



# TAVI PATIENT PATHWAY



Arrival approximately 7-10 days before surgery

## 1 INITIAL CONSULTATION WITH REFERRING CARDIOLOGIST

- Confirmation of TAVI indication (cardiac ultrasound)
- Information on the course of examinations / procedure
- Blood sample to be taken afterwards (at the CHU laboratory) in preparation for the procedure



## 2 AMBULATORY CORONARY ANGIOGRAPHY (screening for associated coronary lesions)

Discharge on the same day if no lesions requiring revascularization. Otherwise, immediate treatment with angioplasty (with 24-hour monitoring in our conventional hospital ward).

## 3 PRE-TAVI SCAN AND ANAESTHETIC CONSULTATION (outpatient / ambulatory)

Validation of procedure feasibility, choice of implanted prosthesis type.

## 4 TAVI PROCEDURE the following Monday (admission in the morning into the "day hospital")

## 5 POST TAVI MONITORING

- usual discharge after 48-72 h of monitoring
- sometimes delayed in case of conductive disorders / need for pacemaker implantation at the same time

## 6 FOLLOW-UP CONSULTATION THE FOLLOWING WEEK (around D7-D8 after the procedure)

- Ultrasound check of good result
- Adaptation of treatments
- Validation of quick return by plane



NB: Implantation of a TAVI prosthesis (foreign body) is associated with a small but non-negligible risk of infection of the implanted prosthesis (endocarditis) at a distance from the procedure, favored by infectious foci in the teeth. For logistical reasons, odontological care should ideally be organized by the patient prior to the procedure, or afterwards, to eradicate potential sources of infection.