After Your Procedure:

- You will return to your hospital room where you will be monitored closely by the nursing staff.
- The nurse will carefully watch for any bleeding where the catheter was inserted.
- You will be asked to lie flat on your back in bed, keeping your leg straight and still for about 3-4 hours.
- After removing the introducer sheath, a nurse or doctor will hold pressure on the punctured site or use one of several closure devices to ensure that there is no bleeding.
- A sandbag may be placed over the groin to keep firm pressure on it.
- The nurse will show you how to apply firm pressure to the groin area in case you happen to cough or sneeze.
- If you feel a warm, wet sensation or sharp pain at or near the puncture site, call the nurse immediately.
- You will urinate frequently as your kidneys flush out the x-ray dye used to visualize your arteries.
- Most stent implant patients go home within 24 hours after the procedure. Before going home, you will be given specific instructions about medications, physical activity, lifestyle changes and follow up care.
- You will need a family member or friend drive you home.

We hope this brief introduction to angioplasty and stent has provided you with a better understanding of this effective procedure.



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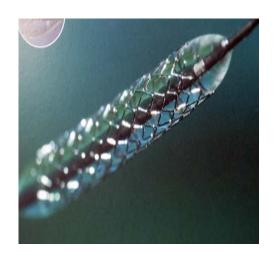
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HELENA CARDIOLOGY CLINIC

A
Patient's
Guide to
Coronary
Angioplasty and
Stent



What is Coronary Angioplasty and Stent?

A balloon angioplasty or percutaneous transluminal coronary angioplasty (PTCA) is a nonsurgical way to open or widen the narrowing in an artery which interferes with blood flow to the heart muscle. Angioplasty is a relatively simple procedure that does not require general anesthesia. Many patients stay in the hospital overnight and resume their normal activities in a day or two. Even in a successful angioplasty, the artery may renarrow within the first few months. To help prevent the renarrowing, your doctor may insert a stent following your angioplasty. A stent is a small, metal coil or mesh tube that is placed into your artery with a balloon catheter. The stent stays in place permanently, holding open the walls of the coronary artery and improving blood flow. New tissue slowly grows over the stent securing it permanently inside the coronary artery.

Your procedure will be done in the cath lab, a special room which has a large camera, a television screen, heart monitors and other devices which may be used during your procedure. A small incision is made in the groin area after it is numbed with a local anesthesia. A guide wire, which is a soft flexible wire, will be threaded into the artery and a sheath will be secured which allows the cardiologist to insert and remove different types of catheters without using a needle

Next the balloon catheter is threaded through the narrowing in the artery and the balloon is inflated several times to flatten the plaque and stretch the artery. In about one-third of successful angioplasties, the blockage may reoccur slowly or suddenly. To prevent the artery from closing off, the cardiologist often inserts a coronary artery stent which acts as a tiny scaffold to hold the artery wall open. After successful angioplasty and stent most people enjoy being symptom free. Occasionally, an in-stent renarrowing may occur due to the excess tissue growth in or around the stent. New treatments are being developed to prevent this from occurring.

Angioplasty Procedure Stent Implantation Procedure The balloon catheter is The stent is introduced into the blood vessel passed through the narrowing in the on the balloon catheter artery. and advanced into the blocked area. The balloon is inflated The balloon is inflated several times which causing the stent to compresses the plaque expand until it against the artery wall. conforms to the walls of the artery. The balloon is then Once the plaque has deflated and withbeen compressed and drawn The stent the artery opened permanently stays in successfully, the place, holding the balloon is deflated and vessel open and removed. improving blood flow.