angiography. Your procedure is scheduled for:

Someone will call you the day before your procedure to tell you what time to arrive at the medical center.

Your procedure is on the **west campus** of the medical center. West campus parking is available in the Pilgrim Road Garage (entrance is on Crossover Street, which is reached via Pilgrim Road or Autumn Street), or in the 110 Francis Street Garage (Lowry Building Garage), located on the corner of Brookline Avenue and Francis Street (and also accessible via the Riverway). The person driving should bring the parking ticket into the hospital. He/she must pay before returning to the car. In addition, the ticket can be validated in the Farr Lobby for a reduced rate.

Please go to the Farr Building entrance at 185 Pilgrim Road. (See enclosed map.) Once you are in the Farr lobby, take a **left** at the gift shop and follow the signs for the Baker elevators. Take the **Baker elevators to the 4th floor**, where you will check in at the reception desk.

What is peripheral angiography?

Peripheral angiography is a test that is done to look at the blood flow through your arteries. It is most commonly done to test the blood flow to the neck and head, or to the abdomen and legs. A small plastic tube (catheter) is threaded from the leg or arm into the arteries needing study. A special dye is injected that makes the arteries visible on x-ray. Using the x-ray pictures, the doctor will look for a narrowing or blockage in the arteries. Sometimes, when a blockage or narrowing is found, the doctor may offer you the option of opening the artery with any number of techniques, including balloon angioplasty, atherectomy, or stenting. (This is explained further below.)

At Beth Israel Deaconess Medical Center, we have performed several thousand peripheral procedures.

Preparing for your procedure

- **Several days before your procedure**
 - If you take warfarin (Coumadin), your doctor will ask you to stop taking it several days before your procedure. If your Coumadin has not been stopped, please notify us at 617-632-7461. Some patients (such as those who have had

Call us if you have questions

- Please call us at 617-632-7461 if you have any questions about these instructions.
- If you are going home the day of your procedure, a responsible adult must take you home. You may not go alone. Please make sure someone can stay with you overnight.

certain types of heart valve surgery) need to stay in the hospital while they are stopping their warfarin. Your doctor will let you know if this applies to you.

- Please continue to take other medicines your doctor has prescribed, including any aspirin, Plavix, Persantine, or Pletal, unless your doctor tells you otherwise.
- A nurse will be contacting you the day before your procedure. The nurse will talk with you about your medical history and will ask you about your medications and any allergies you may have. Please have a list of your medicines, including the doses, ready. The nurse may give you further instructions on changes in your daily medications that may be needed before your procedure.
- Please tell the nurse if you have had any recent infections, fever, or chills, or if you have been taking antibiotics for any reason.
- The nurse will go over your preparations and can answer any questions you may have.
- **The night before your procedure**
 - **Please do not eat or drink anything after midnight the night before your procedure. Do not eat or drink until after your procedure is over.**
- **The morning of your procedure**
 - Follow the instructions given to you by the nurse regarding what medicine to take and not to take on the morning of the procedure. You may have a small sip of water to swallow any medicine you may need. As noted above, you should not take warfarin (Coumadin). You should also not take diabetes pills. If you take insulin, you will be given specific instructions as to how to adjust your insulin on the morning of your procedure.
 - If you use inhalers or nebulizers, you may use these according to your regular schedule. Please bring your inhalers with you to the hospital.
 - Please leave all valuables at home.
 - Please bring a list of your medicines with doses to the hospital. Include prescription medicines, non-prescription medicines, vitamins, herbs, and supplements. Bring a list; do not bring the bottles themselves.

What to expect

- Please be aware that you may have to wait for your procedure. Sometimes, the wait is prolonged. Although we will do our best to perform your procedure close to the estimated time you were given, our schedule often changes at the last minute due to emergencies. Your understanding is appreciated. Please plan to spend most of the

day at the hospital. You will stay overnight if you undergo angioplasty, atherectomy, or stenting (explained below). In some cases, patients who do not have these procedures also need to stay overnight.

- When it is close to the time of your procedure, you will be taken to a holding area. To protect your privacy and that of all of our patients, visitors are not permitted in the holding area. You may have one family member with you when you meet your doctor and sign the consent form for the procedure; otherwise, your family members are asked to wait in our reception area until your procedure is over.
- In the holding area, you will change into a hospital gown. You will meet with a nurse and doctor who will talk with you about your medical history and go over the procedure with you. The risks and benefits of the procedure will be explained, and you will be asked to sign a consent form.
- The nurse will take your blood pressure and pulse, place an intravenous (IV) line in your arm, and draw any blood tests that may be needed.
- When it is time for your procedure, you will be taken to the procedure room. You'll be connected to monitors which will stay in place throughout the procedure. You may have oxygen delivered through your nose or mouth. The area where the catheter will go in will be shaved and washed with antiseptic and covered with a sterile sheet. The most common area for insertion is the upper thigh. The arm can also be used.
- You will receive sedative medicine through your IV before the procedure begins. The sedative will make you feel sleepy and relaxed, but you will still be awake.
- Before the catheter is inserted, the doctor will numb the area with local anesthetic. You will feel a pin prick and some burning as the local anesthetic is injected. As the catheter is placed, you may feel pressure but should not feel any pain.
- Although it is best to limit talking during the procedure, please do speak up if you have any concerns or if you are feeling any discomfort at all.
- The doctor will inject dye and obtain whatever pictures are needed. The x-ray pictures are taken by a camera that moves around you in order to get different views. You may also feel the table moving and notice the lights dimming. This is all normal.
- After all the pictures have been taken, your doctor will tell you what he or she sees. Together, you will talk about treatment options that are available. Some of the treatments can be done right away, as part of your procedure. The type of treatment the doctor recommends depends on a number of factors, including the severity and location of the blockages. Options may include:

- Medications
 - Surgery (done later)
 - An interventional procedure (done right away), such as:
 - **Angioplasty** – inflating a small balloon inside a narrowed artery to reduce an obstruction
 - **Stent** – Inserting a mesh-like tube that helps keep the artery open
 - **Atherectomy** – using an instrument to remove material blocking the artery
- The procedure takes about one hour. If you are having an interventional procedure along with the angiogram, this can take additional one-two hours.
 - Once the procedure is done, a doctor or nurse will update your family on your status. If the procedure is taking longer than expected, we will try to keep your family informed.

Recovery

If you had an interventional procedure, such as angioplasty, stent, or atherectomy, you will be admitted to the hospital after your procedure. Your family may visit you in your hospital room. Usually, discharge occurs the following day at around noon, although the exact time of discharge is different for everyone.

If you did not have an interventional procedure, you will be moved to a recovery area after your angiogram is complete. You will stay in this area on bedrest between two and six hours. During this time, you will be observed closely by a team of trained cardiac nurses. While you are recovering, your family member or friend may visit for brief periods. We cannot allow extended visits or multiple visitors because of privacy regulations, and because we must keep our space clear due to frequent movement of patients and staff. **Visits are limited to two people for five minutes each hour**, at the discretion of the nurse or doctor. (Exceptions can be made in special circumstances, such as when the patient does not speak English, or if the patient is under 20 years old. Children under 14 are not permitted to visit.)

Family and friends: While you are waiting

- Thank you for respecting our visiting policies. We will do our best to keep you informed.
- Please do not use cell phones in the waiting room. Please go to the lobby to use your phone.
- Please visit our cafeterias, located in the lobby and basement of the Farr Building.
- If you wish to wait at home, you may call for an update on the patient's status at 617-632-7360.

Going home

Your nurse will monitor your recovery and will let you know when it is safe to get up and walk. If you feel okay after walking and if your condition is stable, you will be discharged home.

You will receive detailed discharge instructions before you leave the hospital. These will include information on :

- **Activity restrictions** – You will not be able to do any heavy lifting or engage in any vigorous activity for at least one week.
- **Driving restrictions** – You will be asked not to drive for 48 hours.
- **When to call your doctor** – You’ll be given information about your follow-up care.

Please remember, you must have a responsible adult available to take you home. If you are having a problem finding someone, you may want to arrange a wheelchair van (see enclosed information).