Imaging Department
Body Angiography

Having an angiogram – a guide for inpatients and outpatients

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Questions:

What is an angiogram?

An angiogram is a procedure where x-rays are used to examine arteries.

Normally arteries do not show up on ordinary x-rays and a special dye, called contrast medium, is injected into the artery through a fine plastic tube called a catheter.

X-rays are taken during the injection and detailed images of the arteries are obtained.

Why do I need an angiogram?

There are a number of reasons why you may require an angiogram; you may have a problem with your circulation or another condition that affects the blood supply to certain organs e.g. kidneys or bowel.

Who has made the decision?

The consultant in charge of your case and the radiologist doing the angiogram will have discussed the situation, and feel that this is the best way of obtaining information about your condition.

However, you will also have the opportunity for your opinion to be taken into account, and if, after discussion with your doctors, you do not want the procedure carried out, you can decide against it.
What happens before the procedure?
Please eat and drink as normal.

When you arrive in the department you will be asked to change into a hospital gown.

If you have any allergies you must let your doctor know.

If you have previously reacted to intravenous contrast medium (the dye used for kidney x-rays and CT scans), you must also tell your doctor about this.

Who will be doing the angiogram?
A specially trained doctor called an interventional radiologist will be doing your angiogram.

Radiologists have special expertise in using x-ray equipment and in interpreting the images produced.

They will look at these images while carrying out the procedure.

The radiologist will be assisted by a radiographer and a nurse.

What actually happens during an angiogram?
You will lie on the x-ray table, generally flat on your back.

You will have a monitoring device attached to your finger, and will have a blood pressure cuff placed around your arm.

The radiologist and nurse will wear sterile theatre gowns and operating gloves.

The skin near the point of insertion, usually the groin, will be cleaned with antiseptic, and then the rest of your body will be covered with a sterile drape.

The skin and deeper tissues over the blood vessel will be anaesthetised with local anaesthetic.

A needle will then be inserted into the blood vessel.

This is followed by insertion of a guide wire into the blood vessel.

The needle is then removed and replaced by a fine plastic tube called a catheter.

The radiologist uses the x-ray equipment to make sure that the catheter and the wire are moved into the right position.

The radiologist will inject contrast medium down the catheter to assess the blood vessels.

When they are satisfied that all the images have been obtained the catheter is removed.

The radiologist will then press firmly on the skin entry point for several minutes to prevent any bleeding.
Will it hurt?
Some discomfort may be felt in the skin and deeper tissues during injection of the local anaesthetic.

As the contrast medium passes through your arteries you may feel a warm sensation.

There will be a nurse, or another member of clinical staff, in the room looking after you.
If the procedure does become uncomfortable please let a member of staff know.

How long will it take?
Every patient's situation is different, and it is not always easy to predict how complex or how straightforward the procedure will be.

Generally, the procedure will last approximately 30 minutes to an hour.

As a guide most procedures can be performed as a daycase and following the angiogram you will be observed in the x-ray department for approximately two hours before going home.

Some procedures require an overnight stay (we will inform you prior to your appointment if this is the case) and you will be observed in the x-ray department for around two hours before going to the ward.

Are there any risks or complications?
An angiogram is a safe procedure, but there are some risks and complications that can arise.

There may be a small bruise around the site where the needle has been inserted, which will generally resolve.

If this becomes a large bruise, then there may be a risk of it getting infected. This would require treatment with antibiotics.

Very rarely damage can be caused to the artery by the catheter. This may need to be treated by surgery or another radiological procedure.

Your clinical team will discuss the results of your angiogram with you.

This document has been adapted from one prepared by the Clinical Radiology Patients' Liaison Group (CRPLG) of The Royal College of Radiologists and the British Society of Interventional Radiology (BSIR).

Privacy & dignity
Same sex bays and bathrooms are offered in all wards except critical care and theatre recovery areas where the use of high-tech equipment and/or specialist one to one care is required.
We are a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

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