

## Cardiology

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### Information and patient consent form

#### Right heart catheterisation

Dear patient,

Based on your symptoms and the previous findings of medical examinations, a right heart catheterization must be additionally performed.

In a right heart catheterization, the right part of the heart and pulmonary circulation (small circulation) are examined. The examination is performed when there is a suspicion of pulmonary hypertension, a severe heart failure, severe cardiac valve disease or congenital heart defect.

#### Procedure of a right heart catheterization

With a thin catheter, which is advanced into the heart through a vein, pressure and oxygen content are determined in different areas of the right side of the heart and the pulmonary circulation. These values allow conclusions to be drawn about the nature and extent of possible cardiac or pulmonary disease. Depending on the problem, an additional measurement during exercise or after inhalation of a medication may be required. Your medications can be taken as usual. If you are taking blood thinning medications (marcoumar, sintrom), the blood thinning must be tested (Quick, INR) by the family doctor about 3 days before the examination, in order to ensure that the examination is performed under optimum conditions (INR 2.0-2.5). Blood thinning medications such as Xarelto, Pradaxa or Eliquis should be suspended on the examination day. The examination is carried out by performing a venipuncture in the right groin, right elbow or in the neck. After applying a local anesthesia, which may cause a brief burning sensation, the vein is punctured as when taking blood and the cardiac catheter is advanced through the veins into the right ventricle and the pulmonary artery, in order to perform the necessary measurements. At the end of the examination, the cardiac catheter is removed and a bandage is applied, which is usually replaced after 2-3 hours with a plaster. The examination, including preparation time, takes about 1 to 2 hours. After the examination is performed, you can eat and drink as usual. The ability to drive is not impaired.

#### Possible complications

As with every venipuncture, a bruise (hematoma) may occur at the injection site and, in rare cases, phlebitis or venous occlusion (thrombosis) may also occur. If the catheter is inserted via the jugular vein, there is a very low risk of pneumothorax. In this case, an inpatient admission for an additional 1-2 days is necessary.

The catheterization can lead to cardiac arrhythmias, which are felt as palpitations. In very rare cases, a therapy may be necessary. The medicinal products and devices that are then required are of course always available.

The procedure or examination is performed under X-ray radiation. Consequently there is a certain radiation exposure, that however is kept as low as possible. Based on general considerations, in case of pregnancy this kind of examination should only be performed in emergency cases.

**Please contact us,**

if you do not understand something or if something seems to be important that was not mentioned in this document or in the personal consultation with your doctor.

**Consent to data collection and transfer to the SwissCaRe National Quality Register**

I agree that personal data relating to my procedure and my medical history, including my surname, first name, gender and date of birth, may be collected for quality assurance and transmitted to the SwissCaRe National Quality Register. I have been informed of the scope and purpose of the data transmission by means of the patient information document on the SwissCaRe quality register, version 1/2022. Any questions were answered. I was explained that my decision whether or not to consent to the data transfer to the registry has no influence on my treatment. I know that I can revoke this consent at any time, without giving reasons.

- YES, I agree that my personal data will be transmitted to SwissCaRe
- NO, I do not want my personal data to be transmitted

**Declaration of consent**

Dr. med. ....

held an informed consent discussion with me. I have understood the information provided to me and could make all the pertinent questions. After sufficient time to think and answering of all my questions I hereby declare myself ready for the proposed therapy. I express my consent for any follow-up procedures that may become necessary.

Signature of patient: \_\_\_\_\_

Signature of doctor: \_\_\_\_\_

Place and date: \_\_\_\_\_