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		Effective Date:	06-30-2022
		Document Type:	Policy
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		Department/Section:	Catheterization Laboratory
		Document Title:	INTRA- PROCEDURAL PATIENT CARE

PURPOSE:

To establish a standard of care for patient during a diagnostic or interventional catheterization procedure.

LEVEL:

Catheterization Laboratory Personnel

DEFINITION OF TERMS:

Surgical Safety Checklist Guideline- is a simple tool designed to improve communication and teamwork by bringing together the surgeons, anesthesia providers and nurses involved in care to confirm that critical safety measures are performed before, during and after an operation.


World Health Organization- is the United Nations agency that connects nations, partners and people to promote health, keep the world safe and serve the vulnerable – so everyone everywhere can attain the highest level of health.

Aortic (Ao) pressure- is the blood pressure at the root of aorta.


Left ventricular end- diastolic pressure (LV-EDP)- the pressure within the left ventricle following the completion of diastolic filling, just prior to systole.

POLICY:

1. An emergency cart shall be readily available at all times inside the unit
2. The Receiving Nurse shall record the baseline vital signs taken that must include, but not limited to:
 - 2.1. Blood Pressure
 - 2.2. Heart rate and rhythm

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- 2.3. Respiratory rate
 - 2.4. Oxygen saturation
3. Receiving Nurse shall monitor and record the vital signs of the patient every five minutes or depending on the patient's condition during the procedure. The anaesthesiologist on board shall primarily monitor the sedation level and status of the patient.
 4. All healthcare workers involved in the procedure shall participate and follow the surgical safety checklist guidelines of the World Health Organization.
 5. Receiving Nurse shall document all relevant information and occurrence during the procedure such as:
 - 5.1. Puncture site
 - 5.2. Sheath- in time
 - 5.3. Type and size of sheath
 - 5.4. Activated Clotting Time (ACT) result, if available
 - 5.5. Punctured vessel; arterial or vein
 - 5.6. Sheath removal time; if retain, indicate the planned removal date
 - 5.7. Name of physician responsible of sheath removal
 - 5.8. Fluoroscopy time
 - 5.9. Patient radiation dose (Dose Area Product)
 - 5.10. Total amount of contrast media administered
 - 5.11. Aortic (Ao) pressure
 - 5.12. Left ventricular end- diastolic pressure (LV-EDP)
 - 5.13. Blood pressure
 - 5.14. Heart rate and rhythm
 - 5.15. Respiratory rate
 - 5.16. Oxygen saturation
 - 5.17. Symptoms
 - 5.18. Complication(s)
 - 5.19. Total amount of heparin and local anesthesia given

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- 5.20. Specifications of angioplasty balloon and stents placed
- 5.21. Pulses distal to site
- 5.22. All other necessary data

DOCUMENTATION:

New Policy

DISSEMINATION:

1. Surgical Complex- Catheterization Laboratory Policy Manual
2. Orientations

REFERENCES:

1. *The IAC Standards and Guidelines for Cardiovascular Catheterization Accreditation.* (2018). Part B: Process Section 1B: Procedures and Protocols, page 34. IAC | Improving Health Care Through Accreditation®. <https://www.intersocietal.org/cath/standards/IACCardiovascularCatheterizationStandards2018.pdf>
2. *Preparing a patient for cardiac catheterization: Nursing*2021. (n.d.). LWW. https://journals.lww.com/nursing/Fulltext/2011/10001/Preparing_a_patient_for_cardiac_catheterization.4.aspx
3. England,N. (n.d.).*NHS England » decade of improved outcomes for patients thanks to surgical safety checklist.* <https://www.england.nhs.uk/2019/01/surgical-safety-checklist/>
4. *About WHO.* (n.d.). WHO | World Health Organization. <https://www.who.int/about>
5. *Aortic pressure.* (2009, March 1). Wikipedia, the free encyclopedia. Retrieved October15, 2021, from https://en.wikipedia.org/wiki/Aortic_pressure
6. *Left ventricular end-diastolic pressure (Concept id: C0456190) - MedGen - NCBI.* (n.d.). National Center for Biotechnology Information. <https://www.ncbi.nlm.nih.gov/medgen/629062>




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		Document Type:	Standard Operating Procedure
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PURPOSE:


To discuss the intra-procedural care given to patients undergoing a diagnostic or interventional catheterization procedure.

SCOPE:

Applies to all Catheterization Laboratory personnel of Dr. Pablo O. Torre Memorial Hospital


PERSON RESPONSIBLE:

Staff Nurses, Cardiovascular Medical Technologist, Interventionist (Doctor)

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PROCEDURE:

1. Upon transfer of patient to the procedure table, receiving nurse and circulator positions patient comfortably. Informs the patient that he/ she will be secured with a restraining belt.
2. Receiving nurse attaches patient to the physiologic and hemodynamic monitors.
3. Receiving nurse instructs patient to report pain and discomfort during the procedure.
4. The team participates in the sign-in and time-out in compliance to the surgical safety checklist guidelines.
5. Receiving nurse does the skin preparation and disinfection of planned puncture site.
6. Receiving nurse reassures patient and assists his/ her needs and maintains a quiet and calm atmosphere.
7. Receiving nurse administers medications ordered by the physician.
8. Cardiovascular Medical Technologist (CV Med Tech) facilitates patient's diagnostic examinations and activated clotting time (ACT) monitoring, if necessary.
9. CV Med Tech monitors and records patient's hemodynamic status upon proper placement and before taking out of catheter.
10. The team performs a sign- out following the surgical safety checklist.
11. Receiving nurse records the procedure process.
12. Receiving nurse facilitates transport of patient to Post Anesthesia Care Unit or Intensive Care Unit and endorses patient properly to nurse in- charge.

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REFERENCES:

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2. *Preparing a patient for cardiac catheterization: Nursing*2021. (n.d.). LWW. https://journals.lww.com/nursing/Fulltext/2011/10001/Preparing_a_patient_for_cardiac_catheterization.4.aspx
3. England, N. (n.d.). *NHS England » decade of improved outcomes for patients thanks to surgical safety checklist.* <https://www.england.nhs.uk/2019/01/surgical-safety-checklist/>
4. *About WHO.* (n.d.). WHO | World Health Organization. <https://www.who.int/about>
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6. *Left ventricular end-diastolic pressure (Concept id: C0456190) - MedGen - NCBI.* (n.d.). National Center for Biotechnology Information. <https://www.ncbi.nlm.nih.gov/medgen/629062>



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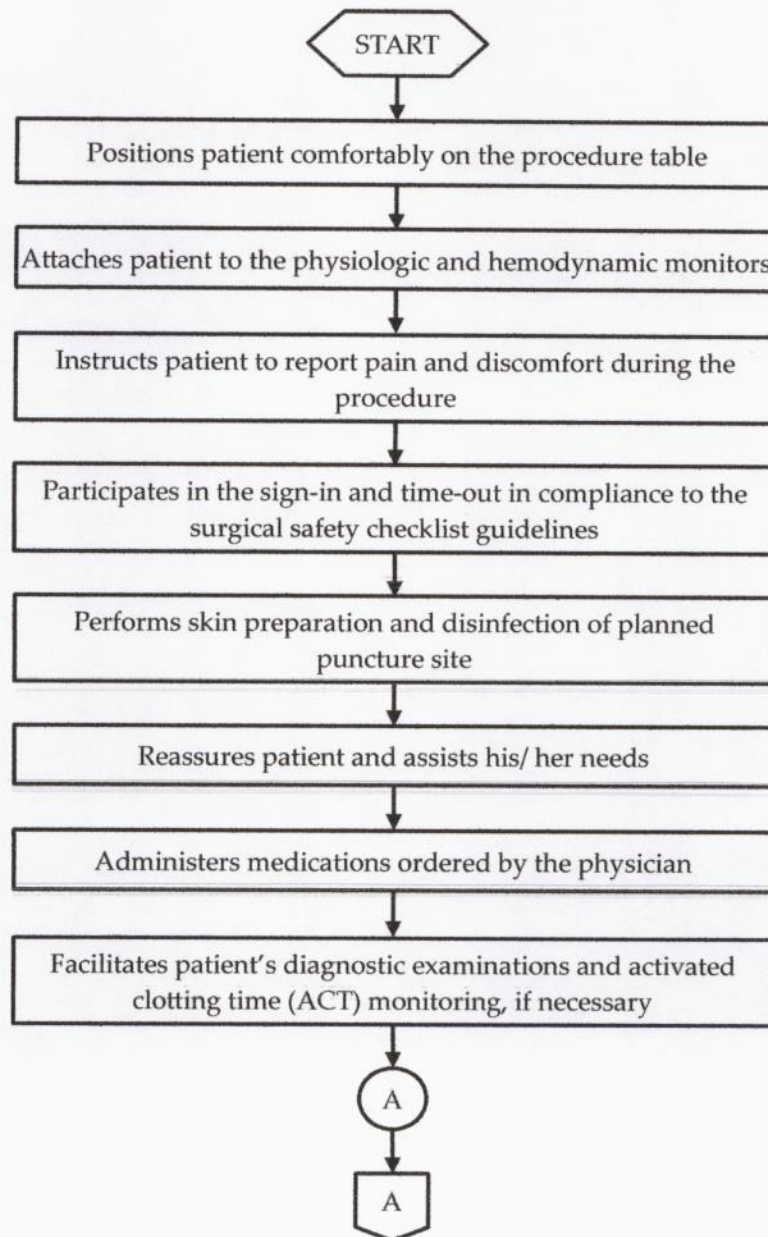


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FLOWCHART:

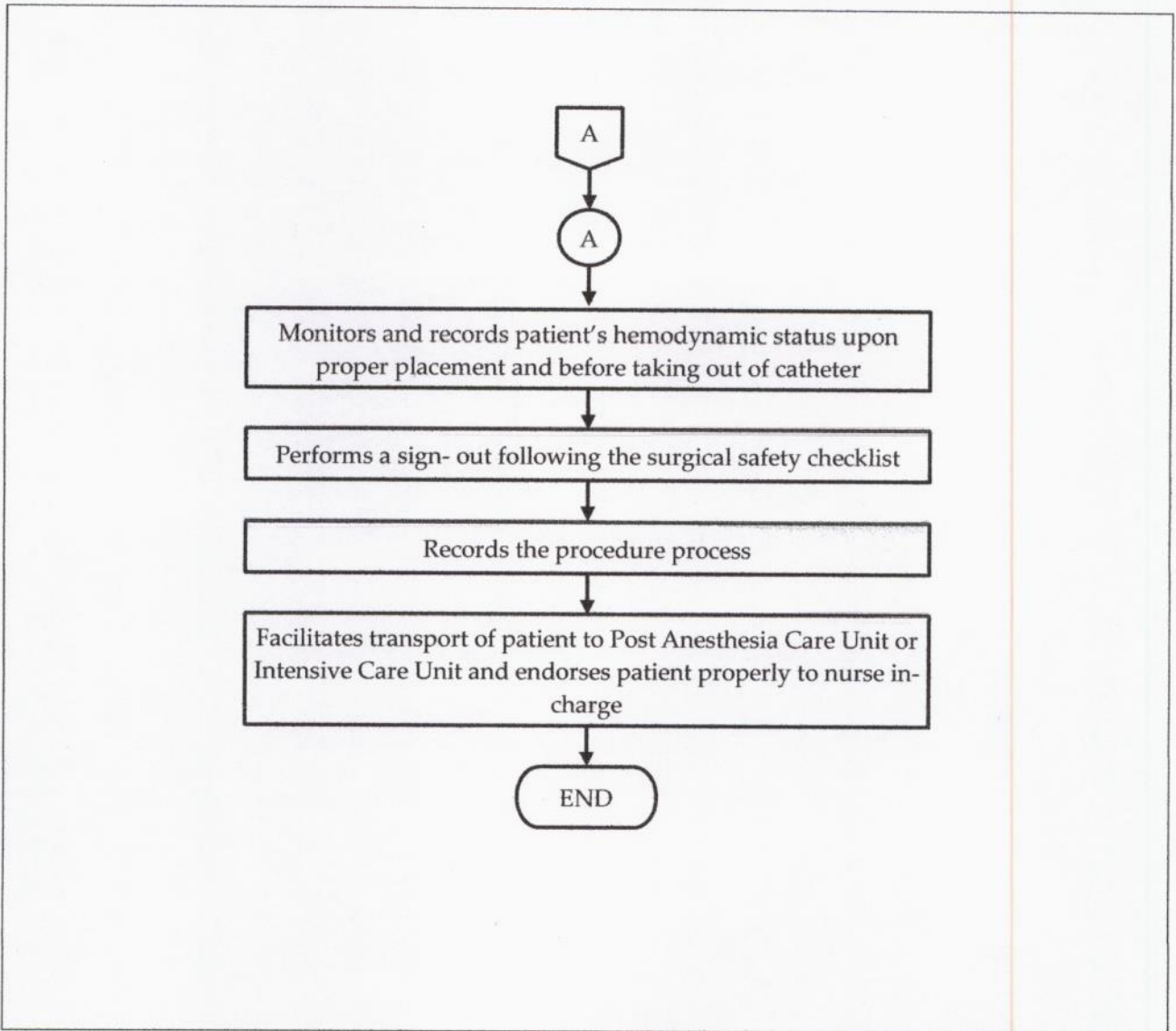





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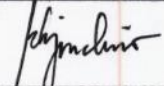
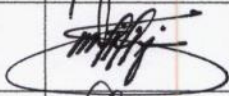
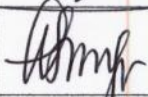
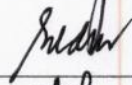


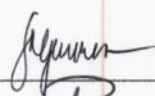

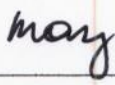
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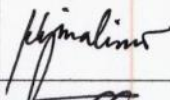
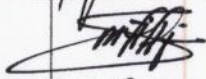
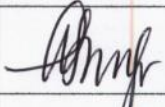
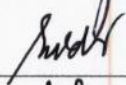


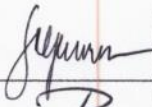

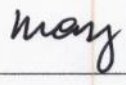
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KEY TASKS	PERSON RESPONSIBLE
1. Positions patient comfortably on the procedure table	Receiving Nurse and Circulator
2. Attaches patient to the physiologic and hemodynamic monitors	Receiving Nurse
3. Instructs patient to report pain and discomfort during the procedure	
4. Participates in the sign-in and time-out in compliance to the surgical safety checklist guidelines	Members of the Catheterization Team
5. Performs skin preparation and disinfection of planned puncture site	Receiving Nurse
6. Reassures patient and assists his/ her needs	
7. Administers medications ordered by the physician	
8. Facilitates patient's diagnostic examinations and activated clotting time (ACT) monitoring, if necessary	Cardiovascular Medical Technologist
9. Monitors and records patient's hemodynamic status upon proper placement and before taking out of catheter	
10. Performs a sign-out following the surgical safety checklist	Members of the Catheterization Team
11. Records the procedure process	Receiving Nurse
12. Facilitates transport of patient to Post Anesthesia Care Unit or Intensive Care Unit and endorses patient properly to nurse in- charge	

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