

Left Atrial Appendage Device Implantation

Procedure Considerations

- Coordinate with echocardiogram team providing trans esophageal echocardiogram (TEE) support on timing of procedure.
- Coordinate with anesthesia team in regards to assessment, line initiation, and timing of procedure.
- Coordinate with the proper recovery area (TG: CICU) to ensure availability of bed post procedure.
- Confirm group and screen, blood confirmation, and blood on demand for patient pre procedure.
- Has the patient received IV antibiotics?
- Has heparin been given post septal puncture, target ACT greater than 250?

Equipment

- Table: Standard procedural table set up, extra sterile equipment table
- Sheath: Venous- 7Fr 12cm sheath for femoral vein access
Arterial- Confirm radial or femoral access and size
- Closure Device: 2 X Perclose AT
- Multiple Transducers: 2 (simultaneous pressures)
- Wires: Standard 0.35 x 145cm J wire, Amplatz Extra Stiff Exchange Wire 0.35mm X 260cm
- Trans-Septal Equipment: Trans-septal Needle BRK 71cm, Protrack Pigtail Wire (INOUE), Mustang Balloon (confirm size & length with physician), Trans-septal SRO Guide Sheath
- Catheters: 7Fr Balloon Wedge Catheter (RHC), for left heart consult with team on catheters and size, 8.5 Fr Agilis NXT Steerable Introducer, Gensini or Goodale Lubin???? , 5Fr Marker Pigtail
- Delivery System: Amplatzer Delivery System (12Fr or 14Fr)
- Left Atrial Appendage Occluder Device: Interventionalist will confirm size and type of device