



Cath Lab: 908-994-5189
PAT Short Stay: 908-994-5126
PAT Nurse: 908-994-5487
Fax: 908-527-0212

Your Catheterization is scheduled to be done at Trinitas Hospital on:

Date: _____ **Time:** _____

Follow up appointment at NJ Heart: _____

REGISTRATION:

- On the day of your scheduled procedure, please report to the hospitals main entrance and go to admissions.
- Be at the hospital two (2) hours prior to your scheduled catheterization.
- Bring your ID and current insurance cards
- You **WILL NOT** be allowed to drive home, so please have someone accompany you. We **DO NOT RECOMMEND** that you catch a cab home for safety reasons.

If you are pregnant or there is a possibility you might be, please let the physician know ahead of time.

THE NIGHT BEFORE THE PROCEDURE:

- If you take daily medication, check with your physician about what to do the morning of your procedure regarding your medication
- If you take **Coumadin/Warfarin**, it has to be **STOPPED 5 DAYS BEFORE** your procedure
- If you take **Glucophage/Metformin/Glucoavance**, it has to be **STOPPED 2 DAYS BEFORE** your procedure
- If you are **ALLERGIC TO IODINE/CONTRAST** let your physician know about it
- Smokers should **NOT** smoke 24 to 48 hours before your procedure, to enhance breathing
- **YOU DO NOT NEED TO STOP YOUR ASPIRIN OR PLAVIX**
- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT**

The Morning Of the Procedure:

- Bathe or shower to reduce the chance of infection
- Do not wear makeup or nail polish
- The hospital will call you the night before to tell you the time you need to be at the hospital.
- Wear clothing that is easy to take off and put on
- Leave your valuables at home
- If you wear glasses, contacts or hearing aids, bring along a case to store them in during your procedure
- If you have a cold, a fever of 100 degrees or higher, a skin rash or an infection of any kind, notify your physician before coming in for your procedure
- You do not need a suitcase, a change of clothing is ok (robe, slippers and basic toiletries are all you should need)
- Please limit to two (2) people accompanying you. These people are welcome to stay in the waiting room or we will call them when you are ready to go home

If you have any questions prior to and leading up to the day of your procedure, please call 908-994-5189.

After Your Procedure:

- After you leave the procedure room, you will be taken to the Cardiac Cath Laboratory Recovery Room for a brief period
- For your own safety, a responsible adult **MUST** drive you home.
- Someone responsible should stay with you for the first 24 hours after your procedure
- If you have any problems, please contact your physician.
- Times vary, but you can plan that you will be in the Cath Lab/Recovery for an estimated time of 4 hours.
- There may be a possibility that you may be admitted to the hospital should your physician deem it necessary

At home, if you have the following:

Strong pain

Swelling

Extreme redness and heat around the procedure site

Exaggerated bruising

Fever and/or feeling of sickness

**Call your doctor immediately during office hours or go to the
Emergency Room at the nearest hospital if you experience any
of the above**