

Aortic Coarctation Stent Procedure

Procedure Considerations

- Confirm group and screen, blood confirmation, and blood on demand for patient pre procedure.
- Coordinate with anesthesia team in regards to assessment, line initiation, and timing of procedure.
- Has the patient received IV antibiotics?
- Patient greater than 40 years of age, consider left heart cath.
- Has heparin been given post cannulation, target ACT greater than 250?
- Be prepared to hemodynamically capture multiple areas & regions of aorta with gradients.

Equipment

- Table: Standard procedural table set up, extra sterile equipment table open
- Sheath: Arterial- Radial (confirm size with physician)
Femoral 8Fr with perclose x 2 in place initially, confirm size of Mullins sheath required for delivery system and stent deployment after coarctation measurement and sizing
- Closure Device: 2 X Perclose AT, TR Band
- Multiple Transducers: 2 (simultaneous pressures/ gradients)
- Wires: Standard 0.35mm x 145cm J wire, Amplatz Extra Stiff Exchange Wire 0.35mm x 260cm
- Catheters: 5Fr Marker Pigtail, 8Fr Gensini catheter, if left heart required consult with team on catheters and size