Review important aspects of **Cardiac Interventional/Cath Lab Tech technique**, such as
- Image intensifier close to patient to limit scatter radiation
- Before draping, establish IV access and ECG monitoring
- First step in preparing access site, use clippers to remove hair
- Obtuse marginal best seen in caudal views
- Right Anterior Oblique (RAO) common to view left ventricular function
- 3-port manifold, first port = pressure; port farthest from the patient = contrast
- Temporary pacer indicated during angioplasty with bundle branch block associated with a large dominant right coronary artery (RCA) occlusion

Review **commonly used equipment**, such as
- JL 5 catheter when aorta is dilated
- Advantage of pigtail catheter, high flow injections avoid walls of chamber and vessels
- Right heart catheterization, Swan Ganz
- Swan Ganz to obtain pulmonary artery (PA) and pulmonary capillary wedge (PCW) pressures
- Pigtail catheter in left heart procedure measures left ventricular (LV) function and end diastolic pressure (EDP)
- Advantage of rapid-exchange over over-the-wire angioplasty balloon, use of short guide wires
- Helium to inflate intraaortic balloon pump (IABP) balloon
- Intraaortic balloon pump (IABP) balloon inflation starts at the onset of diastole

Review principles of **infection prevention**, including
- Handwashing rather than alcohol-based disinfectant when patient has C. diff
- Use of femoral vein, risk for infection
- Sterile technique, a violation when unsterile person reaches over sterile field; open wrapped sterile item, opening last flap towards you

Review principles and content of **Communication/Patient Teaching**, including
- Importance of communication in patient satisfaction
- Explain IV medication prior to procedure to control pain and anxiety

Review **interpretation of signs and symptoms** commonly seen in the Cath Lab, such as
- MD will reposition catheter and re-engage when BP drops and waveform dampens while engaging the RCA
- Signs of aortic stenosis, LV pressure greater than aortic pressure when catheter is pulled back

Review principles of basic **safety**, including
- Patient identifiers, name and birthdate
- Time Out, verify site and patient
- Lab values to help avoid contrast-induced renal insufficiency, BUN and serum creatinine
Review the action of medications commonly used in the Cath Lab, such as
- Lidocaine to treat ventricular arrhythmias
- Nitroglycerin intracoronary to dilate vessels
- IV medication prior to procedure to control pain and anxiety

Review basic anatomy of the heart, including
- Left Anterior Descending (LAD) covers anterior wall and apex of heart