

PATIENT INFORMATION LEAFLET

Computerised tomography (CT) Coronary Angiography

Information

What is a CT Coronary Angiogram (CTCA)?

A CT Coronary Angiogram, also known as Coronary Artery CT, is a non-invasive procedure that acquires images of the coronary arteries (the blood vessels that supply blood to the heart). The scan involves lying on a CT table for approximately 20 minutes. The images are acquired as the table moves back and forth through a 'donut-shaped' machine.

Preparing for your CT Coronary Angiogram:

- Fasting is not required for this scan, however, please refrain from having a big meal at least 4 hours prior to your scan.
- From midnight prior to your scan please avoid smoking, any caffeinated drinks, chocolate or medication that contains caffeine.
- Do not take any exercise or physical activity that will raise your heartrate in the 4 hours prior to your scan.
- Please try to avoid driving or cycling and have someone accompany you to and from your appointment.
- You may take your prescribed medications as usual, however please avoid taking Viagra, Cialis or Levitra for 24 hours prior to your scan.

On arrival in the CT Department:

On arrival, you will be checked in by the reception team. You will be asked to change into a hospital gown. A cannula (needle) will be inserted into a vein in your arm. This will be used to inject you with IV contrast (x-ray dye) during the scan. Your heartrate and blood pressure will be checked. If your heartrate is faster than the ideal rate for this scan, you will be given medication (betablocker) to slow it down. This medication is given in the form of a tablet and can take up to 1 hour to take effect.

During the scan:

You will lie on the CT table, and you will be connected to an IV contrast injector. ECG electrodes will be placed on your chest. These electrodes will monitor your heartrate during the scan. You will be required to hold your breath a few times during the scan. You will also be given a sublingual spray of GTN (Glyceryl Trinitrate). This allows for the dilatation of the coronary arteries making it easier to assess them on the scan. The spray may cause a slight headache, but it should pass after a short time.



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How long will it take?

You will be on the scanning table for approximately 20 minutes, however, with check-in, preparation and changing, you will be in the department for approximately 2 to 3 hours.

On completion:

You may be required to stay in the Radiology Department for approximately 30 minutes after the scan.

Pregnancy:

This scan should not be performed during pregnancy except in select circumstances. For women of childbearing age (ages 12 - 55 inclusive), this must be carried out within the first 28 days of your menstrual cycle. If this appointment does not fall within the first 28 days of your period, please contact us.

Ionising radiation considerations:

During a CT scan you will be exposed to ionising radiation for the purpose of medical diagnosis. Information on risks/benefits of medical radiation is available from the radiology department. The risk associated with medical imaging procedures refers to possible long-term or short-term side effects. Diagnostic imaging procedures have a relatively low risk. Every effort is made to decrease radiation doses.

Procedure	Approximate effective radiation dose	Comparable to natural background radiation for:
CT Scan	2- 10 mSv	6 months -3 years

Medical Radiation: Risks Versus Benefits

We are all exposed to natural background radiation every day. Medical x-rays contribute a small additional dose on top of natural background radiation. There is no conclusive evidence of radiation causing harm at the levels patients receive from diagnostic x-ray exams.

The amount of radiation received during coronary Computerised tomography (CT) approximates routine body Computerised tomography (CT) or invasive coronary angiogram.

At all times we endeavour to keep patient radiation dose as low as possible and to perform only tests that are medically justified. As with any x-ray test the benefits of detection, diagnosis and treatment resulting from the examination should outweigh any potential risk.

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Page 2 of 2 Ed No: 004 Effective Date: 27/07/2020 Review Date: 27/07/2023