Columbia Heart
Computer Tomography
Post Procedure Discharge Instructions

Name: ___________________________ Date: ___________________________

MRN: ___________________________ Chart# ___________________________

1. Drink plenty of fluids (6-8 glasses) today to prevent dehydration and to aid in the clearing of dye used during the procedure. Resume your regular diet.

2. If you have any questions or concerns, please call Columbia Heart at (803) 256-6511 for instruction.

3. Notify your Physician immediately if you experience any chest pain, dizziness, weakness, rash or itching.

4. If you have had a Cardiac CTA or Thoracic Aorta CTA your exam will be read by both a Cardiologist and a Radiologist. It is possible that someone may contact you regarding abnormalities found during radiology review.

5. Do not hesitate to call 911 or your local emergency number if you believe that you may have a serious or life threatening problem.

Patient signature: ___________________________ Date: ____________

Staff signature: ___________________________ Date: ____________