

Evidence Discussion (CD 7.4, 7.5, 7.7)

Diagnostic right heart catheterization or right and left heart catheterization is performed for functional hemodynamic evaluation and may be combined with cardiac angiography for structural cardiac imaging and coronary angiography for anatomical evaluation of the coronary arteries. Diagnostic right heart catheterization or right and left heart catheterization is indicated in selected situations to obtain specific clinical information required for management decisions if it was not provided by non-invasive evaluation. This may be indicated in selected situations for management of valvular heart disease, myocardial disease, pericardial disease, congenital heart disease, pulmonary hypertension, heart failure, and post-cardiac transplantation^{1,2,3,4,5,6,7,8}. These indications are addressed in established evidence-based medical specialty organization guidelines pertaining to these conditions^{1,2,3,4,5,6,7,8}. If the clinical information required for management decisions was already provided by non-invasive evaluation, diagnostic heart catheterization does not add to management and moreover carries cardiac and extra-cardiac risks including coronary artery injury, myocardial infarction, vascular access site bleeding, ischemic stroke, and contrast-mediated acute kidney injury.

References

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