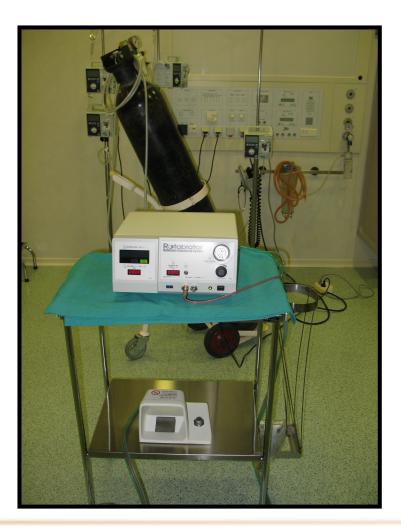
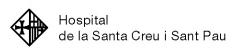
### **Pre-procedure**

- Cheking nitrogen level in gas bottle (min. **100 psi**. Work pressure between **6 and 8 psi**).
- Pressured Serum flash with (NTG,verapamil)
- Console connected and pedal ready to use





# **Pre-procedure**

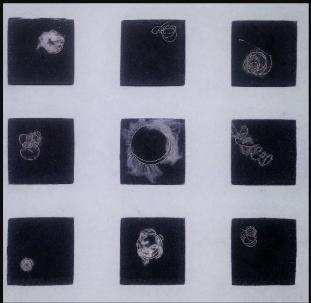
Complications kit devices •Pericardial punture kit

- Embolization particles
- Stents grafts









### **Patient Preparation**

Fasting **Check Allergies** Accomodation in bed Monitorisation Check permeability peripheral venous line 2nd peripheral access urinary issues O<sup>2</sup> Administration Procedure Information: Noises, Ask the patient to cough.... Sedation/analgesia Administration



### **During the procedure**

### Sterile nurse's area:

Responsible for assembling and checking material integrity.

Preparation, flush and connection ready to be used.

Assure burr refrigeration (flush during the runs)

Cooperation and support the interventional cardiologist.

#### It is important to keep the surgical table tidy



# **During the procedure**

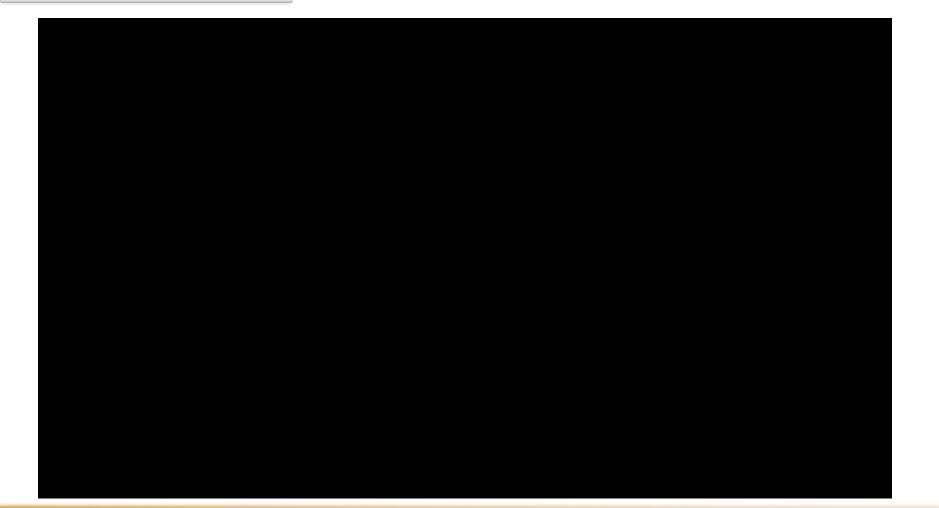
### Circulating Nurse

- Taking care to the patient:
  - Information about noises in the CathLab, It's posible to make him/her in case of bradycardia
  - ACT controls every 30 min.
  - Drug Administration (analgesia, heparin s/ACT controls...)
- Support to the surgical team:
  - Assure console connections.
  - Control RPMs.
  - Notify the interventional cardiologist the runs duration

#### During the runs, a 2nd nurse is needed to check for EKG changes and pacemaker activation









# ¡Keep in mind!

- Pressure damping
- Injection pump can be blocked due high pressure in the system
- To flush periodically through the advancer.
- RPMs knub sensitivity.
- To alert in case of significant RPM drop.

