

ANGIOGRAM BY SR ANNETTE ANDERSON (M.CUR)

An Angiogram is a procedure which is typically done in a Cath Lab (mini theatre), where contrast (a dye) is injected into your bloodstream via a catheter inserted into your groin. This enables the doctor using x-rays to visualize the blood flowing through your blood vessels and determine where the narrowing's or blockages to your bloodstream are. Your vascular surgeon will use this information to insert a balloon (angioplasty) to widen the narrowing and possibly also insert a stent to keep the blood vessel open to allow blood flow back to your limb.

This procedure is generally done under local anaesthetic with sedation to prevent pain (but you will be awake and not asleep). Sedation gives you a 'sleepy-like' feeling, making you very relaxed during the procedure. You may remember some or little about what has happened during the procedure. As this procedure is done while you are awake, you are generally not starved for the procedure.

Please tell your vascular surgeon if you are on ANY blood thinning agents at least one week before the procedure. These include (but are not limited to) Aspirin, Warfarin, Clopidogrel (Plavix and Iscover); Dipyridamole (Persantin and Asasantin); Apixaban (Eliquis), Rivaroxaban (Xarelto); Edoxaban (Savaysa); Coumadin and Jantoven; Dabigatran (Pradaxa) or **any other drug that is used to thin your blood**. Some of these drugs need to be stopped at least 4 days prior to your angiogram and you may need to be put on other drugs in the interim to prevent complications.

When coming in for your procedure please bring all your prescribed medication with you, including medications you buy over the counter, herbal remedies and supplements. Certain foods or herbs can increase your risk of bleeding, and it is important that your vascular surgeon is aware of this prior to your procedure.

After the procedure, you will be required to stay in hospital overnight and lie flat on your back for at least 12 hours after the procedure to prevent bleeding from the puncture site. This may be uncomfortable but is very important to prevent complications such as false aneurysms, hematomas and frank bleeding from the arterial puncture site.

Common risks of the procedure may include but are not limited to groin discomfort at the puncture site, minor puncture bleeding with local pain, bruising or a hard lump that resolves in a few weeks. More severe and rare complications may include allergic reaction to contrast medium or other drugs and renal impairment from the contrast.

Please note that this document is for informational purposes only and does not replace a diagnosis or treatment by your qualified doctor.

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Below is an x-ray of a diseased limb, where intervention improved blood flow to the lower leg and foot. This is the before and after angiogram x-rays.



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