

PROTOCOL FOR: Angioseal/Vasoseal Closure Device Post-Placement Patient Care

DESIRED PATIENT

- OUTCOME:
1. Patient will have no groin site complications post Angioseal insertion.
 2. Angioseal closure will allow for earlier ambulation and reduced LOS post-cardiac catheterization and/or intervention.

CLINICAL
ASSESSMENT

AND CARE:

1. Evaluate puncture site, vital signs and distal pulses per post-cardiac catheterization and/or cardiac intervention protocol.
2. Assess femoral area Angioseal insertion site for bleeding, hematoma, etc.
3. Assess circulation, sensation, motion and pulse to both feet per post-cardiac intervention protocol.
4. Angioseal site may be palpated as required, using minimal fingertip pressure. A small pea-size lump may be felt.
5. After the procedure, patients may drink when they are fully reactive.
6. The patient is to be in bedrest with the affected limb straight for:
 - 2 hours post-diagnostic procedure and/or per MD orders.
 - 3 hours post-cardiac intervention utilizing Heparin, Angiomax, ReoPro or Integrilin per MD orders.
7. After the above is completed, the patient may sit up at a 45 degree angle for 30 minutes. At this point, solid food may be offered to the patient.
8. If bleeding occurs:
 - a. Apply light digital pressure to puncture site.
 - b. Manual pressure, or pressure bandage may be used if additional compression is necessary.
 - c. Femostop compression device may be applied per protocol for persistent oozing.
 - d. Notify MD and/or APRN for bleeding/hematoma formation at site. Mark time and site at hematoma. Increase frequency of assessment to every 15 minutes if hematoma is present.
 - e. Note if puncture site dressing needs to be changed. Do not apply antibiotic ointment to site. Dress with dry sterile 2x2 and transparent dressing and/or tape.

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9. Do not apply additional compression on a routine basis.
10. Patient Activity and Discharge: follow post-catheterization or post PTCA Orders.

- PATIENT TEACHING:
1. Instruct patient to contact physician regarding the following unexpected events post-discharge:
 - Persistent tenderness in the groin area
 - Bleeding
 - Swelling
 - Wound drainage
 - Numbness and/or tingling in leg
 - Fever
 - Redness and/or warmth at puncture site
 - Bruising at puncture site or any other unusual observations
 2. Review with patient "expected" findings.
 - a. Possible pea size lump in groin.
 - b. Mild tenderness to touch at the puncture site.
 3. Prior to discharge, instruct patient that it is extremely important that:
 - a. Re-puncture of the artery in the same area is not recommended for 90 days. The patient and/or family must inform the doctor they have received an Angioseal device and provide the doctor with the Patient Information Card. Information Card may be disregarded after 90 days.
 - b. Patient should be instructed to inform their physician if any difficulties arise after discharge.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 10/99

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