

laboratory and a chronologic explanation of the procedure, emphasizing what they will see, feel, and hear. Older children and adolescents may bring earphones and favorite music so that they can listen to music during the catheterization procedure.

Preparation materials such as picture books, videotapes, or tours of the catheterization laboratory may be helpful. Preparation should be geared to the child's developmental level. The child's caregivers often benefit from the same explanations. Additional information, such as the expected length of the catheterization, description of the child's appearance after catheterization, and usual post-procedure care, should be outlined (also see the [Prepare the Child and Family for Invasive Procedures](#) section later in this chapter).

Methods of sedation vary among institutions and may include oral or intravenous (IV) medications (see [Chapter 20](#)). The child's age, heart defect, clinical status, and type of catheterization procedure planned are considered when sedation is determined. General anesthesia is needed for most interventional procedures. Children are allowed nothing by mouth (NPO) for 6 to 8 hours or more before the procedure. Infants and patients with polycythemia may need IV fluids to prevent dehydration and hypoglycemia.

Post-Procedural Care

Postcatheterization care may occur in a recovery unit, hospital room, or intensive care unit (ICU) depending on the patient's acuity and care needs. Some catheterizations may be done as outpatient procedures, but most patients having interventional procedures are observed overnight in the hospital. Patients are placed on a cardiac monitor and a pulse oximeter for the first few hours of recovery. The most important nursing responsibility is observation of the following for signs of complications:

- **Pulses**, especially below the catheterization site, for equality and symmetry (Pulse distal to the site may be weaker for the first few hours after catheterization but should gradually increase in strength.)
- **Temperature and color of the affected extremity** because coolness or blanching may indicate arterial obstruction
- **Vital signs**, which are taken as frequently as every 15 minutes, with special emphasis on heart rate, which is counted for 1 full