



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

Having an Angiogram v9

Having an Angiogram

Patient Information

Cardiac Catheter Laboratory (CCL)

- Author ID: CW/JS
- Leaflet ref: Card 005
- Version: 9
- Leaflet title: Having an Angiogram
- Last review: February 2023
- Expiry Date: February 2025

Cardiac Catheterisation

Cardiac catheterisation is an X-ray test, which will provide vital information about the condition inside your heart, and how well the pumping chambers and valves are working. Most importantly, it can show if there is any narrowing in the coronary arteries. This diagnostic test will be used to plan the best treatment for you: medical treatment, bypass surgery, or angioplasty.

Cardiac catheterisation is a routine, safe procedure but, like all surgical procedures, it is associated with a small risk of complications, and it is therefore necessary that you are fully informed of this. You may get a bruise at the puncture site. In rare cases damage to the artery can occur that requires repair. Heart rhythm disturbances are also possible. Extremely rare complications could include DVT or even a heart attack or stroke leading to death.

Before your Angiogram

- You will be welcomed onto the unit by a nurse who will check your details are correct; the nurse will also record your observations.
- A gown and disposable underwear will be provided for the procedure.
- One of the doctors will see you and explain the procedure to you and ask you to sign a consent form.
- When it is time for your procedure, a member of the team will escort you to the Catheter Laboratory.
- You will be in the Catheter Laboratory for approximately 1 hour, then return to recovery for a period of 2-3 hours.
- If the procedure is from your right groin, please shave this the night before.

- Patients who take Warfarin, Sinthrome or a direct oral anticoagulant such as Rivaroxaban (Xarelto), Edoxaban (Lixiana), Apixaban (Elequis) or Dabigatran (Pradaxa) need to follow specific instructions given at the pre-admission clinic.
- **DO NOT STOP TAKING ANY OF THESE MEDICATIONS UNLESS YOU HAVE BEEN GIVEN INSTRUCTIONS TO DO SO.** If you are in any doubt, contact the Cardiac Catheter Laboratory on 01942 773392.
- **If you are a Diabetic on Metformin** – please **do not** take it on the day of your procedure. You will be advised when to restart it by the doctor or nurse after the procedure.
- **If you are on insulin**, please take as normal.

PLEASE ARRANGE YOUR TRANSPORT TO AND FROM THE HOSITAL, PRIOR TO THE DAY OF YOUR TEST.

Your Angiogram

You will be lying down for this test and awake throughout this procedure and asked to lie flat and keep as still as possible. Initially, several ECG electrodes will be attached to your chest to record your heart rhythm. Depending on the Cardiologist, he/she will use the right groin, right arm, or right wrist as the approach route to your heart. This area will be cleaned with some iodine- this will feel cold.

You will be covered with a sterile drape, and the procedure will be carried out under local anaesthetic, which is used to freeze the skin. After a few minutes, the area will be numb, and the test can be started. The Doctor introduces a fine flexible tube into the blood vessel; this should not be painful, but you may feel some pressure. A fine catheter will be passed through the tube and dye will be injected to outline the coronary arteries, to assess the severity of any narrowing and to assess the pumping action of the heart.

On the assessment of the heart's pumping action, you will feel warm as the dye is injected; some patients feel as if they have wet themselves; this is only a feeling and will pass

quickly.

If the tube has been introduced from your right groin, it may be possible at the end of the procedure to seal the opening in your artery by a special device called an angio-seal. Alternatively, you will be taken to the recovery area, where the tube in the circulation will be removed. Pressure will be applied to stop any bleeding that may occur and to seal off the opening of the artery by natural means, which is by formation of a clot.

After your Angiogram

Once returned to recovery your observations will be recorded and catheter site will be checked regularly. The Doctor who carried out your angiogram will come and see you on the ward and discuss the results with you. Arrangements will be made for you to see the Consultant in Clinic, or you may be referred for a balloon angioplasty/stent or heart surgery. You will be allowed home with your escort once the doctor has seen you.

Patient Transport contact numbers

Wigan patients: 01942 482990

Out of area patients: 0800 092 4020

Please ring the Cardiac Catheter Lab or Cardiology Department to confirm you have booked your transport if required.

PLEASE ENSURE YOU BOOK YOUR TRANSPORT BY 3PM, THE DAY BEFORE YOUR PROCEEDURE

If there are any issues with booking transport, please contact:

Cardiac Catheter Lab telephone 01942 773392 or 01942 773394

Cardiology Department telephone 01942 822445 or 01942 822845.

At Home

YOU MUST HAVE SOMEBODY AT HOME WITH YOU ON THE FIRST NIGHT OF YOUR PROCEEDURE. THIS IS IN CASE YOU NEED ANY HELP IN THE NIGHT OR IF YOU HAVE ANY PROBLEMS.

- For the 48 hours following the procedure, we advise you to rest. **Do not** do anything strenuous i.e. Lifting or hoovering.
- **Do not** have a bath or shower on the evening of your angiogram - leave it to the following day.
- You may eat as normal.
- If you are taking Warfarin or a direct oral anti-coagulant, you may re-start that evening unless the Doctor/Nurse tells you otherwise.
- If you take Metformin, do not take it until two days after the procedure unless otherwise instructed.
- Do not drive for 48 hours after your angiogram.

You may get some slight bruising around the puncture site; this is acceptable as long as it is not swollen or painful. If there is any bleeding from the puncture site, you need to apply pressure to the area and telephone immediately for an ambulance, which will take you to the nearest casualty department. The same applies if you get a large swelling or a lot of pain at the puncture site.



Version number: **9**
Last modified date: **03rd July 2026**

All rights reserved © 2026
WWL Teaching Hospitals NHS Foundation Trust