



Operative Report – Circulatory System

Indications: CAD with unstable angina

Procedure Performed: PTCA with stenting

Description of Procedure: The risks and alternatives of the procedures, and conscious sedation are explained to the patient and family, informed consent is obtained. The patient is brought to the cath lab and placed on the table. A "time out" occurs. Conscious sedation is administered and adequate conscious sedation monitoring is verified. The planned puncture sites are prepped and draped in the usual sterile fashion. Left heart catheterization, ventriculography, and selective coronary angiography, as a result of the findings a primary drug-eluting stent (DES) was placed in the mid Circumflex with balloon angioplasty under fluoroscopy.

Procedure Notes: Seldinger technique used from RFA access. 5FR sheath placed; good blood return and flushes well.

Catheters used: Catheters 5-French pigtail, JL4, JR4, catheter selected coronary angiograms done using low osmolar contrast material (LOCM).

Findings:

Hemodynamics

1. LV pressure 100/10—AO pressure 110/60—No significant gradient on aortic valve pullback.

Ventriculography

2. EF is 32%--No significant mitral regurgitation.

Selective Coronary Angiography:

1. The left main coronary artery is an average-sized vessel with no significant disease.
2. The left anterior descending coronary artery is 40% occluded in the mid-portion.
3. The left circumflex coronary artery is an average-sized vessel with 80% occluded in mid vessel, 2 obtuse marginal. The first obtuse marginal has a 30% stenosis.
4. The right coronary artery is a dominant vessel with one posterior descending and one small posterolateral branch. There are mild luminal irregularities.
5. The Ramus intermedius is a variant coronary artery resulting from trifurcation of the left main coronary artery with mild irregularities.

Comment: The PTCA balloon is advanced into the mid portion of the Circumflex artery past the lesion, placed under fluoro and inflated to 8 atmospheres, the balloon is removed and angiograms demonstrated fair results. Decision is made to stent the lesion - successfully advanced & placement of DES across the stenosis inflated to 12 atmospheres for 30 seconds. This results in no residual stenosis and TIMI-III flow distally.

Conclusion: Successful DES stent placement to the mid Circumflex.

ICD-10-CM code(s):

I25.110 – Atherosclerotic heart disease of native coronary artery, with unstable angina pectoris

ICD-10-PCS code(s) for Angioplasty/Stent and Cardiac Catheterization:

027034Z – Dilation, coronary artery, one artery, percutaneous, drug eluting intraluminal device
4A023N7 – Measurement, cardiac, percutaneous, sampling and pressure, left heart

B2151ZZ – Fluoroscopy, left heart, low osmolar contrast
B2111ZZ – Fluoroscopy, coronary arteries, multiple, low osmolar contrast

Rationale: Access site is through the right femoral artery (RFA) therefore was a left heart catheterization. Be advised, mentioning of the right coronary artery does not make this a combined right/left heart catheterization.