

# Care after your coronary angiogram, angioplasty or stent insertion (PCI)

Department of Cardiology

Information for Patients

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## Introduction

This leaflet has important information. Please read it carefully. It has advice about discharge after your heart (cardiac) procedure, whether you have had a coronary angiogram, angioplasty or coronary stent insertion (PCI). It has information about what to do when you get home, and how to maintain a healthy lifestyle.

## Contents

- 1. Discharge summary**
  - 1.1 Follow up
  - 1.2 Your outpatient follow up
- 2. What to do when you get home**
  - 2.1 Wound care
  - 2.2 Bleeding
  - 2.3 Driving
  - 2.4 Return to work
  - 2.5 Medication
  - 2.6 Contact numbers
- 3. Lifestyle changes and prevention**
  - 3.1 Smoking
  - 3.2 Family history

**Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice**

Visit [www.leicestershospitals.nhs.uk](http://www.leicestershospitals.nhs.uk) for maps and information about visiting Leicester's Hospitals  
To give feedback about this information sheet, contact [InformationForPatients@uhl-tr.nhs.uk](mailto:InformationForPatients@uhl-tr.nhs.uk)

- 3.3 Healthy diet
- 3.4 Cholesterol
- 3.5 Diabetes
- 3.6 Exercise
- 3.7 Sexual activity
- 3.8 High blood pressure
- 3.9 What to do if you get chest pain
- 3.10 Cardiac rehabilitation
- 4. Further information**

## **1. Discharge Summary**

The procedure you had was

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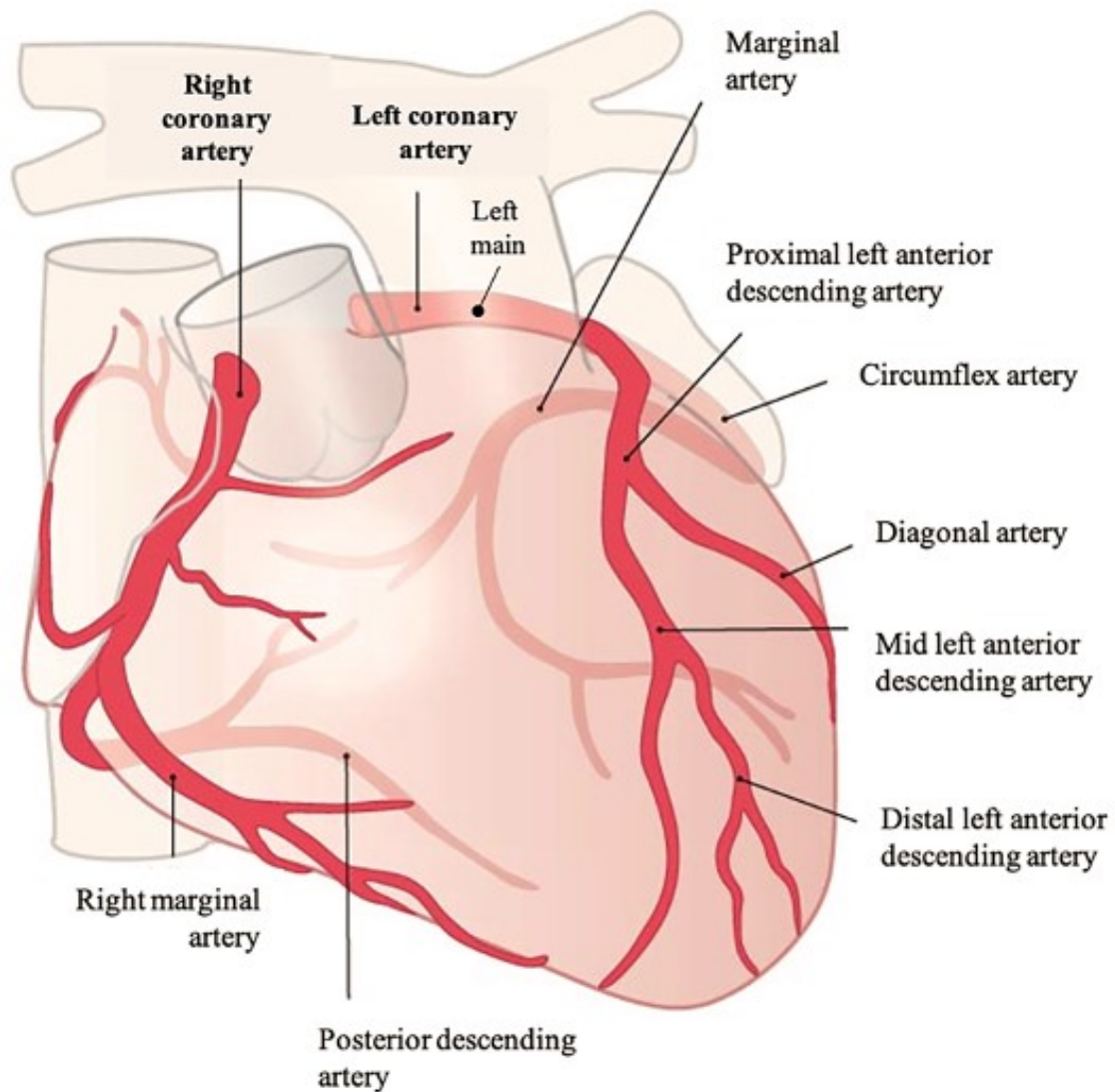
The results of your procedure were

.....  
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Your consultant at Glenfield hospital is .....

We will send a summary of your procedure/hospital stay to your GP and/or consultant who referred you, explaining the outcome and planned treatment.

## The parts of your heart



### 1.1 Follow up

Your nurse will tick the section that applies to you.

- We will send you an outpatient follow-up appointment in the post.**  
If you do not get an appointment date within 8 weeks, please call your local hospital and ask to speak to the secretary of your named consultant.
- We will not send you an outpatient follow-up appointment.** If you have any further problems please contact your GP.

## 1.2 Transport to your outpatient follow-up appointment

If you have difficulty getting to and from your outpatient follow-up appointments your GP may have the phone numbers of the Royal Voluntary Service (RVS), if they operate in your area. They may have numbers for other patient transport companies that may be able to help you.

## 2. What to do when you get home

After your procedure you should have a quiet evening resting. You may eat and drink as normal and sleep in your usual position at night. The next morning you can shower as normal.

If you had **angiogram with no stents**, we advise you have at least 3 days off work.

If you have had **stents** fitted or **angioplasty**, we advise you take 1 to 2 weeks off work. You can self certify a sick note for 7 days, or we can give you a fit note for 1 to 2 weeks before your discharge.

### 2.1 Wound care

Your nurse will tick the section(s) that apply to you.

#### Femoral artery (groin)

- The plaster or dressing on your groin(s) can be removed the day after your procedure. It does not need to be replaced.
- Avoid lifting or any strenuous activity for 48 to 72 hours. This increases the pressure in the groin area. It will make it more likely that the wound will bleed.
- It is rare for serious complications to occur after these procedures. The most common problem is for a bruise to form at the insertion site. This may be uncomfortable for a few days. If this becomes swollen or very red and painful, please contact your GP right away as the wound may need further attention.

Your doctor may have used a special stitch called an “angioseal”. This will have a separate information card with instructions about wound care.

Applicable

Not applicable

#### Radial artery (wrist)

- The dressing may be removed the day after the procedure. It does not need to be replaced.
- Avoid lifting or strenuous activity for 3 days.
- Check your wound for redness or swelling. If it becomes hard and swollen or very painful, you must get urgent medical advice (from your GP, or 111)

## 2.2 Bleeding complications

It is rare to have severe bleeding from the insertion site once you are at home. If bleeding does occur you must :

- **Lie flat** (preferably on the floor to prevent you from falling off anything should you feel faint)
- Apply constant **firm pressure** to the insertion site for **10 minutes**. If able, get someone else to press for you.
- If the bleeding does not stop after 10 minutes of firm pressure, **call 999**. If unable, please get someone to call 999 for you.

Though bleeding is rare, if you are discharged on the same day as your procedure you will need someone to stay with you overnight.

## 2.3 Driving restrictions

There are DVLA driving restrictions after some procedures.

**After an angiogram (no stents) – You must not drive for 3 days.**

**After a stent or angioplasty (PCI) - You must not drive for 1 week.**

If you have had a heart attack, please seek advice from your doctor or cardiac rehabilitation nurse. They will advise you on current DVLA guidelines as you will be restricted from driving for a short period.

**DO NOT** drive until you have this confirmation from your doctor.

You must tell your car insurer before driving again to make sure that you are still covered. You do not need to tell the DVLA.

## 2.4 Return to work

We recommend you take at least 3 days off work.

If you have has stents fitted, it is advisable to take 1 week off work.

If you have a manual job, we recommend 1 to 2 weeks off work.

## 2.5 Medication

We will explain your medicines to you before you go home. Please ask if you have any questions about your medications.

**If you have had a stent inserted** during your angiogram, **you will need to take a tablet called clopidogrel** This is a 'super aspirin' called an antiplatelet medication.

Clopidogrel makes the blood less 'sticky' to stop clots forming inside and around your new stent(s). You will need to take this medication for at least **1 to 12 months**. Your discharge letter will tell you the exact length of time you need to take this medication for.

**You must take this as well as your aspirin.**

This is called Dual-anti-platelet therapy (DAPT). We will give you a small alert card to carry with you at all times. This is a precaution in case of emergency. It will alert people that you are on 2 medications that make your blood less 'sticky' and slower to clot. This means you are more at risk of bleeding.

You will need to take both tablets together for the amount of time it says on your discharge letter (1 to 12 months). After this time, you can stop taking the clopidogrel but must carry on taking your aspirin for life.

**We will write any other medication changes and instructions on your discharge letter.**

## 2.6. Contact numbers for queries or concerns

If you have any queries about your procedure or care within 48 hours of you being discharged please contact your ward. The nurses will try their best to help.

**If you have any bleeding concerns or any chest you should ring 999 for an ambulance- Do not call the ward. We cannot admit you back to the hospital. You will need to go through Emergency Department.**

Ward .....

Telephone (0116).....

**After 48 hours has passed, please contact your GP for any advice or concerns.**

## 3. Lifestyle changes and prevention

If you have been told that you have some disease in your heart's arteries then there are many things that **you** can do to help the situation.

Coronary artery disease is one of the most common causes of death in the UK. By making important lifestyle changes you will help to reduce the risk of cardiac problems in the future. This

advice is relevant to everyone, not just people with disease in their arteries. If you follow advice you can maintain a healthy lifestyle.

### 3.1 Smoking

Smoking is a risk to your health. It is very risky if you have coronary artery disease. If you have coronary heart disease the importance of giving up smoking cannot be stressed enough.

There is a lot of support and information available both whilst you are in hospital and when you go home. Most nurses attached to GP practices, cardiac rehabilitation nurses and GP's are trained to help you stop smoking (smoking cessation). They are there to give you advice and support.

#### Stop smoking contacts and help lines

Here are some contacts if you want to stop smoking:

National:

##### **NHS stop smoking Helpline**

0800 169 0 169

[NHS stop smoking services help you quit - NHS \(www.nhs.uk\)](http://www.nhs.uk)

##### **Quit line (independent charity)**

0800 002200

[www.quit.org.uk](http://www.quit.org.uk)

##### **Leicestershire:**

Leicestershire STOP smoking cessation service

0116 295 4141

Or, you can contact your GP or Health Centre and ask to speak to the smoking cessation advisor.

### 3.2 Family history

If a parent or siblings has had angina, a heart attack or heart bypass surgery under the age of 60 years, you are seen as having a family history of heart disease.

If you do have a family history this does mean that you are more likely to have some heart disease yourself. This is why family history is seen as a risk factor. Please bear in mind that if you are under 60 years, and have children, they will now also have a family history of heart disease. They should think about making lifestyle changes that could benefit their health.

### 3.3 Healthy diet

Here are the main things needed to follow and maintain a healthy diet.

- Eat at least 5 portions of fruit and vegetables each day
- Reduce your intake of fat, particularly saturated fat

- Eat 2 portions of fish, including at least 1 portion of oily fish, each week
- Have less salt in what you eat
- Cholesterol --' the lower the better"

### 3.4 Cholesterol

Cholesterol is a type of fat (or lipid) in the blood. Having high levels of fats in the blood can lead to serious health problems such as heart disease. Cholesterol levels are measured by having a blood test. If you have coronary heart disease, ideally your cholesterol should be below 4.0mmols. The lower your cholesterol is, the lower the risk of a heart attack is in the future. You may also be prescribed a tablet (a statin) to lower your cholesterol level. Cholesterol can be reduced by maintaining a healthy diet, high in fibre and low in saturated fat.

### 3.5 Diabetes

It is well known that people with diabetes have a raised chance of developing certain other medical problems such as damage to the kidneys, eyes and heart disease. If diabetes is well controlled these risks are greatly reduced. A mixture of good control of blood glucose levels, healthy eating and exercise greatly lowers the risk of developing further heart complications.

### 3.6 Sexual activity

Please allow 48 to 72 hours after an angiogram, angioplasty or stent before resuming sexual activity, to avoid any wound complications such as bleeding.

### 3.7 Exercise

The government recommends moderate intensity activity such as walking for at least 30 minutes, 5 times a week. If you exercise your heart, it will get stronger and work better. If you need more advice about exercising please contact either your GP or practice nurse or your local cardiac rehabilitation department.

### 3.8 High blood pressure

If you have high blood pressure there are things that you can do to help lower it:

- Reduce the salt in your diet. Too much salt in your diet raises your blood pressure.
- Beware of hidden salts, especially in processed foods . Check food labels.
- Exercise regularly. Regular exercise helps lower your blood pressure.



### 3.9 What to do if you get chest pain

#### If you get chest pain/discomfort either mild, moderate or severe

Use of GTN (glyceryl trinitrate) spray:

- If you get chest pain you should rest
- Use 1 to 2 GTN sprays/tablets under your tongue
- If pain is not eased within 5 minutes then take another 1 to 2 sprays/tablets under tongue

**If pain not eased within 10 minutes total time it is important that you dial 999 for an ambulance.**

**Warning: GTN can make you feel dizzy or light headed. Sit down, where possible, when using the spray especially for the first time. It can also give you a headache, if so, you can take medication such as paracetamol**

- If your pain increases in severity at any stage use your GTN spray right away. If the pain is not eased, phone 999 right away.
- If your pain is eased but episodes of angina are more frequent or are taking longer to go, you should see your GP.
- If you notice that your angina has started to occur at night or at rest, it is important to see your GP to let them know about your changing symptoms.

### 3.10 Support from Cardiac Rehabilitation

If you have an angioplasty/stent (PCI), you may feel that you would help to have some support afterwards. The cardiac rehabilitation service offer information classes, exercise programmes, outpatient clinics and general advice/support.

#### Cardiac rehabilitation contact numbers

For patients who live in Leicestershire please contact the service at:

Glenfield Hospital: 0116 256 3986

Leicester Royal Infirmary: 0116 258 7544

For patients who live outside Leicestershire, please contact the cardiac rehabilitation service that is closest to where you live:

Lincolnshire: Pilgrim Hospital- 01205 446 282

Staffordshire: Queens Hospital Burton 01283 593 150

If you have coronary heart disease but are managing it with medication instead of a stent or angioplasty, support is still available through these contacts.

Support is also available to you through your GP service.

## 4. Further information

Other useful information can be found here:

### **British Heart Foundation**

0870 600 6566 (Publications Order Line)

[www.bhf.org.uk](http://www.bhf.org.uk)

The British Heart Foundation produces a number of patient leaflets, which can be ordered online or downloaded from their website.

### **NHS 111 (NHS direct)**

Call: 111

[Get help for your symptoms - NHS 111](#)

### **British Cardiac Patients Association**

01223 846845

[bcpa.eu/default.htm](http://bcpa.eu/default.htm)

### **NICE Guidance 2008**

Lipid modification

MI secondary prevention

[www.nice.org.uk](http://www.nice.org.uk)

**Our hospital website also has information about all of our cardiac services**

[www.leicestershospitals.nhs.uk](http://www.leicestershospitals.nhs.uk)

## **We welcome your feedback**

If you have any comments about the contents of this booklet, please contact:

Ward 32

Glenfield Hospital

0116 258 3313 or 0116 258 3731

PALS (Patient Advice and Liaison Service)

[pals@uhl-tr.nhs.uk](mailto:pals@uhl-tr.nhs.uk)



tel: 0808 178 8337

## Space for you to make notes:

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اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔  
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

Previous reference:

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email [equality@uhl-tr.nhs.uk](mailto:equality@uhl-tr.nhs.uk)