You have been scheduled to have an Inferior Vena Cava filter (IVC filter) placed as an outpatient or an inpatient at UW Hospital and Clinics.

For outpatient IVC filter placement report to: G3/3 Radiology Atrium Waiting Area. You should plan to stay for 4-6 hours.

What is an IVC filter?
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.

Why do I need this filter?
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.

What are some of the risks with IVC placement?
- Bleeding or bruising
- Infection
- Once inserted, the filter may move, pieces may chip 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

How do I prepare?
- Let the nurse know if you are taking Coumadin®, Plavix, aspirin, Lovenox shots or any other blood thinner. We will speak with your doctor to decide if you should stop them.
- Do not eat any solid food for 6 hours nor drink any liquids for 4 hours before your exam.
- You may take any of your other prescribed medicine the morning of your IVC placement with a sip of water.
- If you have a history of sleep apnea and use a machine, please let the nurse know. Please bring your machine with you to be used during the exam.
- You must arrange for a responsible adult to drive you home the same day you have the filter placed or removed.

What happens during the procedure?
- This procedure is done in Interventional Radiology. It takes about an hour.
- A nurse will check your heart rate, breathing, and blood pressure during the exam.
- You will be given medicine through your IV to help with pain and help you relax.
• Your skin will be washed with sterile soap. A sterile drape will be placed over your body.
• Usually the IVC filter is placed through a small tube placed in your groin vein or your neck vein. The doctor will numb the site with lidocaine. Once the small tube is placed, the doctor will move a catheter to the site where the IVC filter will be placed. He will use contrast dye and x-ray to guide the way. As he moves the catheter, you can expect to feel a brief hot flushed feeling during the exam as the contrast is injected.
• The IVC filter is let go through the catheter and placed in the large vein in your stomach (see picture below). Then the catheter will be removed. Pressure will be held at the entry site to reduce any bleeding. He will also apply a dressing to the site and you will then be taken back to your room.

**IVC Filter Placement and Location of Filter**

**After the Procedure**
• You will then go back to the prep hold room or back to your inpatient room where the nurse will check your site, heart rate, blood pressure, and breathing as ordered by your doctor.
• You must stay in bed for one hour after you return to your room.

**Home Care**
• **If insertion site starts to bleed, apply direct pressure for 5 minutes and go to nearest Emergency Room.**
• First 24 hours. Do not drink alcohol and avoid caffeine products. Do drink at least 6-8 glasses of clear liquids to help your body flush out contrast used during the procedure.
• Get lots of rest. You may start your normal activity in 24 hours.
• You may take off the dressing the next morning and shower but don’t scrub the site. Also, no tub baths or swimming until site is healed which could be up to 2 weeks.
• It is normal to have small areas of bruising.
• Check your site daily for signs and symptoms of infection, increased redness or swelling, red or hot incision, foul smelling drainage, or a fever over 100°F.

**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 about 2-3 months from the date of placement to see if the filter should stay in forever or should be removed.
• At the same time as the clinic visit, you will have an ultrasound of your legs done to see if you have any new clots that have formed or to check the status of the clots that were already there.
• If this appointment is not made at the time of your discharge, you can expect a call within a week. Or, you may call the number below to set it up if you haven’t heard from the scheduling department.
• It is important that you follow up to your IR clinic appointment. If you no longer need your filter, we would like to remove it as soon as possible to prevent any problems that could happen.

Guidelines for IVC Filter Removal
If it is decided that you should have your filter removed, below is some more information for you to know. If you are on Warfarin (Coumadin), then you may not need to stop this medicine if your INR is 2.5 or less on the day of the procedure. We will work with the person that prescribed this medicine to see if you should hold any doses.
• We will take out the filter through the big vein in your neck.
• It will be done as an outpatient so you will be able to go home after the exam.
• Please follow all other advice listed in the “How do I prepare” section.

When to Call the Doctor
• Fever over 100° F for 2 readings taken 4 hours apart
• Swelling of legs
• Increased redness or pain at the site
• Bleeding or pus noted at the site
• Itching and hives

Phone Numbers
If you have any questions or problems once you are at home or about your procedure, call the Radiology Department (608) 263-9729, prompt #3, Monday through Friday, 7:30 am to 4:00 pm. Ask to for 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.

If you live out of the area, please call 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.