PATIENT & CAREGIVER EDUCATION

About Your Inferior Vena Cava (IVC) Filter Placement

This information will help you prepare for your inferior vena cava (IVC) filter placement by the Interventional Radiology Department at Memorial Sloan Kettering (MSK).

About Your IVC Filter

The inferior vena cava is the largest vein in your body. It carries blood from your lower body to your heart and lungs.

A blood clot in a vein below your heart blocks your normal blood flow and may cause swelling, redness, and pain in the area. Blood clots are treated with blood thinners but some people may not be able to receive this treatment. In those cases, an IVC filter may be placed.

An IVC filter is a small device that is placed in your inferior vena cava to prevent blood clots from moving through your blood into your lungs (see Figure 1).

Your IVC filter will be placed by your interventional radiologist. An interventional radiologist is a doctor who specializes in image-guided procedures. They will place the filter in your inferior vena cava by going through a vein in your neck or groin. Your doctor will position the filter in the vein using a
fluoroscopy (real-time x-rays).

The procedure will take about 30 minutes, but you should expect to be in the procedure room for about an hour. You will have a follow-up appointment 4 to 6 weeks after placement to see when your IVC filter can be removed.

Before Your Procedure

Ask about your medications

You may need to stop taking some of your medications before your procedure. Talk with your doctor about which medications are safe for you to stop.

If you take medication that affects the way your blood clots, ask the doctor performing your procedure what to do. The doctor’s contact information is listed at the end of this resource. Some examples of these medications are:

<table>
<thead>
<tr>
<th>Medication</th>
<th>Brand Name</th>
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<tbody>
<tr>
<td>apixaban</td>
<td>Eliquis®</td>
</tr>
<tr>
<td>dalteparin</td>
<td>Fragmin®</td>
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<tr>
<td>heparin</td>
<td></td>
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<tr>
<td>Sulfasalazine (Azulfidine®, Sulfazine®)</td>
<td></td>
</tr>
<tr>
<td>celecoxib (Celebrex®)</td>
<td></td>
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<tr>
<td>dipyridamole (Persantine®)</td>
<td></td>
</tr>
<tr>
<td>meloxicam (Mobic®)</td>
<td>ticagrelor (Brilinta®)</td>
</tr>
<tr>
<td>cilostazol (Pletal®)</td>
<td>edoxaban (Savaysa®)</td>
</tr>
<tr>
<td>pentoxifylline (Trental®)</td>
<td>tinzaparin (Innohep®)</td>
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<tr>
<td>clopidogrel (Plavix®)</td>
<td>enoxaparin (Lovenox®)</td>
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<tr>
<td>prasugrel (Effient®)</td>
<td>warfarin (Coumadin®)</td>
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<tr>
<td>dabigatran (Pradaxa®)</td>
<td>Fondaparinux (Arixtra®)</td>
</tr>
<tr>
<td>rivaroxaban (Xarelto®)</td>
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Whether they recommend you stop taking it will depend on the reason you’re taking it. Do not stop taking any of these medications without talking with your doctor.

If you take insulin or other medications for diabetes, you may need to change the dose before your procedure. Ask the doctor who prescribes your diabetes medication about what you should do the night before and the morning of your procedure.

If you take any diuretics (medications that make you urinate more often), you may need to stop taking them the day of your procedure. Some examples are
furosemide (Lasix®) or hydrochlorothiazide. Talk with your doctor.

**Contrast dye**

Contrast is a special dye that makes it easier for your doctor to see differences in your internal organs. This procedure is usually done with contrast. If you’ve had a reaction to contrast in the past, tell your doctor or nurse.

If you’re breastfeeding, you may choose to continue after your procedure with contrast. If you have questions or would like to discuss contrast and breastfeeding, talk with your radiologist on the day of your procedure.

**Arrange for someone to take you home**

You must have a responsible care partner take you home after your procedure. Make sure to plan this before the day of your procedure.

If you don’t have someone to take you home, call one of the agencies below. They will send someone to go home with you. There’s usually a charge for this service, and you will need to provide transportation.

**Agencies in New York**

- Partners in Care: 888-735-8913
- Caring People: 877-227-4649

**Agencies in New Jersey**

- Caring People: 877-227-4649

**Tell us if you’re sick**

If you have any illness (fever, cold, sore throat, or flu) before your procedure, please call a nurse in Interventional Radiology at 212-639-2236. A nurse is available Monday through Friday from 9:00 AM to 5:00 PM. After 5:00 PM, during the weekend, and on holidays, call 212-639-2000 and ask for the Interventional Radiology fellow on call.

**Note the time of your appointment**

A staff member from Interventional Radiology will call you 2 business days before your procedure. They will tell you what time you should arrive at the hospital for your procedure. If your procedure is scheduled on a Monday, you will be called on the Thursday before. If you don’t receive a call by noon the business day before your procedure, please call 212-639-5051.

If you need to cancel your procedure for any reason, please call the doctor who
scheduled it for you.

Instructions for eating and drinking before your procedure

- Do not eat anything after midnight the night before your procedure. This includes hard candy and gum.
- Between midnight and up until 2 hours before your scheduled arrival time, you may drink a total of 12 ounces of water (see figure).
- Starting 2 hours before your scheduled arrival time, do not eat or drink anything. This includes water.

The Day of Your Procedure

Things to remember

- Take only the medications your doctor told you to take the morning of your procedure. Take them with a few sips of water.
- Don’t apply cream or petroleum jelly (Vaseline®). You can use deodorant and moisturizers. Don’t wear eye make-up.
- Remove any jewelry, including body piercings.
- Leave all valuables, such as credit cards and jewelry, at home.
- If you wear contact lenses, wear your glasses instead, if possible. If you don’t have glasses, please bring a case for your contacts.
- Wear loose, comfortable clothing.

What to bring with you

- A list of the medications you take at home
- Medications for breathing problems (such as inhalers), and medications for chest pain, if you take any
A case for your glasses or contacts

Your Health Care Proxy form, if you have completed one

If you use a C-Pap or Bi-pap machine to sleep at night, please bring your machine with you, if possible. If you can't bring your machine with you, we will give you one to use while you’re in the hospital.

A small pillow or towel to make you feel more comfortable on your way home from the hospital.

What to expect

Once you arrive, doctors, nurses, and other staff members will ask you to state and spell your name and date of birth many times. This is for your safety. People with the same or similar names may be having procedures on the same day.

After changing into a hospital gown, you will meet your nurse. They will place an intravenous (IV) catheter into a vein, usually in your hand or arm. At first, you will receive fluids through the IV, but it will be used later to give you anesthesia (medication to make you sleepy).

Your doctor will explain the procedure, and answer any questions you have. They will also ask you to sign a consent form.

You will be brought into the procedure room and helped onto the table. You lie flat on your back. You will receive anesthesia through your IV, which will make you fall asleep.

The skin around your insertion site (your neck or groin) will be cleaned and covered with a drape. You will get an injection (shot) to numb the site.

Your interventional radiologist will place the IVC filter through a small incision (surgical cut) made in your insertion site.

When the procedure is finished, the site will be cleaned and covered with a bandage.
After Your Procedure

In the recovery room
You will be taken to the recovery room or hospital bed.

Your nurse will explain your discharge instructions to you and your caregiver before you go home. They will also give you a wallet card with information about your IVC filter to keep with you.

Wearing a seatbelt may put pressure on your incisions. You may want to place small pillow or folded towel between the strap and your body when you go home.

At home
Caring for yourself

- Leave the bandage on the insertion site for 24 hours. After 24 hours, you can take it off.
- Your incision may feel sore. This should get better within a day or 2. You can take over-the-counter pain medication, such as acetaminophen (Tylenol®) or ibuprofen (Advil®), if you need it.
- You can shower 24 hours after your procedure.

Activities

- For the first few days, you should avoid certain activities, such as exercises that involve stretching.
- You can still have a magnetic resonance imaging (MRI) while you have an IVC filter, but it’s important to tell the healthcare provider at the radiology facility each time to be safe. Show them the wallet card your nurse gave to you.
- Your IVC filter will not set off metal detectors.
Follow-Up Appointment

- You will have a follow-up appointment with your interventional radiologist about 4 to 6 weeks after your procedure. During this appointment, your doctor will determine whether your filter will be removed.
- After your procedure, call 212-639-2236 to schedule an appointment.

Call Your Doctor if You Have:

- A temperature of 100.4°F (38°C) or higher
- Pain around your insertion site that doesn’t go away after taking medication
- Drainage around the incision site
- Redness and swelling around your insertion site

Contact Information

If you have any questions or concerns, please call Interventional Radiology at 212-639-2236. You can reach a staff member Monday through Friday from 9:00 AM to 5:00 PM. After 5:00 PM, during the weekend, and on holidays, please call 212-639-2000 and ask for the fellow on call for Interventional Radiology.

For more resources, visit www.mskcc.org/pe to search our virtual library.