

Preparation for the procedure 檢查前準備：

- + Routine blood tests and an electrocardiogram (ECG) will be performed on the day of admission.
- + The catheter insertion area (usually an artery in your wrist or the groin area) will be shaved and disinfected.
- + An intravenous (IV) needle will be inserted to enable easy administration of medications during the procedure.
- + A mild sedative drug may be given at the discretion of your physician.
- + 在入院當天，醫護人員會為您安排常規檢查。
- + 護士會剃掉穿刺動脈部位附近的毛髮，並消毒該部位，以預防感染，一般為腹股溝或手腕部位。
- + 護士會按需要預先於前臂上放入靜脈注射器和導管，以便在檢查期間可能需要從靜脈輸入液體或藥物。
- + 如有需要，醫生會提供輕量鎮靜劑。

What Happens After the Procedure? 接受檢查後，有哪些地方要注意？

Nursing care following the procedure 檢查後的護理：

- + The catheter sheath will be removed and a compression device (such as a TRB) will be used stop the bleeding at the insertion site. Alternatively, the physician may apply pressure over the puncture site for 10 to 15 minutes, then apply a pressure dressing, which will remain on for about eight hours.
- + After returning to the ward, you must lie flat in bed for at least six hours. If a trans-femoral procedure was performed, you must keep your legs straight and avoid exerting any energy or getting out of bed unless otherwise instructed.
- + If you experience any numbness, pain, or excessive bleeding at the puncture site, please notify a nurse immediately.
- + The nurse will check your vital signs and the puncture site frequently.

- + You may eat and drink normally and are recommended to consume more fluids to flush the X-ray dye out of your system. Please keep the puncture site clean and dry at all times.
- + Avoid lifting heavy objects and strenuous exercise for one to two weeks after the procedure.
- + Seek immediate medical attention if there are signs of swelling, redness, or heat in the wound area.
- + 檢查完成後，醫生可能會利用TR-Band等於穿刺部位加壓，又或是直接按壓穿刺部位十至十五分鐘，以助止血，再貼上壓力敷料約八小時。
- + 回到病房後，請最少平躺休息六個小時，如大腿曾作穿刺，須保持伸直，且勿在沒有醫護人員指示下用力或起床。
- + 如發現紗布帶血、接受穿刺的部位感到麻痺或痛楚，請立即知會醫護人員。
- + 醫護人員會經常檢查病人的血壓、脈搏等生理數據，並請告訴他們穿刺部位的感覺。
- + 檢查後可以如常飲食，並請盡量多喝飲料，以助排出顯影劑。出院後可以如常洗澡，但請保持傷口清潔和乾爽。
- + 請勿在檢查後一至兩星期內提取重物或作劇烈運動。
- + 一旦發現傷口紅腫或發熱，應即時求診。



Map 路線圖



Hong Kong Adventist Hospital – Stubbs Road 香港港安醫院—司徒拔道

40 Stubbs Road, Hong Kong
香港司徒拔道40號
(852) 2835 0578
heartctr@hkah.org.hk



Service Information
服務詳情



Contact By Message
以短訊聯絡



Cardiac Catheterization and Interventional Center

心導管檢查及 介入治療中心

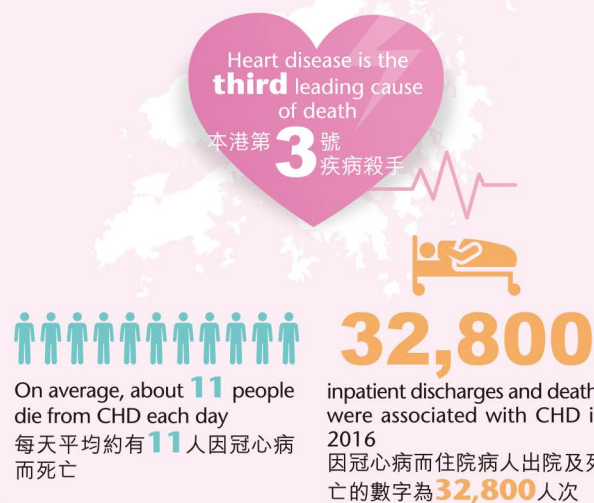


4 Coronary Heart Disease (CHD): the Silent Killer 冠狀動脈心臟病 (冠心病)：無聲殺手

Heart disease encompasses a wide range of conditions that affect the heart. Among the many different types of heart disease, CHD is the most common, though recent years have seen a gradual decline in the overall age-standardized CHD death rate.

心臟病泛指各類與心臟有關的疾病。當中又以冠狀動脈心臟病(冠心病)最為普遍，冠心病的總括年齡標準化死亡率近年亦有輕微下降的趨勢，大家要多加注意。

Situation in Hong Kong (based on statistics from 2016) 香港有關統計數據(跟據2016年資料)



4 Hybrid Cardiac Catheterization and Interventional Operating Room 混合心導管檢查及介入治療手術室

In 2018, Hong Kong Adventist Hospital - Stubbs Road's new Hybrid Cardiac Catheterization and Interventional Operating Room is equipped with a biplane imaging system that meets European operating room standards.

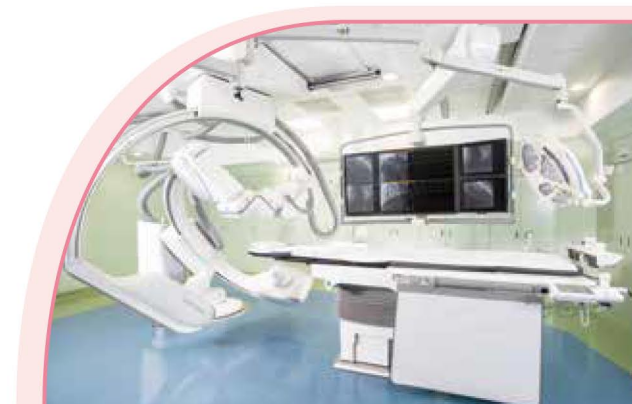
Highlights of the CCIC include:

- + Ability to serve diagnostic, interventional, and surgical functions, improving the **timeliness of treatment** and **minimizing surgical risk**.
- + **24-hour emergency coronary angioplasties** that cater to heart attack patients.
- + Coronary angioplasty aims to treat patients within the critical **"door-to-balloon time"** of 90 minutes or less, reducing risks of complications and death.
- + **Only private healthcare facility in Hong Kong to provide pediatric interventional cardiac treatment and pediatric cardiac surgery services.**

於2018年設置混合心導管檢查及介入治療手術室並配備**biplane 雙向造影系統**，提升至歐洲手術室水平。

特色與優點：

- + 診斷、介入治療及手術一室兼備，提供**及時性治療並降低手術風險**。
- + **24小時緊急「通波仔」服務**，搶救心肌梗塞患者。
- + **掌握黃金90分鐘**，由病人進入醫院至施行通波仔時間為90分鐘，減少併發症，降低死亡率。
- + 全港**唯一**私家醫院提供**兒科心臟介入治療及兒科心臟手術**。



Artis Q interventional imaging system provides high resolution images
先進的雙向造影系統Artis Q：提供更清晰影像

4 Diagnostic and Interventional Procedures 診斷及治療

Electrophysiology Study (EPS) 電生理檢查

- + Determines an individual's risk of developing arrhythmia.
- + Catheters are advanced into the heart chambers to study electrical signals in the heart.
- + 測試患心律失常的潛在風險。
- + 通過收集和分析心臟內的電流訊號，診斷病人是否患上心律失常。

Radiofrequency Ablation (RFA) 射頻消融術

- + A common therapy used to treat arrhythmia.
- + High frequency energy is used to ablate the pathway or tissue causing the abnormal rhythm via a catheter.
- + 心律失常患者經常使用的介入性治療方法。
- + 利用穿刺技術，直接發放高能量射頻消融致病的傍道管或過度活躍的心臟組織。

Implantation of a Permanent Pacemaker/ Implantable Cardioverter Defibrillator (ICD) 心臟起搏器/心臟去纖顫器植入術

- + Used to monitor the heart's electrical activity and restore a normal heart rhythm when necessary.
- + Generally implanted under the skin of the upper chest region.
- + 能監測心臟的電流活動，在有需要時輸出電流，協調心臟跳動。
- + 一般植入上胸部皮下

Coronary Angiography 心導管及冠狀動脈血管造影檢查

- + Recognized as the 'gold standard' for the diagnosis of CHD.
- + Provides an accurate assessment of the severity of stenosis in an artery.
- + 現時診斷心臟病的「黃金標準」。
- + 穿刺方式進行心血管造影。

Coronary Balloon Angioplasty 球囊冠狀動脈成形術 (俗稱「通波仔」)

- + A minimally invasive procedure that opens narrowed or blocked coronary arteries.
- + 微創透視介入治療，用以打通血管收窄或閉塞的冠狀動脈。



4 How Should I Prepare for Cardiac Catheterization and Coronary Angiography? 接受心導管及冠狀動脈血管造影檢查前，有哪些地方須注意？

You are requested to 在檢查前須知：

- + Inform your doctor in advance if you are taking any medication or if you have any allergies to iodine, seafood, X-ray dye, or specific medications.
- + Avoid eating and drinking for at least six to eight hours before the procedure.
- + Check in to the medical ward the day before, or on the day of the procedure.
- + Empty your bladder before proceeding to the CCIC.
- + 如果您正服用藥物，或有任何過敏(例如碘、海產、顯影劑、藥物等)，請盡早告知醫生。
- + 在檢查前六至八個小時內，請勿進食任何食物或飲料。
- + 在檢查當天或前一天入院。
- + 在前往心導管及介入治療中心前，請先排空膀胱。