



# Endovascular Procedures

*Treatment for peripheral arterial disease*

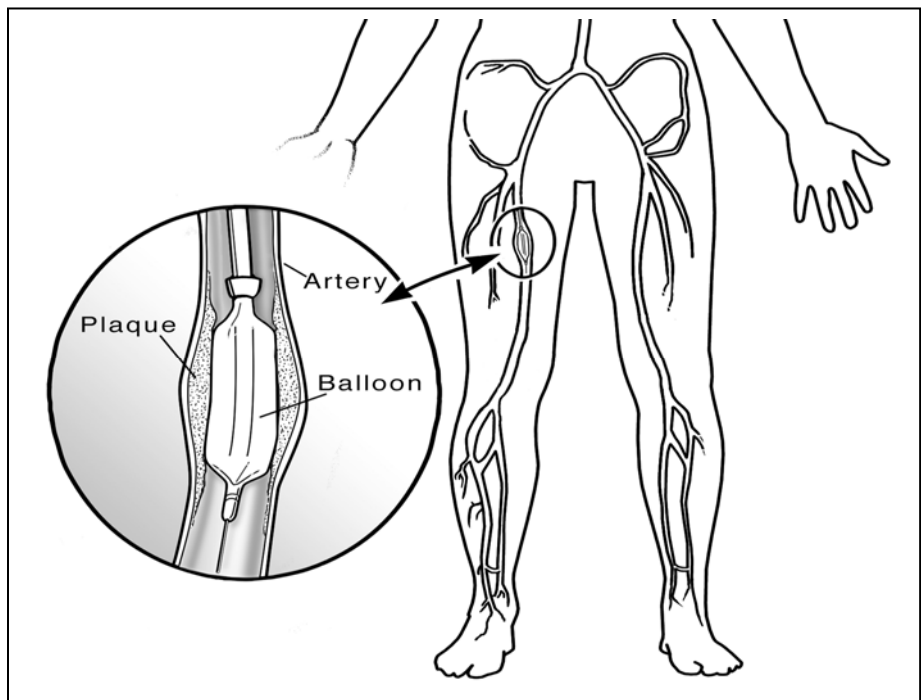
This handout explains **endovascular procedures that may be done to treat peripheral arterial disease (PAD)**. It includes possible **risks, self-care after the procedure, symptoms to watch for, and foot care.**

## What is an endovascular procedure?

*Endovascular* means “inside the blood vessel.” An endovascular procedure may be done to treat a short blockage of a severely narrowed artery. The procedure is done through a needle or small incision. These procedures include *balloon angioplasty* and *stents or stent grafts*.

## Balloon Angioplasty

In a balloon angioplasty, a small catheter with a balloon at one end is placed in the artery, closest to where the narrowing is. The balloon is then inflated. This flattens the *plaque* (fatty deposits) against the inner wall of the artery, making more room for your blood to flow. The balloon is then deflated and removed. Dye is injected into your artery to see if it has opened up enough.



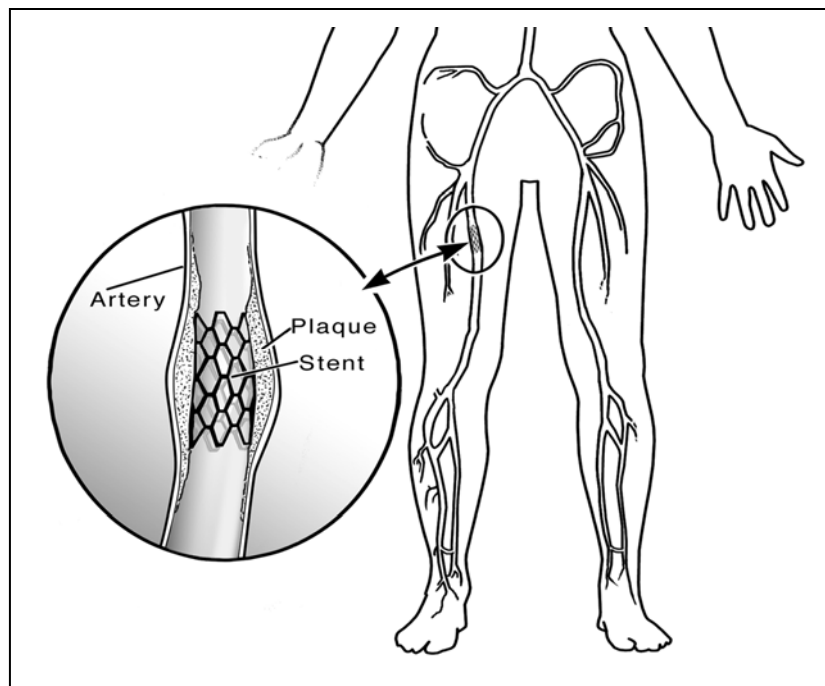
Balloon angioplasty

***Stent or Stent Graft***

A stent is a small wire mesh tube that is placed in a partially blocked artery. It holds your artery walls open, allowing blood to flow more freely. A stent graft is a wire mesh tube covered with synthetic (man-made) bypass graft material.

You may be given a blood thinner (Plavix, aspirin, or both) if you have a stent placed.

After your stent is placed, your dentist may prescribe antibiotics for you to take before having any dental work done.



Stent

**Possible Risks**

Before your surgery, your doctor will talk with you and your family about the risks and complications of the endovascular procedure. Some risks are:

- Bleeding or infection at the puncture site
- Damage to your arteries and veins
- Blood clots that could damage your feet or toes
- Heart or lung complications
- Kidney problems
- Peripheral nerve irritation
- Allergic reactions

## After Your Procedure

- Lie still. Do not bend your leg at the hip where the needle or incision was placed. You may be asked to lie flat and not to bend your leg for up to 6 hours.
- If you did not need an incision, your nurse or another health care provider will hold pressure over the needle puncture site after the catheter is removed.
- Your blood pressure and pulses will be checked often.
- Your needle puncture site or incision will be checked often to make sure you are not bleeding.
- You may receive *intravenous* (IV) fluids for several hours after your procedure.
- When you go home, drink plenty of fluids. This helps flush your kidneys of the dye that was injected during the procedure.

## Foot Care

Even though your blood flow has been improved, you must continue to take good care of your feet and toes:

- **Check your feet every day for areas of irritation.** Check between your toes for skin cracks and sores. Check for areas of redness, swelling, or drainage. Report these to your provider.
- **Do not soak your feet.** Soaking removes natural oils and dries the skin. Wash your feet with mild soap and lukewarm water.
- **Dry your feet well after washing, especially between your toes.**
- **Apply unscented cream or lotion to the dry skin on your legs and feet, but not between your toes.**
- **Trim your toenails even with the length of your toes.** Rough nail edges should be filed smooth. If you have impaired vision, or cannot reach your feet, ask a family member or friend to help you with this. If you have diabetes, a specialist should trim your nails.
- **Do not expose your feet to extreme heat or cold or to strong chemicals or disinfectants.**

## Questions?

Weekdays from 8 a.m. to 4 p.m., call the Surgical Specialties Nurse Advice Line at 206-598-4549.

After hours and on weekends and holidays, call 206-598-6190 and ask for the Vascular Surgery Resident on call to be paged.

Or, call your attending vascular surgeon,  
Dr. \_\_\_\_\_.

## When to Call Your Doctor

Call the doctor who did your procedure if you have:

- Swelling or bleeding from your puncture or incision site.
- A feeling of being lightheaded or dizzy.
- Chest pain or trouble breathing.
- Leg numbness or pain.
- A fever of 101°F (38.5°C) or higher. It is normal for your temperature to go up after surgery. But, if it goes higher than 101°F, call the Surgical Specialties Nurse Advice Line at 206-598-4549.
- Increased redness, pain, or drainage from the puncture or incision site.
- Symptoms that are like the ones you had before your procedure.

## Notes

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# UW Medicine

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