

CORONARY ANGIOGRAM CORONARY ANGIOPLASTY



Contents

- 01 **What is Coronary Angiogram?** Pg 4
 - Why Do I Need An Angiogram?** Pg 5
- 02 **Patient's Journey** Pg 6 - 7
- 03 **What is Coronary Angioplasty?** Pg 10
 - Why Do I Need An Angioplasty?** Pg 11
- 04 **Patient's Journey** Pg 12 - 18
- 05 **My Journey** Pg 19 - 23



CORONARY ANGIOGRAM

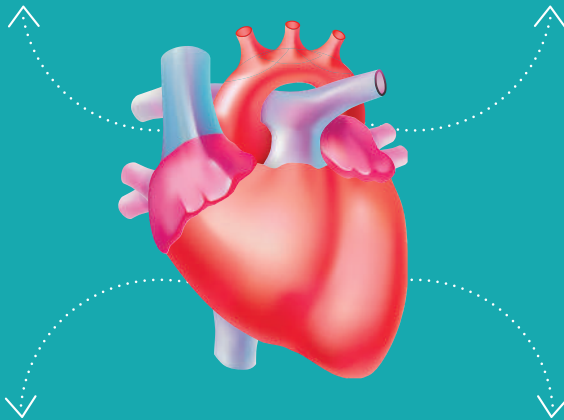


01

What is **Coronary Angiogram**?

It is a special x-ray to visualise the blood vessels (coronary arteries) that supply the heart muscle with blood.

It is commonly performed to assess if there are presence of blockages, narrowing or other abnormalities in the coronary arteries.



It Involves x-ray imaging and a contrast dye to make blood vessels visible on x-ray images.

It is commonly done in the Cardiac Catheterisation Laboratory (Cath Lab).



Learn more about the procedure from the American Heart Association (AHA)

Why Do I Need An Angiogram?



Chest pain (Angina):
To assess the presence and severity of coronary artery disease.



Abnormal stress test:
A possibility of significant blockages or abnormalities in blood flow to the heart muscle.



Unexplained heart failure:
Heart failure without an obvious cause.



Abnormal ECG or imaging results:
For confirmation and detailed assessment of the disease.



Prior to cardiac surgery:
In some cases, a coronary angiogram may be done before certain heart surgeries, such as valve replacement or bypass surgery.



Evaluation of cardiac anomalies:
To evaluate congenital heart anomalies or abnormalities in the coronary arteries.



Post heart attack management:
To assess the extent of artery damage.



Heart Attack



Chest Pain

Learn more from the American Heart Association (AHA)

02

Patient's Journey

Before Admission



- You will be admitted to the ward a day before or on the procedure day.



- You may require blood investigations to assess your kidney function and ensure that you can safely receive the contrast used during the angiogram procedure.

On Procedure Day



- Your doctor does a daily routine assessment.
- Your informed consent will be obtained. You may ask any questions you may have.



- Hair at the groin and wrist area are removed.
- You are instructed not to eat or drink for a certain period before the procedure, usually starting the night before the procedure or at least 6 hours prior to the procedure.



- Our staff will transfer you to the Cardiac Catheterisation Lab.
- You may or may not receive medication prior to the procedure (mild sedative).

On Procedure Day (in the Cardiac Catheterisation Lab)



- Local anaesthetic is injected to the groin or wrist where the catheter is introduced to minimise discomfort.



- Catheter insertion: A thin, flexible tube called a catheter is inserted through the blood vessels.
- Contrast dye injection: The contrast dye makes the blood vessels visible on x-ray images.

Post Procedure



- The catheter is removed and pressure may be applied to the insertion site to prevent bleeding.
- You will be observed for a period to ensure there are no complications or adverse reactions in the ward.



Recovery



- Most patients can resume normal activities shortly after the procedure.
- Keep the puncture site clean, avoid excessive movement, and report any signs of bleeding. Lie flat for 6 hours once back in your room if your groin was approached for the procedure.



- Rest is recommended for several hours following the procedure. Avoid strenuous activities and heavy lifting.
- Drink plenty of fluids to help flush the contrast dye from your system and prevent dehydration.
- If you have increasing pain, redness, or signs of infection, swelling or fluid oozing from the puncture site, or if a lump increases in size, please go to the Emergency Department at once.



- Bleeding rarely occurs at the puncture site once you are discharged from the hospital. If it does occur, apply firm pressure for 10 to 15 minutes or until the bleeding stops and seek medical assistance.
- You should not experience any weakness or altered sensation in the limb (leg or arm) nearest to the puncture site. Seek medical advice if you experience any of this.



- Consume all medications as prescribed by your cardiologist. You must not stop any medication without consulting your cardiologist. Do not replace prescribed medication with traditional medication.

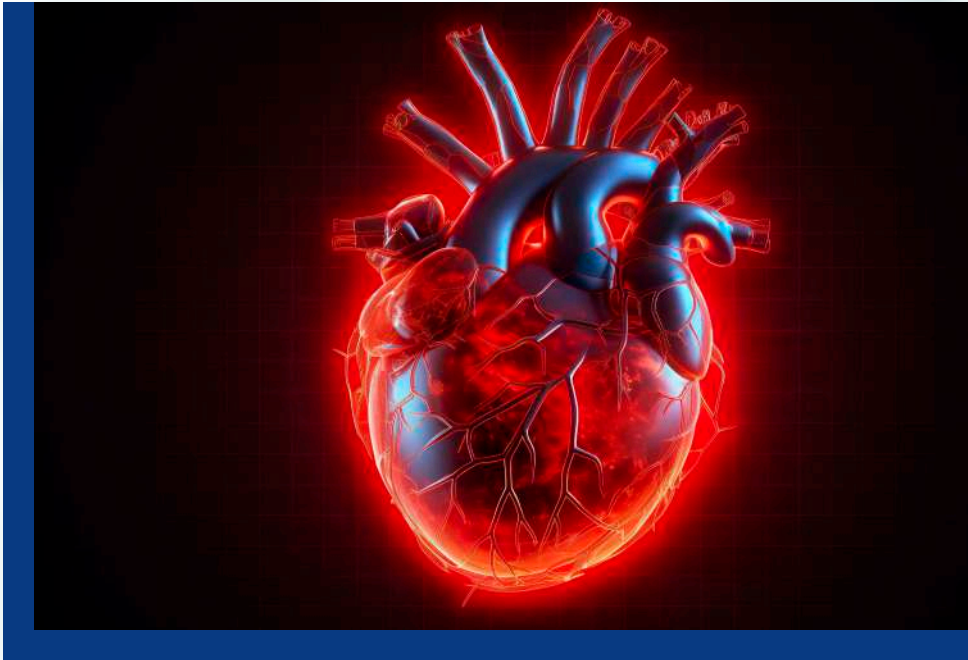


- Report any unusual symptoms such as chest pain, shortness of breath, or changes in heart rate.
- Resume normal diet.



- Do not miss your doctor's appointment so your cardiologist can monitor your progress.

CORONARY ANGIOPLASTY

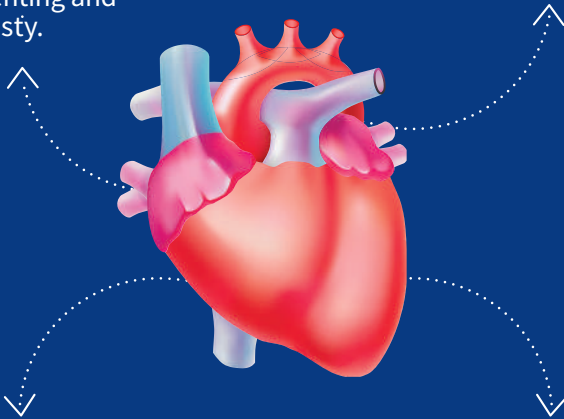


03

What is **Coronary Angioplasty**?

Also known as Percutaneous Transluminal Coronary Angioplasty (PTCA) – balloon angioplasty or Percutaneous Transluminal Coronary Stenting Angioplasty – stenting and balloon angioplasty.

This procedure is often performed in conjunction with a coronary angiogram.



The procedure is generally safe however there are potential risks and complications, including bleeding, infection, and vessel damage.

Preparation of the procedure is similar to a coronary angiogram.



Learn more about these procedures from the American Heart Association (AHA)

Why Do I Need An Angioplasty?



Coronary artery disease (CAD):
Open narrowed arteries and restore blood flow to the heart.



Chest pain (Angina):
To relieve symptoms by improving the blood flow through the coronary arteries.



Heart attack (Myocardial Infarction):
To open a blocked coronary artery and restore blood flow to the affected part of the heart.



Unstable angina:
Chest pain that occurs unpredictably and is often more severe.



Coronary Artery Bypass Graft (CABG) candidates:
An option for patients with severe CAD who are not suitable for surgery.



Investigation Result:
Positive stress test or imaging results.

04

Patient's Journey

Before Admission



- You will be admitted to the ward a day before or on the procedure day.
- You may require blood investigations.
- You must fast at least 4 to 6 hours prior to the procedure.

On Procedure Day



- Your doctor will do a daily routine assessment.
- Your informed consent will be obtained. You can ask as much as you can if you have any questions.



- Hair at the groin and wrist area are removed.
- You will be instructed not to eat or drink anything for a certain period before the procedure, usually 6 hours prior to the procedure.



- Our staff will transfer you to Cardiac Catheterisation Lab for the procedure.
- You may or may not receive medication prior to the procedure (mild sedative).

On Procedure Day

(in the Cardiac Catheterisation Lab)

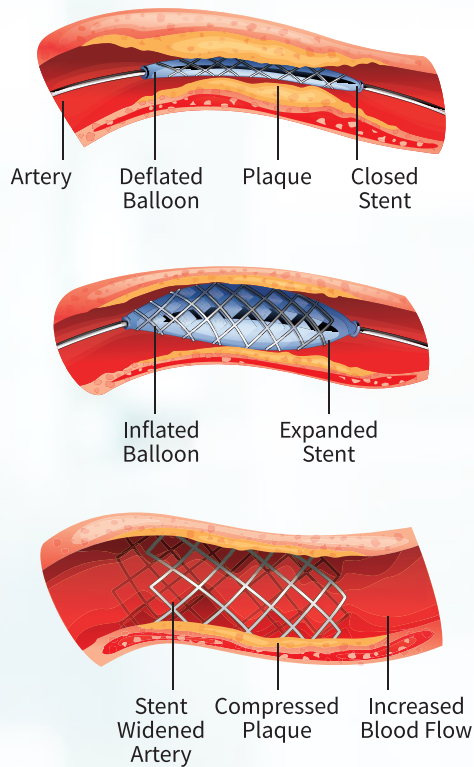


- The process is similar to a coronary angiogram.
- You will experience a needle prick when a sheath is inserted into the artery.
- A fine tube (catheter) is then carefully passed up the blood vessel and into the affected coronary artery. A fine wire is then passed down the affected artery beyond the blockage. Over this wire, a balloon is passed down and positioned over the narrowing in the artery.
- The balloon is then inflated with fluid (combination of saline and X-ray dye). This inflated balloon presses on the plaque, pushing it out of the way. After a few seconds, the balloon is deflated. This procedure may be repeated several times.
- Usually, a coronary stent is also inserted at the same time. A coronary stent is a spring which may or may not be coated with special drugs. Coated stents are Drug Eluting Stents (DES) and Drug-Eluting Balloon (DEB).
- The stent is mounted on a balloon and when the balloon is inflated, the stent catches on the wall.
- The balloon is then deflated and removed, leaving the stent behind.
- If you receive a drug-eluting stent, your doctor will prescribe certain medications for several months after your procedure to prevent the risk of clotting in the stent.



- It is extremely important to consume the medications as prescribed until your doctor tells you to stop.

Balloon Angioplasty and Stents



Post Procedure Day



- After the procedure, you will be monitored in critical care area.
- Once you are back in your room, you will have to lie flat for 6 hours if your groin was approached for the procedure.



- During this time, your vital signs will be checked regularly.
- The catheter site will also be monitored to ensure there is no swelling or bleeding.
- The tube will be removed from the groin/wrist. It is necessary to press firmly on this area for about 20 minutes to stop the bleeding.



- The cardiologist will discuss the results with you and your family.
- You will be transfer out to the ward once instruction is received from your cardiologist.

Recovery



- Most patients can resume normal activities shortly after the procedure.
- For puncture site care, keep the area clean, avoid excessive movement, and report any signs of bleeding. Once you are back in your room, you will have to lie flat for 6 hours if your groin was used for the procedure.



- Avoid strenuous activities and heavy lifting for a certain period to promote rest & recovery.
- Drink plenty of fluids to help flush the contrast dye from your system and prevent dehydration.



- Do not miss the appointment so that your cardiologist can monitor your progress.
- If you have increasing pain, redness or signs of infection, swelling or fluid oozing from the puncture site, or if a lump increases in size, go to the Emergency Department at once.



- Bleeding rarely occurs at the puncture site once you have been discharged from the hospital. If it does occur, apply firm pressure for 10 to 15 minutes or until the bleeding stops and seek medical assistance.
- You should not experience any weakness or altered sensation in the limb (leg or arm) nearest to the puncture site. If you do, seek medical advice.



- Consume all medications as prescribed by your cardiologist. You must not stop any medication without consulting your cardiologist. Do not replace prescribed medication with traditional medication.



- Report any unusual symptoms such as chest pain, shortness of breath, or changes in heart rate.
- Resume normal diet.

Patient's Info

Patient's Sticker	Weight	
	Height	
	BMI	

Date of Diagnosis ≤ 18 months ≥ 18 months

Treating Cardiologist

Contact No.

Diagnosis & Summary

Patient's Log

Date	Time	Remarks

Optimisation Of Medical Therapies

Clinic Visit Date			
	Drug Regimen (Name, Dose & Frequency)	Drug Regimen (Name, Dose & Frequency)	Drug Regimen (Name, Dose & Frequency)
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS

Optimisation Of Medical Therapies

Clinic Visit Date			
	Drug Regimen (Name, Dose & Frequency)	Drug Regimen (Name, Dose & Frequency)	Drug Regimen (Name, Dose & Frequency)
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS
	Dose: OD/BD/TDS	Dose: OD/BD/TDS	Dose: OD/BD/TDS

Notes



Scan me for more information



www.sjmcheartcentre.com

Subang Jaya Medical Centre

Owned by SJP Medical Centres Sdn. Bhd. Registration No. 198901004482 (181788-D) (Formerly known as RSD Hospitals Sdn. Bhd.)
No. 1, Jalan SS 12/1A, 47500 Subang Jaya, Selangor, Malaysia

 24-Hour Careline No.: +603-5639 1212

 www.subangjayamedicalcentre.com

 [subangjayamedicalcentre](https://www.facebook.com/subangjayamedicalcentre)

 [subangjaya_medicalcentre](https://www.instagram.com/subangjaya_medicalcentre)

 [SubangJayaMedicalCentre](https://www.youtube.com/SubangJayaMedicalCentre)

 [subangjayamedicalcentre](https://open.spotify.com/artist/subangjayamedicalcentre)