

## Cardiac Biopsy patient information

### Cardiac Biopsy

A cardiac biopsy is a procedure in which small samples from the heart are taken to be studied under the microscope. The medical team can discover rejection in heart transplant recipients and diagnose a number of heart diseases in other patients.

### Why do I need a Cardiac Biopsy?

For people who receive a heart transplant the cardiac biopsy is needed to check for rejection. Over the course of the first year you will need at least 13 biopsies.

In the first month this is one every week after which the time increments between the biopsies increase until the last one 9 months after the transplant. After this Cardiac Biopsies are only done when you feel unwell or when the levels of the anti-rejection medication are off.

For other people a cardiac biopsy might be necessary to diagnose the heart condition that they have.

### How do I prepare for my Cardiac Biopsy?

No fasting is required and you should take your medications as normal unless instructed otherwise by your doctor.

Arrive at the Heart Lung clinic, level 4 Xavier building, 30 minutes before your appointment.

Staff here will arrange for you to see a clinic nurse prior to the procedure. If you are an inpatient transport will be arranged to the procedure room.

If possible, come with a family member or friend who can accompany you home after the procedure. Wear loose comfortable clothing.

### What should I do if I take Warfarin?

If you take warfarin you will need a recent INR level when you come to your appointment (no older than 3 days). The nurse may repeat the INR again depending on the level and your dose of warfarin.

### Just prior to the procedure

The Cardiac Biopsy is normally performed under local anaesthetic only. If you feel very anxious before the procedure, inform one of the nurses about this so they can take appropriate action to reduce this.

Nearly everyone you meet will ask you your name and date of birth for identification purposes.

### During the procedure

The doctor will explain the procedure; the possible complications that are involve with it and ask you to sign a consent form if you have not already done so.

You will be asked to remove clothing from above the waist and put on a hospital gown. You will need to lie flat throughout the procedure. Let the nurse know if you have back or breathing problems that may make this difficult for you.

The procedure is done under local anaesthetic and you should not experience much discomfort apart from the initial injection. If you do experience discomfort and are worried about anything you can let the nurse and doctor know so that they can help alleviate the problem.

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Local Anaesthetic is injected under the skin near the neck vein using a fine needle. A small plastic tube with a one way valve is put into the vein.

With a special device called a biptome (a long wire with a grasping tip) small samples of 1 – 2mm in diameter of the heart wall. A total of 5 of these samples are needed to send to the laboratory for analysis.

### **After the procedure**

When all the samples are collected the doctor will take out the plastic tube out of the vein and apply pressure to the site to prevent bleeding.

You will then be asked to apply light pressure to the puncture site for a further 10 minutes. When finished you will return to the Heart Lung Clinic where you will be seen by either a doctor or nurse before you go home.

Avoid heavy lifting for 24 hours. Support the puncture site when coughing; sneezing, laughing, straining or bending over because this increases the pressure in the vein and can cause it to bleed a little.

If you experience swelling, increased pain or bleeding in your neck after you leave, you should apply pressure and seek assistance from your local doctor or emergency department.

### **What are the risks of the procedure?**

There are risks associated with this procedure; these are listed below for your information. The doctor will go through the risks with you again before you sign the consent and provide more information if required.

#### **Common**

- Minor bleeding and bruising at the puncture site.
- Abnormal Heart beat lasting several seconds that settles by it self

#### **Uncommon**

- Difficulty passing the catheter into the neck vein.
- Local Anaesthetic around your voice box may cause temporary loss of voice - this wears off quickly.
- Abnormal Heart Rhythm that continues for a longer time and may need to be corrected.
- Punctured artery in the neck that may cause extensive bruising or bleeding and require repair.

#### **RARE**

- Infection
- Allergic reaction
- Air embolism
- Puncture of the wall of the heart
- Collapsed lung
- Stroke
- Death (extremely rare)

If you experience dizziness and /or pain during breathing after leaving the procedure room you should seek assistance from the heart lung clinic or your local emergency department.

- With any concerns or questions you can contact the Heart and Lung Clinic of St. Vincent's hospital at (02) 8382 3150.

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**Acknowledgements:**

References

Related Policies/Procedures

**Further information:**

e.g. phone numbers / email / website

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