

MitraClip Insertion

Procedure Considerations

- Coordinate with echocardiogram team providing trans esophageal echocardiogram (TEE) support & MitraClip proctor/ representative on timing of procedure.
- Coordinate with anesthesia team in regards to assessment, line initiation, timing of procedure, & confirm proper recovery area bed available (TGH-CICU) post procedure.
- Confirm group and screen, blood confirmation, and blood on demand for procedure.
- Properly position stool and plastic shield under lower extremity to be used for clip deployment, ensure to use foam padding to prevent skin breakdown.
- Has the patient received IV antibiotics?
- Has heparin been administered post septal puncture, target ACT greater than 250?

Equipment

Table

- Standard procedural table set up, extra extended sterile equipment table open

Surgical Tools (Sterile)

- Scissors (Mayo)
- Needle Drivers x 2
- Pickups x 2
- Mosquitoes x 2

Sutures

- 0 (Zero) Silk on a curved needle x 3
- Red safety sharps container

Sheath / Access

- Venous- 8Fr 12cm sheath for femoral vein access
- Arterial- LHC required- confirm radial or femoral access and size

Closure Device

- 2 X Perclose AT

Wires

- Standard 0.35mm x 145cm J wire
- Amplatz Extra Stiff Exchange Wire 0.35mmX260cm

Septal Puncture Equipment

- Trans-septal Needle-BRK 71cm
- Protrack Pigtail Wire (INOUE)
- Mustang Balloon (confirm size & length with interventionalist)
- Trans-septal SRO Guide Sheath

Catheters

- 7Fr Balloon Wedge Catheter for right heart exam
- LHC required- consult with interventional team on catheters and size

MitraClip Equipment: Delivery System & Device

- MitraClip Steerable Guide Catheter
- MitraClip NT Delivery System