Right Heart Catheter (Femoral Vein Approach)

Family Name: Given Names: Address:

URN:

Date of Birth:

Facility: .....

Sex: ☐ M ☐ F

A. INTERPRETER / CULTURAL NEEDS

An Interpreter Service is required? Yes No

B. CONDITION AND TREATMENT

The doctor has explained that you have the following condition:

.....

This condition requires the following procedure.

.....

The following will be performed:

You will be given an injection of local anaesthetic under the skin. A fine tube (catheter) is put into the vein in the groin. You may feel pressure in your leg while the tube is placed in the vein. It is carefully passed along until it reaches the heart and then goes up into the blood vessels of the lungs. This is usually painless. The doctor uses x-ray imaging to see the catheter.

At the end of the procedure, the catheter is removed.

C. RISKS OF A RIGHT HEART CATHETER

In recommending this procedure your doctor has balanced the benefits and risks of the procedure against the benefits and risks of not proceeding. Your doctor believes there is a net benefit to you going ahead. This is a very complicated assessment.

The risks/complications of this procedure are;

Common risks (more than 5%) include;

- Minor bleeding and bruising at the puncture site.
- Abnormal heart beat lasting several seconds, which settles by itself.

Uncommon risks (1- 5%) include;

- Unable to get the catheter into the leg vein. The procedure may be changed to the opposite leg or to a different approach eg the neck or an arm vein.
- Abnormal heart rhythm that continues for a long time. This may need an electric shock to correct.
- The femoral artery (in the groin) is accidentally punctured. This usually just requires pressure on the artery. However, rarely this may require surgery to repair.

Rare risks (less than 1%) include;

- Infection. This will need antibiotics.
- Allergic reaction to the local anaesthetic. This may require medication to treat.
- Embolism. A blood clot may form and break off from the catheter. This is treated with blood thinning medication.
- Clots in the leg (deep vein thrombosis or DVT) with pain and swelling. Rarely part of this clot may break off and go into the lungs.
- Damage to the vein in the leg. This may need surgery to repair.
- Damage to the lung blood vessel causing bleeding. This may need surgery to repair.
- Air embolism. Oxygen may be given.
- A hole is accidentally made in the heart or the heart valve. This will need surgery to repair.
- Unable to position the balloon catheter into the lung vessels or around the heart. The procedure would be cancelled if this occurred. This is more common if there are congenital malformations of the heart.
- Damage to the nerve in the leg.
- A stroke. This may cause long term disability.
- Death as a result of this procedure is extremely rare.

D. SIGNIFICANT RISKS AND TREATMENTOPTIONS

E. RISKS OF NOT HAVING A RIGHT HEART CATHETER

Continues over page ▸ ▸ ▸

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F. ANAESTHETIC

This procedure may require an anaesthetic.

G. PATIENT CONSENT

I acknowledge that the doctor has explained;

- my medical condition and the proposed procedure, including additional treatment if the doctor finds something unexpected. I understand the risks, including the risks that are specific to me.
- the anaesthetic required for this procedure. I understand the risks, including the risks that are specific to me.
- other relevant procedure options and their associated risks.
- my prognosis and the risks of not having the procedure.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- the procedure may include a blood transfusion.
- tissues and blood may be removed and could be used for diagnosis or management of my condition, stored and disposed of sensitively by the hospital.
- if immediate life-threatening events happen during the procedure, they will be treated accordingly.
- If I am a public patient a doctor other than my Cardiologist may conduct the procedure. I understand this could be a doctor undergoing further training.

I have been given the following Patient Information Sheets;

Local Anaesthetic and Sedation for your procedure

Right Heart Catheter (Femoral Vein Approach)

- I was able to ask questions and raise concerns with the doctor about my condition, the proposed procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time before the procedure, including after I have signed this form but, preferably following a discussion with my doctor.

On the basis of the above statements,

I REQUEST TO HAVE THE RIGHT HEART CATHETER

Name of Patient/ Substitute decision maker and relationship : .....

Signature : .....

Date: .....

Substitute Decision-Maker: Under the *Powers of Attorney Act 1998 and/or the Guardianship and Administration Act 2000.* If the patient is an adult and unable to give consent, an authorised decision-maker must give consent on the patient's behalf.

H. DOCTOR'S STATEMENT

I acknowledge that I have explained to the patient all the above points under the Patient Consent section (G) and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor: .....

Des ignati on : Cardiologist

Signature : .....

D a t e : .....

J. INTERPRETER'S STATEMENT

I have given a sight translation in

.....

of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Name of Interpreter : .....

Signature : .....

D a t e : .....

Consent Information - Patient Copy
Right Heart Catheter (Femoral Vein Approach)

1. WHAT IS A RIGHT HEART CATHETER?

This is a procedure where catheters are passed into the arteries and veins of the heart. Heart and Lung pressures are monitored and blood samples are taken from within the heart.

You will have the following procedure:

A needle with a tube connected to it will be put in your arm. This is called an intravenous line or IV.

A fine tube (catheter) is put into the vein in the groin. You may feel pressure in your leg while the tube is placed in the vein. It is carefully passed along until it reaches the heart and then goes up into the blood vessels of the lungs. This is usually painless. The doctor uses x-ray imaging to see the catheter.

Pressures in the lungs and heart are recorded. A sample of blood is taken to look at the oxygen level.

At the end of the procedure, the catheter is removed.

2. MY ANAESTHETIC

This procedure will require an anaesthetic.

See **Local Anaesthetic and Sedation for your procedure information sheet** for information about the anaesthetic and the risks involved. If you have any concerns, talk these over with your doctor.

If you have not been given an information sheet, please ask for one.

3. WHAT ARE THE RISKS OF THIS SPECIFIC PROCEDURE?

In recommending this procedure your doctor has balanced the benefits and risks of the procedure against the benefits and risks of not proceeding. Your doctor believes there is a net benefit to you going ahead. This is a very complicated assessment.

The risks/complications of this procedure are;

Common risks (more than 5%) include;

- Minor bleeding and bruising at the puncture site.
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Uncommon risks (1- 5%) include;

- Unable to get the catheter into the leg vein. The procedure may be changed to the opposite leg or to a different approach eg the neck or an arm vein.
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- The femoral artery (in the groin) is accidentally punctured. This usually just requires pressure on the artery. However, rarely this may require surgery to repair.

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- Damage to the vein in the leg. This may need surgery to repair.
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- Air embolism. Oxygen may be given.
- A hole is accidentally made in the heart or the heart valve. This will need surgery to repair.
- Unable to position the balloon catheter into the lung vessels or around the heart. The procedure would be cancelled if this occurred. This is more common if there are congenital malformations of the heart.
- Damage to the nerve in the leg.
- A stroke. This may cause long term disability.
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NOTES TO TALK TO MY DOCTOR ABOUT