

Cardiovascular Surgery Discharge Quick Reference

Surgical Contact Numbers:

- **Clinic office: 1-800-332-7156 or 238-2770 (Carol)**
- **Cardiac Surgeon on-call – (406)238-2500 – 24 hours per day**
- **Hospital Cardiac Surgery RN: 1-800-332-7201 or 657-4000 & ask operator to page Christy Baxter on pager 209**
- **Hospital Cardiac Surgery RN voicemail – 238-5019**

ACTIVITY:

- ◆ Activity is essential following open-heart surgery to increase your strength, prevent complications, and speed your recovery.
- ◆ Walk 3-4 times per day; 300 feet each time (approximately 8 minutes).
- ◆ Be upright in a chair as much as possible while you are awake.
- ◆ You should change positions every 2 hours during the day.
- ◆ You can climb stairs, just take your time and go slowly.
- ◆ We recommend that you have somebody stay with you during the first 1-2 weeks following surgery.
- ◆ Move passenger seat as far back from air bag as possible. It is very important that you continue to wear your seat belt when riding in a car.

ACTIVITY RESTRICTIONS:

- ◆ Do not drive for 4 weeks from the surgery date.
- ◆ Do not lift anything more than 5-10 lbs for 8 weeks.

DEEP BREATHING:

- ◆ Cough and breathe deeply frequently after surgery. Support your chest with a firm pillow or by using the “heart” shaped pillow.
- ◆ Use your incentive spirometer every 2-4 hours; 5-10 good, deep breathes each time for 2 weeks after you hospital discharge.

WEIGHT:

- ◆ Weigh daily for 2 weeks and keep a record of your weight. Report a weight gain of 3-4lbs/day or 5lbs/wk.
- ◆ A more consistent, accurate reading is usually obtained in the morning.

INCISIONS:

- ◆ Check incisions daily for signs or symptoms of infection (redness, swelling, foul odor, heat).
- ◆ Clean your incision with mild soap and warm water. Use a clean washcloth to gently cleanse the area. Allow to air dry or pat with a clean towel to dry.
- ◆ Please ensure that you remove all wound dressings after 24 hours. If continuing to drain, cover with small gauze pad and attempt to remove again in 24 hours.
- ◆ You will need to have chest tube sutures removed approximately one week after your discharge. Your local physician or the Cardiac Surgery office can assist you with this procedure.
- ◆ Do not use lotions, creams, or ointments on your incision.
- ◆ Report any drainage from midline chest incision or any signs/symptoms of infection.
- ◆ If your incision appears well-healed, remove paper tapes in seven days.
- ◆ A small amount of clear to bloody drainage is not uncommon from the leg wound.
- ◆ Stay away from bath tubs, hot tubs, and swimming pools until your wounds have completely healed.
- ◆ Be sure to protect your incision from overexposure to sunlight in the first year after surgery as they sunburn easily.

BATHING:

- ◆ If your incision is healing and dry, quick showers (no longer than 10 minutes) are allowed at one week after surgery or per at your physician's recommendation.
- ◆ If you have staples, please do not shower until 2-3 days after they are removed.

SUPPORT BRA FOR WOMEN:

- ◆ Women will benefit from use of a support bra that clips in the front during the recovery period.

TED HOSE STOCKINGS:

- ◆ Wear for 3 weeks. You may remove them 2-3 times daily for 30 minutes to 1 hour at a time. You may leave them off at night. Please put on first thing in the morning. If you notice more leg swelling, we recommend you wear the hose at night. Remember to keep your feet elevated when you are in the chair during the day.

FOLLOW-UP APPOINTMENTS:

1. Call to arrange an appointment with your Primary Care Provider in 1 week. **(If sutures remain at the chest tube exit sites, please have them removed at the 1 week appointment).** If unable to get in to see your primary care provider for suture removal, please call Carol in our office to schedule to have sutures removed. Sutures should be removed on: _____
2. **Cardiac rehabilitation in 2 weeks (If the facility in your area has not contacted you within 2 weeks, please contact them using the enclosed list of contact numbers)**
3. Surgeon in 3 weeks
 - You will need to arrive approximately 1 ½ hours prior to your appointment for lab tests, chest x-ray, and EKG. ***You DO NOT need to be fasting for this blood test.***
 - Please wear loose clothing to facilitate examination
 - Please bring a list of any questions that you may have for the surgeon
 - Please bring a **CURRENT** list of medications including dosages and times of day that they are taken
4. Cardiologist follow-up on an annual basis (your primary care provider can assist you in making this appointment). We recommend you see a Cardiologist 6-8 weeks after your surgery.
5. For patients undergoing valve repair or replacement surgery, we recommend that you see your cardiologist 2 months after surgery.

MEDICATIONS:

- ◆ Take Medications as instructed
- ◆ You may want to make a medication schedule for use at home.
- ◆ If you are from out of town, please ensure that you have a plan to fill your prescriptions before leaving the Billings area. Some smaller communities have limited Pharmacy hours and it is important that you have your medications as prescribed by your physician.
- ◆ If you need financial assistance with filling prescriptions, please let your nurse know. Our Medication Assistance program may be able to help.
- ◆ Develop a system for taking medications so that you know what you have and have not taken.
- ◆ If you have any questions regarding the proper use of your medications, call your pharmacist or your doctor.
- ◆ Medication taken before your surgery should not be continued unless permitted by your surgeon. **CLARIFY** the continued use of all previous medications with your doctor.
- ◆ Let all doctors and dentists who care for you know about all the medications you are taking. Keep a list of your current medications with you.

- ◆ The heart surgeon will recommend that you take certain medications after your heart surgery. These may include:
 - ◆ ***Beta Blockers*** will strengthen the contraction of the heart and slow the heart rate. These medications have been proven to increase survival of cardiac patients.
 - ◆ ***Lipid Lowering medications*** block the production of cholesterol and fat. They may also reduce the absorption of dietary cholesterol by combining with the cholesterol to remove it from the bloodstream.
 - ◆ ***ACE(Angiotensin Converting Enzyme Inhibitor)/ARB(Angiotensin II Receptor Blocker)*** medications. These medications dilate blood vessels to improve the amount of blood the heart is able to pump and thereby reduce the workload on the heart.
 - ◆ ***Anti-platelet medications*** such as aspirin, plavix, or ticlid which impact the blood's ability to clot and will help prevent a major cardiovascular event. Coumadin may be a contraindication to taking these medications.

CONTROL PAIN:

- ◆ If your pain is not well controlled with the prescription medication, call your doctor.
- ◆ ***DO NOT*** combine pain pills with alcohol.
- ◆ If your pain is not intense enough for prescription medications, you may want to use over the counter medications that are acetaminophen-based such as plain Tylenol or Tylenol XS as an alternative.
- ◆ As you wean yourself from pain medications you may want to alternate between prescription strength pain relievers and over the counter medications.
- ◆ The FDA recommends that patients who have recently undergone heart surgery should not use NSAIDs (non-steroidal anti-inflammatory drugs). NSAIDs include medications such as Ibuprofen and Naproxen. If you are unable to control your pain with the prescription pain medication or other over the counter pain medications, please discuss use of NSAIDs with your physician.
- ◆ Just a reminder that prescription pain medications can often cause constipation. You may need to use a stool softener when taking these medications.

ASSESS BOWEL FUNCTION:

- ◆ Bowel motility is sluggish after a major surgery. Usually bowels will begin motility within 2-3 days post-operatively.
- ◆ Adequate diet, hydration, and mobility will help your bowels to return to normal functioning.
- ◆ **DO NOT STRAIN!**
- ◆ Use an over-the-counter laxative if necessary. Examples may include Dulcolax or Metamucil or you may use what normally works best for you at home.

APPETITE:

- ◆ It is not uncommon to have a change in appetite after surgery. This will usually gradually improve within 1-2 weeks.
- ◆ Several small meals throughout the day may be more palatable
- ◆ It is important to get calories, nutrients, and protein so that you will have an easier time with healing. We recommend that you eat as much solid nutrition as possible, but if you are having difficulty consuming adequate calories, you may use a liquid supplement such as Ensure or Glycerna (if you are diabetic) between meals.
- ◆ Eat what you want when you want it during your recovery from heart surgery. Please focus on making needed dietary changes 6-8 weeks after heart surgery.

ALCOHOL:

- ◆ Avoid alcohol with pain medication, if you are taking coumadin, or if you have a tendency to overindulge.
- ◆ Consume only in moderation, having no more than one drink per day of wine, beer or liquor.

SEX:

- ◆ You may resume sexual relations when you feel physically comfortable, usually about 2-3 weeks after you leave the hospital.
- ◆ Avoid positions that put weight on your breastbone or arms.
- ◆ If you have questions, please discuss these with your surgeon at your follow-up appointment in 3 weeks.
- ◆ You should refrain from using medications for erectile dysfunction until you have seen your doctor at your post-op visit.

EMOTIONS:

- ◆ It is not uncommon to have some emotional ups and downs within the first few weeks after your surgery. It is important to remember that these are normal emotions. You may experience some short-lived mood swings. We encourage you to actively participate in your recovery.
- ◆ Some people feel they are not as sharp mentally after surgery. These cognitive changes are normal as the entire body, including the brain, was seriously stressed during surgery. With time, in most cases, normal cognitive function returns.
- ◆ If you experience the following symptoms beyond 2 weeks, please talk to your primary care physician: deep sadness, helplessness, worthlessness, loss of control, extreme anxiety or severe irritability, complete lack of energy, wanting to withdraw from those around you, loss of desire to do anything that you enjoy, or if you are unable to sleep all of the time.

RETURN TO WORK/CARDIAC REHABILITATION:

- ◆ Many hospitals/clinics provide out-patient cardiac rehabilitation programs. These programs provide exercise supervision for cardiac patients, as well as ongoing support to reduce your risk for further heart disease. We recommend that you participate in cardiac rehabilitation in approximately 2 weeks from hospital discharge.
- ◆ If you do not live in an area that provides cardiac rehab, we will provide you with a list of exercises you can complete daily. Walking is the best form of exercise during the early stages of recovery.
- ◆ Your surgeon will provide information about your hospital stay to your family doctor.
- ◆ If you are concerned about when you may return to work, plan to discuss this with your surgeon at the follow-up appointment in 3 weeks. Cardiac surgery does not create disability, but remember that you will have a driving restriction for 4 weeks and a lifting restriction for 8 weeks. We recommend participation in cardiac rehabilitation in 2 weeks after surgery. This usually consists of one- hour sessions, 2-3 times weekly for the duration of 6 weeks. If you drive commercial vehicles or operate heavy equipment, your employer may require that you also have a cardiology clearance to return to work to comply with the regulations of the Department of Transportation. Please discuss this with the Human Resources Department at your place of employment.
- ◆ Your recovery from heart surgery will take approximately two months.

It's Perfectly Normal to

- Be tired or not have much energy.
- Not have much appetite.
- Have some swelling, especially in your leg with incisions. Elevating your legs helps.
- Itching, tightness and/or numbness along your incision are normal after surgery.
- Notice an occasional clicking noise or sensation in your chest in the first days after surgery. This should occur less often with time and go away completely within the first couple of weeks. If it gets worse, call your physician.
- Have difficulty sleeping at night. Taking a pain pill before bed can help.
- Have problems with constipation. Use laxative of choice.
- Have mood swings and feel depressed. This will get better with time.
- Have difficulty with short-term memory or feel confused or “fuzzy-headed”. This also will improve with time.
- Have a lump at the top of your incision. This will disappear with time.
- Experience muscle pain or tightness in your shoulders and upper back between your shoulder blades. This will get better with time. Your pain medication will help alleviate this discomfort.