## Guidelines for In-Patient Cardiac CTA

See Practice Guidelines, under the Patient Care tab at [http://xray.ufl.edu](http://xray.ufl.edu) for more information. Or call Cardiac Reading Room: ext. 45691, Body Reading Room ext. 44385 with questions.

### Criteria for Cardiac CTA
Patient felt to be **low to intermediate** pretest likelihood of having coronary ischemia as a cause of their chest pain.

### Appropriate Indications for Cardiac CTA
- Chest pain in low to intermediate risk patient
- Chest pain in low to intermediate risk patient with borderline or mildly abnormal ETT
- Patient with possible coronary anomaly

### Ordering Cardiac CTA and Beta Blocker Administration
Cardiac CTA order may be placed at any time. The exam will be performed 8am – 4pm on weekdays and weekend days.

<table>
<thead>
<tr>
<th>Weekdays – Monday through Friday 8am – 4pm</th>
<th>Beta Blocker Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac CTA EPIC orderable:</td>
<td>Beta blocker: IV metoprolol</td>
</tr>
<tr>
<td>CT Angio Cardiac Coronary Arteries IMG 12017</td>
<td>4 doses, 5mg each</td>
</tr>
<tr>
<td>Radiology will place orders in EPIC for IV metoprolol and sublingual nitroglycerine.</td>
<td>Administered by radiology staff RN just prior to scan until target rate of 66bpm is met.</td>
</tr>
<tr>
<td>The in-patient scheduled for cardiac CTA is managed by Radiology nursing staff.</td>
<td>Sublingual nitroglycerine 0.4mg</td>
</tr>
<tr>
<td>The charge technologist should contact Radiology Care Unit or the nursing staff assigned to CT to discuss availability of nursing staff.</td>
<td>Administered by radiology staff RN 3-6 minutes prior to contrasted scan.</td>
</tr>
<tr>
<td>The exam will be coordinated by the CT charge tech and the floor / unit nursing staff.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Weekends – Saturday and Sunday 8am – 4pm</th>
<th>Beta Blocker Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac CTA EPIC orderable:</td>
<td>Beta blocker: 100mg oral metoprolol</td>
</tr>
<tr>
<td>CT Angio Cardiac Coronary Arteries IMG 12017</td>
<td>Until target rate of 66bpm is met.</td>
</tr>
<tr>
<td>The ordering physician will place order in EPIC for oral metoprolol.</td>
<td>The patient’s nurse will report to CT the time that the beta blocker was given.</td>
</tr>
<tr>
<td>The ordering physician will contact the radiology resident.</td>
<td>The Cardiac CTA should be done when the target heart rate of 66bpm is met.</td>
</tr>
<tr>
<td>Cardiac Reading Room: ext. 45691</td>
<td></td>
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<tr>
<td>Body Reading Room: ext. 44385</td>
<td></td>
</tr>
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<td></td>
</tr>
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</table>
**IV Access**

18g preferred, 20g min

Order of location preference:
- Right AC
- Right mid forearm
- Left AC
- Left mid forearm

All other locations are unacceptable for contrast bolus delivery for cardiac CTA.

Other lines or catheters must be approved by the Cardiac Imaging Team or the radiologist/resident on call.

*Please see IV Access Guidelines under the Patient Care tab at [http://xray.ufl.edu](http://xray.ufl.edu) for more information.*

**Contraindications for Cardiac CTA**

- Inability to hold breath or cooperate
- Cardiac CTA performed within the last year
- Increased cardiac enzymes
- Creatinine level > 1.8.
- Acute EKG changes
- Pregnancy
- History of severe contrast reaction
- Arrhythmia
- Renal insufficiency
- Multiple myeloma
- Sickle cell anemia
- Pheochromocytoma

**Calcium Score**

- For calcium score values below 600, the contrast scan will be completed and the patient returned to the floor
- For calcium score values above 600, the contrast scan may be cancelled by radiology
- The ordering physician will be notified by the cardiac team or the radiology resident on call of this change

**Reporting of Results**

**Weekdays**
Monday – Friday, 0800 – 1600 hrs……………….1 hour: full report available
Monday – Friday, 1600 – 0800 hrs……………….1 hour: preliminary report with calcium score
After 0800: full report available

**Weekends**
Friday 1600 hrs – Monday 0800 hrs……………….1 hour: preliminary report with calcium score
Full report available after daily read-out