What is a Cardiac Catheterisation Test?
Cardiac Catheterisation is used to either assess your child’s heart condition and/or to establish the diagnosis. It is a means of accurately defining the structure of the heart defect and the degree of malformation.

Cardiac catheterisation may also be used to treat some conditions, such as opening a narrow valve or blood vessel or closing an abnormal communication, possibly avoiding surgery.

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 so that pressures can be measured and blood samples obtained to check the oxygen content of the blood in the various chambers and major arteries. A special x-ray dye is injected through the catheter which allows images of the heart to be recorded.

What about admission to Hospital?
You will receive a letter or telephone call asking you to bring your child for admission, usually a few weeks before the appointed date. Children admitted for cardiac catheterisation are usually only in the hospital for about 1 to 2 days. You will be asked to bring your child to the Admissions Department and then admitted to the ward.

What happens on the ward?
On the ward your child will undergo a number of examinations as listed below. The cardiac doctor will examine your child and explain the procedure to you. Your child may also be examined by an anaesthetist.

Your nurse on the ward will inform you of the exact time for fasting to begin. Foods/Solids/Milk are withheld for approximately 6 hours prior to the procedure.

What tests will be done?
Any of the following tests may be undertaken during the admission:

- **ECG (Electrocardiogram)**
- **Echocardiography (ECHO)**
- **Chest X-ray**
- **Blood tests**- A special cream or spray may be applied to numb the area before blood is taken. A small cannula (“Freddie”) may be placed in your child’s vein to administer fluids while fasting.

What is the catheter lab like?
The catheter lab (laboratory) room contains a lot of equipment including the monitors used during the procedure. There is many staff looking after your child including nurses, technicians, anesthetists and radiographers. You will be directed to lie or place your child on a special bed.

Can parents accompany the child?
Yes- Parents can accompany their child to the catheter lab with the nurse and stay with them until they go asleep.

Will my child be awake?
Catheterisation is performed whilst your child is under general anesthetic, so he/she will not feel any pain or discomfort and will be asleep throughout the whole procedure.

What happens after catheterisation?
- After the procedure the catheter will be removed from the blood vessel and the child is brought to the recovery room for close observation.
- As soon as your child is awake, He/She returns to the ward.
- The child will be monitored regularly by the nurses.
- The child will be encouraged to lie flat for at least 4 hours to reduce the risk of any bleeding from the groin. There will be a pressure dressing at the catheter entry site for 4-6 hours after the catheterisation.
• The nurses on the ward will remove the dressing and inspect the wound prior to discharge.

• Your child, if well, can be given something to drink on return to the ward and can feed as normal later that evening.

• The Cardiologist who performed the catheterisation will usually speak to you the same day and discuss the results with you. The findings may also be discussed with other consultants.

When can your child go home?

Provided your child is well, he/she will be discharged the following day. In some cases your child may be discharged on the day of the procedure, but this will be discussed with you in advance.

Advice on discharge

• The puncture site is small and does not need stitches. It should heal within a few days.

• The area around the puncture site may become slightly discolored and bruised. It can be covered by a small plaster to keep the site clean.

• Your child can have a bath/shower but avoid long hot baths for 24 hours.

• If you notice any bleeding, press directly on the puncture site for 5 –10 minutes using your fingers. If the bleeding continues phone the ward for advice.

• Avoid strenuous activity such as foot ball, cycling and swimming for at least 48 hours after discharge.

• Your child can return to school 1-2 days post discharge.

• You will be given a pain relief leaflet informing you of the times to administer pain relief at home. Pain relief should be given at regular intervals, until your child is comfortable and pain free.

Remember: Ask your nurse if you are unsure about anything about your child’s care.

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