

**AORTOILEOFEMORAL STUDY**

**INSTRUCTIONS:**

**PLEASE NOTE IF FOR ANY REASON THE FOLLOWING STEPS ARE OVERLOOKED IT MAY BE DETERMINED FOR YOUR SAFETY THAT YOU RESCHEDULE THE PROCEDURE**.

**1.**  Have **NOTHING** to eat or drink after midnight the night prior to the procedure.

**2. DO NOT STOP** Plavix, Brilinta, Effient or Aspirin unless specifically directed by your physician.

**3. STOP COUMADIN (GENERIC NAME IS WARFARIN), XARELTO, ELIQUIS,**

**SAVAYSA AND PRADAXA 3 DAYS PRIOR TO PROCEDURE**.

**\*\*\*\*\* STOP TAKING\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ON \_\_\_\_\_\_\_\_\_\_\_\_\_\*\*\*\*\***

**4. IF YOU ARE ALLERGIC TO IODINE OR HAVE HAD AN ALLERGIC REACTION TO**

**X-RAY DYE YOU WILL NEED TO BE PRE-MEDICATED. PLEASE NOTIFY US IN**

**ADVANCE SO YOU CAN BEGIN MEDICATION THE DAY BEFORE**.

**5.** If you are Diabetic you will want to only take **HALF** of the normal INSULIN the morning of the

procedure, and **DO NOT** take any of your diabetic pills you are on.

**6. GLUCOPHAGE OR GLUCOVANCE** (which contains glucophage) must be stopped the day of

the procedure and for 2 days after. The generic form of glucophage is **METFORMIN**.

**7.**  You may take all other medications that are not required to be taken with food, with small sips of

water (if you take diuretics also known as “water pills” you may want to delay taking them until

later in the evening for your comfort as you will be on bed rest).

**8.**  You may receive results of your lab work in advance which indicates you may need a medication

called Mucomyst. This liquid medication may be taken with juice or soda and assists your kidneys

in removing X-ray dye.

**9.**  Please be prepared to spend the night, you will also need someone to drive you home.

**10.** If a stent is required the stent placement may be performed at a later date due to x-ray dye

limitations.

**CARDIAC CATHETERIZATION / PTCA / STENT**

**POST INSTRUCTIONS**

**ACTIVITY**

**No heavy lifting (above10 pounds) for 1 week.**

**No driving for 2 days after bleeding stopped from puncture site.**

**No exercise or vigorous / strenuous activity for 1 week.**

**PUNCTURE SITE**

**Remove dressing and leave open to air the day after procedure.**

**Wash site with soap and water daily.**

**Shower preferred (instead of tub bath to prevent infection for 1 week).**

**No creams or lotions to site.**

**SIGNS TO WATCH / CALL DOCTOR OFFICE ABOUT**

**Increased bruising.**

**Swelling at site of puncture.**

**Elevated temperature over 100degrees.**

**Redness or drainage from puncture site.**

**Pain at site or extremity not relieved by analgesics.**

**SMALL LUMP UNDER THE SKIN AT PUNCTURE SITE IS NORMAL FOR A COUPLE WEEKS.**

**FOR QUESTIONS PLEASE CALL THE OFFICE @ 314-741-0911**

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