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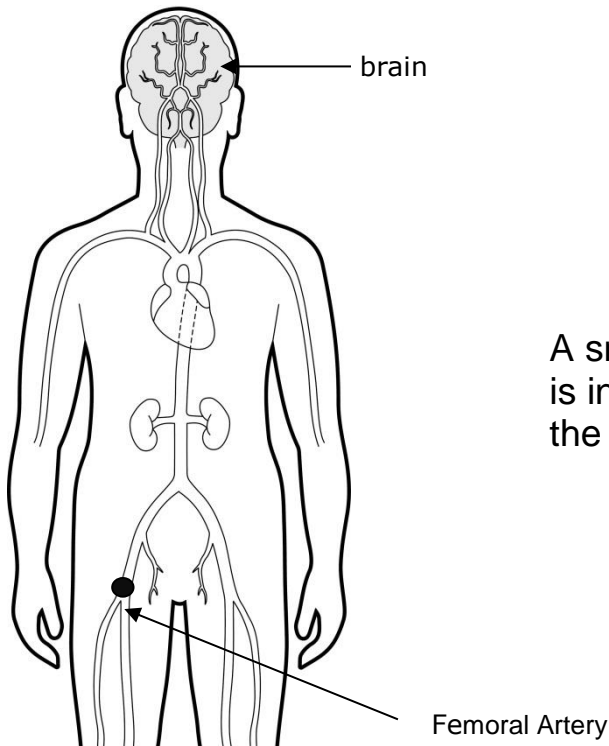
Mechanical Thrombectomy (Clot Retrieval)

Your family member has had a stroke caused by a blocked artery. Arteries are blood vessels (special tubes) that carry blood through your body and brain. A blocked artery means that part of the brain is not getting the blood and oxygen it needs to work properly. This type of stroke is called an ischemic stroke.

Treatments that are being considered:

- A medicine called tPA (tissue plasminogen activator). This medicine helps to dissolve or break down the clot and restore blood flow to the brain. It is given through an intravenous (IV), a thin tube that is inserted into a vein in the arm. Some patients are not eligible to receive tPA because of medical conditions or medicines taken.
- Thrombectomy (throm-bec-to-me) is a procedure to remove the blood clot. To know if your family member is eligible for this procedure, he or she will have special imaging called a CTA (computed tomography angiogram) to look at the arteries and blood flow in the brain.

How is a thrombectomy done?



A small thin tube, called a sheath, is inserted in the femoral artery in the groin area.

<p>blood clot</p> <p>guide wire</p> <p>catheter</p> <p>This diagram shows a cross-section of an artery with a blood clot. A guide wire is inserted through the artery wall and curved around the clot. A catheter is then inserted through the artery wall and advanced over the guide wire.</p>	<p>A guide wire and catheter are inserted through the sheath into the femoral artery and passed to the artery with the clot in the brain.</p>
<p>blood clot</p> <p>Compressed mesh stent inside catheter</p> <p>This diagram shows the guide wire removed. A compressed mesh stent is inserted into the catheter and advanced to the position of the blood clot.</p>	<p>The guide wire is removed and a compressed mesh stent is inserted through the catheter to the clot.</p>
<p>blood clot</p> <p>Expanded mesh stent</p> <p>This diagram shows the catheter being pulled back, which causes the mesh stent to expand and trap the blood clot.</p>	<p>The catheter is pulled back causing the mesh stent to expand through the clot. Once the clot is "trapped" in the stent, the clot can be safely removed with the stent.</p>

Each graphic used from, *Mechanical Thrombectomy* (© 2016) with permission from Hamilton Health Sciences, Hamilton ON

Preparing for the thrombectomy

- Your family member will be taken to the Interventional Radiology Suite in Imaging Services. He or she may have other imaging tests done upon arrival in Diagnostic Imaging before the procedure is started.
- You will meet the doctor doing the procedure. He or she will answer any questions and ask for consent to do the procedure.
- During the procedure, family can wait in the Waiting Room located in the Interventional Radiology Suite (IVR) in Imaging Services located on the Davies/Kidd 1 Hallway.

During the procedure

- During the procedure, the Interventional Radiology and Stroke teams will be with your family member. These teams include doctors, nurses and technologists.
- Your family member may have a urinary catheter put into their bladder. This is to help keep them comfortable during the procedure because they won't be able to get up to the bathroom.
- The hair in their groin area may be removed with a clipper.
- Blood pressure, heart rate, breathing, and comfort level will be closely monitored.
- The room may be cold and there may be some discomfort during the procedure. Your family member may receive medicine through the intravenous (IV) line which will help him/her to relax and feel more comfortable.
- The procedure takes about 1 to 2 hours.
- At the end of the procedure, the sheath is removed and a small bandage will be placed over the groin puncture site.

After the procedure

- Your family member will be moved to the Intensive Care Unit (ICU), where they will be closely monitored including:
 - Blood pressure, heart rate, breathing, and comfort level
 - Their groin area for bleeding and swelling
 - Their legs and feet for blood flow and circulation
- Family can visit after the procedure.
- The doctor will give you an update.
- Your family member will need to lie flat and keep his/her leg straight for about 6 hours after the sheath is removed from their groin.

For comfort, he or she can:

- Turn from side to side with help
- Wiggle their toes
- Bend their leg that was **NOT** used for the procedure
- Have the head of their bed raised slightly
- Have medicine for pain if needed

Your family member is to tell the nurse right away if he or she notices warmth or dampness or bleeding around the bandage in the groin.

- Your family member will not be able to drink for a period of time after the procedure. He or she will have an intravenous (IV) for fluids.
- Your family member will stay in the ICU for a period of time before being moved to the Stroke Unit on Kidd 7.
- If you are not from Kingston, your family member may be transferred back to the local stroke centre in your community within 24 to 48 hours after the procedure.

If you have any questions or concerns, please speak to any member of your health care team.