

## Inferior Vena Cava (IVC) Filter Placement in Interventional Radiology

You have been scheduled to have an inferior vena cava filter (IVC filter) placement

An **inferior vena cava (IVC) filter** is a device placed into the large vein. This vein carries blood from the lower body to the heart and lungs. The filter is meant to trap blood clots before they reach the lungs. IVC filters may be left in for life or left in for a brief period. The type of filter that is placed depends on your condition.

This filter is used in patients who are at risk of blood clots moving to the lung. It is used when a patient is not able to take blood thinning medicine.

### Risks

Risks of IVC Placement include:

- Bleeding or bruising.
- Infection
- Once inserted, the filter may move, pieces may break off or the filter could fill with blood clots causing a blockage of your IVC.
- Small blood clots may still reach your lungs.
- You could have an allergy to the medicine we use during the exam or injury to your kidneys from the contrast dye.
- Filter may not be able to be removed once placed due to technical or medical reasons.

### Before the Procedure

- **Blood thinners:** Let the nurse know if you are taking blood thinners, such as Coumadin®, Plavix®, aspirin, or Lovenox® shots. We will speak with your doctor to decide if you should stop them.

- **Diet:** **Do not** eat any solid food for 8 hours before the procedure. You may have clear liquids until 2 hours prior to your procedure.
- **Morning medicines:** You may take any of your other prescribed medicine the morning of your IVC placement with a sip of water.
- **CPAP machine:** If you have sleep apnea and use a CPAP machine, please let the nurse know. Bring your machine with you.
- **Driver:** You will need a driver on the day of your procedure. **Do not** drive yourself home.

### Day of Procedure

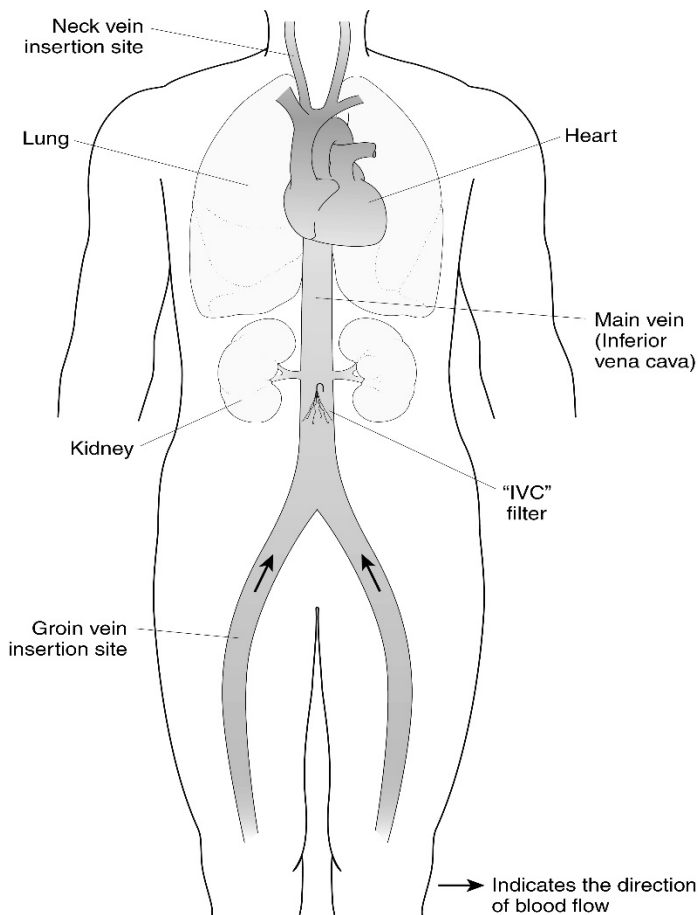
You will go to Interventional Radiology for this procedure. If outpatient, you will be instructed to arrive in the G3/3 Radiology Atrium waiting area before your procedure. You should plan to stay for 4-6 hours on the day of your procedure. The procedure itself will take about one hour.

### Procedure

1. First, a nurse will check your heart rate, breathing, and blood pressure.
2. You will have an IV placed. You will then be given medicine through the IV to help with pain and help you relax.
3. Your skin will be washed with sterile soap. A sterile drape will be placed over your body.
4. The doctor will numb your skin where the catheter (small tube) will be inserted into your vein. In most cases, the IVC filter is placed through the vein in your groin or neck.

5. Once the catheter is placed, the doctor will move it through the vein into the correct position using contrast dye and x-ray as a guide. You may feel a brief flash of warmth during the exam as the contrast is injected.
6. The IVC filter is placed through the catheter into the large vein in your stomach (see picture below). Then, the catheter will be removed.
7. Pressure will be held at the entry site to reduce any bleeding and will be covered with a dressing.
8. You will then be taken back to your room.

### IVC Filter Placement and Location of Filter



### After the Procedure

You will go back to the prep/recovery area(outpatients) or your inpatient room. Your nurse will check your site, heart rate, blood pressure, and breathing. You must stay in bed for one hour after you return to your room.

### Care at Home:

#### Site Care

If insertion site starts to bleed, apply direct pressure for 5 minutes and **go to nearest emergency room**.

It is normal to have small areas of bruising. If this area gets bigger or is painful call Interventional Radiology.

You may take off the dressing the next morning and shower. **Do not** scrub the site. **No** tub baths or swimming until site is healed which could be up to 2 weeks.

#### Diet

For the first 24 hours:

- **Do not** drink alcohol or caffeinated drinks.
- **Avoid** foods with caffeine.
- **Do** drink at least 6-8 glasses of clear liquids to help your body flush out contrast used during the procedure.

#### Activity

You may resume your normal activity 24 hours after the procedure. **Do not** lift greater than 10 pounds for 24 hours.

### **Follow-up Plan**

If you have a **Permanent** IVC filter placed, no follow-up plan is needed.

If you have a **Retrievable** IVC filter placed, you will go to the Interventional Radiology (IR) Clinic in about 2-3 months to see if the filter should stay in for good or should be removed.

An ultrasound of your legs will be scheduled with your clinic visit if needed. This is done to see if any new clots have formed or to check the status of the clots that were already there.

If this visit is not scheduled at the time of your discharge, you will be called within a week to schedule it. You may also call if you haven't heard from the scheduling department (number listed below).

It is very important that you follow up with your IR clinic visit. If you no longer need your filter, we would like to remove it as soon as possible to prevent any problems that could happen.

### **Removing the IVC Filter**

You may not need to stop warfarin (Coumadin®) before the removal if your INR is 2.5 or less on that day. We will work with the doctor who prescribed this medicine to see if you should hold any doses.

The IVC filter will be removed through the big vein in your neck. It will be done as an outpatient so you will be able to go home after it is removed.

Please follow all other advice listed in the "How do I prepare" section of this document.

### **When to Call**

Call Interventional Radiology if you have:

- Questions or concerns about your procedure
- A fever over 100°F for 2 readings taken 4 hours apart
- Increased or new swelling of legs
- Increased redness or pain at the site
- Itching and hives
- Foul smelling drainage from the puncture site
- Bleeding from the puncture site

### **Who to Call**

Interventional Radiology Department

Monday – Friday

7:30 am – 4 pm

**(608) 263-9729, prompt #3**

Ask to speak to the Interventional Radiology Nurse Coordinator

After hours, weekends, and holidays, this number will be answered by the paging operator. Ask for the Interventional Radiologist on call. Leave your name and phone number with the area code. The doctor will call you back.

The toll-free number is **1-800-323-8942**.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 1/2025 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7738