

Patient Name: _____

You are scheduled for an: Cardiac Catheterization
on : _____

1. Your procedure will be performed at Methodist University Hospital, 1265 Union Ave., Memphis, TN 38104. **Go to the entrance off of Eastmoreland and go through the main lobby and stop at ADMISSIONS.**
2. You need arrive at **5:00 a.m.**
3. You will **NOT** be able to **drive** yourself home, so bring someone with you.
4. Nothing to eat or drink after midnight, the night before your scheduled procedure.
5. You will have six (6) hours of bedrest after your procedure, so expect to go home around 3:00 p.m-4:00 p.m. that same afternoon.
6. In the event that Dr. Khan finds a blockage that he feels can be treated with angioplasty and stent, he will likely do that at this time. If this occurs, you will spend one night in the hospital and go home the next day.
7. Do not take your medications the morning of your procedure.
8. It will be cold in the procedure area so you may want to wear a pair of heavy socks.
9. You will be instructed if blood thinners, such as **Coumadin, Warfarin, or Pradaxa**, need to be withheld prior to surgery.
10. Bring all of your medications with you to your appointment or a medication list showing the name of the medication, dosage, and how many times a day it is taken.

AFTER THE PROCEDURE:

1. You will have a bandage on your groin site. Remove this the next morning while in the shower, or at least get the bandage wet with water before removal.
2. Wash the site with soap and water and keep it dry. Do **NOT** put any creams, powders, or lotions on the area.
3. Mild soreness and bruising is very common. You may take an over the counter pain reliever if needed.
4. Watch the site for any severe pain, redness, or a knot under the skin. If this should occur please call our office.
5. If you are taking **Metformin, Avandia, Glucophage, or any diabetic Medications that you take by mouth** for your diabetes, do **NOT** take it on the day of your procedure and for the next two days. You should resume taking it on the 3rd day (the nurses on the floor will inform you of when to restart your diabetic medication)
6. Do **NOT** perform and strenuous activity on the day of your procedure or the next day. No lifting anything over 5 lbs. No pushing, pulling, lifting, or squatting for those two days. On day 3, you may resume activity as normal.

***If you require angioplasty and stent and you have to spend one night in the hospital, then this applies for one (1) week of no strenuous activity.

If you have any questions or concerns, please do not hesitate to call our office at (901) 507-6600.

By signing below, I certify that I have received a copy of the procedure instructions:

Patient Signature

Date

*** _____ Patient was instructed to stop taking the blood thinner such as **Coumadin or Warfarin 4 days** prior to procedure; **Stop Warfarin/Coumadin** on: _____

*** _____ Patient was instructed to stop taking the blood thinner **Pradaxa 3 days** prior to procedure; **Stop Pradaxa** on: _____

Staff Signature

Date