



Postoperative Precautions for Cardiac Catheterization

1. After returning to the ward, may resume their regular diet. If there are no specific restrictions, it is recommended to increase water intake to facilitate the excretion of the contrast agent.
2. Inform the nursing staff immediately if there are any difficulties in urination or any instances of bleeding.

3. Precautions of wound care:

3.1 Performing catheterization through the wrist:

- 3.1.1 After the cardiac catheterization procedure, avoid applying pressure on the side of the hand where the catheter was inserted. Elevating the hand with a pillow to prevent swelling.
- 3.1.2 A hemostatic patch will be applied to stop bleeding and will be removed after 2 to 6 hours depending on the situation. Then, the site will be bandaged. If it feels too tight, ask the medical staff to adjust it. The second day, the bandage will be removed and covered the area with gauze after disinfection, and keep it dry for the day.
- 3.1.3 The nursing staff will regularly check the wound for bleeding. If there is any feeling of warmth, swelling in the forearm or numbness in the fingers, inform the medical staff immediately.
- 3.1.4 Within one week after the procedure, should not be used to lift heavy objects with the hand that was used for the catheterization. After the follow-up appointment, the doctor will confirm the healing of the wound and normal activities can be resumed.

3.2 Performing catheterization through the groin area:

- 3.2.1 The head of the bed can be raised to 30 degrees, and the leg on the side of the catheterization should be kept straight and can be moved horizontally but should not be bent or strained.
- 3.2.2 The groin catheter will be removed after a few hours, and the wound



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should be compressed with a sandbag for 6-8 hours. The leg on the side of the catheterization should still be kept straight.

3.2.3 The unexamined lower limb can be freely moved and bent.

3.2.4 When using a bedpan, keep the leg on the side of the examination straight and relaxed, hold the sandbag with one hand, and bend the other limb that was not examined to raise the buttocks. Place the bedpan under the buttocks to allow defecation or urination.

3.2.5 If there is obvious warmth, swelling, pain, or bleeding around the wound site, inform the medical staff immediately for inspection of any abnormalities.

3.2.6 After removing the sandbag, the patient should still lie flat in bed for rest without getting up or turning sideways. After being checked by the nursing staff for no bleeding on the following day, the patient can then get up and move around.

3.3 If a vascular closure device is used:

3.3.1 Lie flat or raise the head of the bed to 30 degrees for 2 hours.

3.3.2 After 2 hours, raise the head of the bed to 45 degrees for 2 hours.

3.3.3 After 4 hours, you can sit on the bed, but do not get up and walk around.

3.3.4 If the wound feels swollen or moist, inform the nursing staff to change the dressing and fix it with adhesive tape. A 1-kilogram sandbag can be used to apply pressure for 2 hours.