

Your child will be encouraged to lie flat for at least 4 hours after their procedure to reduce any risk of bleeding from the site.

Further tests e.g Chest X-Ray, ECG, ECHO may be performed before discharge home.

ADVICE ON DISCHARGE

- The wound site should heal within a few days. The area around the site may become slightly discoloured and bruised.
- Your child can have a shower but should avoid baths or swimming for 48 hours after their procedure, to reduce the risk of bleeding from the wound site.
- If you notice bleeding, press directly and firmly on puncture site for 5-10minutes. If bleeding continues, reapply constant pressure and ring the hospital to seek further advice.
- Pain relief should be given at regular intervals for 24-48hrs after cardiac catheterisation, to ensure your child is comfortable. Mild pain is to be expected after cardiac catheterisation, please contact us if you feel your child’s pain is not controlled.

Pain Relief given (named drug)	Time drug last given in hospital	Time drug may be given next at home

- A follow-up appointment will be booked with your cardiologist and sent to you via post, please contact us if you do not receive it.
- Your child should avoid strenuous activity/contact sports for at least 48hours after discharge home.
- Your child can return to school 1-2 days’ after discharge home, unless otherwise stated. Gentle mobilisation is advised but contact sports should be avoided for 2-4 weeks, or as advised.

Monday – Friday 07:00 – 19:00

Phone: 01 409 6060 / 01 409 6288

Children’s Heart Centre

01 409 6554 or 01 409 6471

Developed by Cardiac Nursing Staff

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CARDIAC CATHETERISATION

**PARENT’S / GUARDIAN’S / CARER’S
INFORMATION LEAFLET
FOR PATIENTS ATTENDING THE
CARDIAC DAY UNIT**



Children’s Health Ireland at Crumlin

Phone: 01 409 6100

What is a Cardiac Catheterisation test?

Cardiac catheterisation is used to help make a diagnosis and/or treat your child's heart condition. It is a procedure that helps to define the structure of your child's heart and any malformations.

A fine tube or catheter is inserted through the skin into a vein or artery in the groin or neck. The catheter is guided along the vein or artery into your child's heart under x-ray guidance.

Cardiac catheterisation involves the injection of special x-ray dye to record images of the heart. It may be performed for a number of reasons including but not limited to;

- Open valves or vessels by inflating balloons in obstructed areas.
- To obtain cardiac tissue samples for biopsy.
- To place devices that close small holes inside the heart (such as with [atrial septal defect](#) or [ventricular septal defect](#)), or intentionally block blood flow in a blood vessel.
- To place wire devices, called stents, in narrowed blood vessels to keep them open.
- Measurement of heart/lung pressures & function in planning for future cardiac surgery and / or medical management of your child.
- To conduct an electrophysiological study (EPS) or a radiofrequency catheter ablation (RFCA) - a procedure which can help identify any irregular rhythm [arrhythmia](#) in the heart. In some cases this procedure may be used to attempt to get rid of the [arrhythmia](#).

What happens before you come to hospital?

The evening before your child's procedure, a nurse from the cardiac day unit will contact you with fasting times and give you a time to arrive at the hospital. Medications that may need to be stopped will also be discussed over the phone.

Children admitted for cardiac catheterisation are usually admitted as day cases. However, we advise all patients bring an overnight bag in the event that they might be required to stay overnight after their procedure. It is advisable to prepare your child for hospital through play or by reading age appropriate books.

What happens when you come to hospital?

We ask all patients to go the admissions department located the ground floor of the hospital on the morning of your child's procedure. From there, you will then be sent to the cardiac day unit on level 3.

What happens when you arrive to the cardiac day unit?

Your child will undergo some or all of the following examinations:

- Vital sign monitoring (blood pressure, heart rate, oxygen saturations and temperature).
- Height and weight.
- Blood tests.
- Chest X-ray.
- Insertion of IV cannula ("Freddie")
- Urine test.

You will be seen by some or all of the following people:

- Advanced Nurse Practitioner/ Doctor who will do a physical assessment of your child.
- Cardiologist/fellow who will discuss with you the risks and benefits of the procedure and will obtain written consent.
- Anaesthetist who will talk you through the anaesthetic procedure.
- Play specialist.

A medication called a "pre-med" may be prescribed and administered to your child before being taken to catheterisation lab. This is done to relieve anxiety.

Your child will be placed in a hospital gown and taken to the catheterisation lab by a nurse. One parent can usually accompany their child to the anaesthetic room.

What happens after the procedure?

At the end of the procedure the catheters are removed, leaving a very small hole in the skin (usually the groin) which will be covered by a pressurised wound dressing. This dressing will be removed before your child goes home.

Following their procedure, your child will be taken to the recovery room to be woken up. Once awake and when their vital signs are stable, they will be transferred back to the cardiac day unit for further monitoring.

Once back on the ward, your nurse will continue to carry out regular checks on your child's vital signs and monitor the catheter site for signs of bleeding.

