

Cardiac Surgery

A Guide for the Patient
and Family



Centre universitaire de santé McGill
McGill University Health Centre

*Les meilleurs soins pour la vie
The Best Care for Life*

Cardiac Surgery

A Guide for the Patient and Family

McGill University Health Centre (MUHC)

Cardiac Surgery Department

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Introduction

Are you having cardiac surgery?

- This booklet is a guide for you and your family. It has information about the heart, coronary artery bypass surgery, valve surgery and risk factors associated with coronary artery disease. This booklet will also tell you about your hospital stay, medications, exercise and nutrition. You will also find some useful suggestions for your recovery.
- The health care team of the heart surgery units of the McGill University Health Centre (MUHC) encourages you to read this guide so that you can actively participate in your care. If you have any questions or need more information, please let us know.



Anatomy of the heart

- Your heart is a muscular pump that pushes blood and oxygen through your body. A normal heart beat is 60 - 100 beats per minute. A normal blood pressure is approximately 120/80.

- In the following diagram (Figure 1) you can see the main arteries of the heart (left and right coronary arteries). They feed the heart with oxygen-rich blood that allows the heart to pump properly.

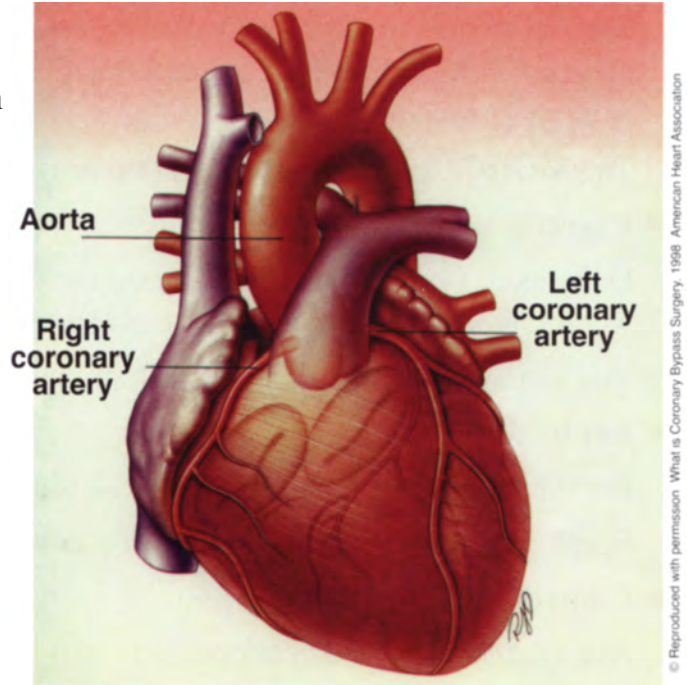


Figure 1

- Having coronary artery disease means you have a blockage of one or more branches of a coronary artery. This blockage is the result of deposits of cholesterol and fat (Figure 2).



Figure 2

Healthy artery

Artery with fat deposits

You can reduce the risks of heart disease

♥ Quit smoking

- Quitting smoking is the most important change you can make.
- The benefits of quitting begin immediately.
- Cigarette smoking is directly linked to heart disease.
- Support to quit smoking is available in every area of Quebec through a program called “J’arrête”. Information is available at 1-866-527-7383 or at www.jarrete.qc.ca
- The MUHC has a smoking cessation program (see page 29).

♥ Exercise

- Daily exercise, like walking, is good for your heart - it helps to control weight, reduces blood cholesterol and can lower blood pressure.
- You can also join a cardiac rehabilitation program (see page 29).

♥ Eat healthy

- For information on good food choices see pages 19-21.
- Speak to a dietitian who can help you understand good nutrition

♥ Control high blood pressure

- Always take your medications
- Exercise to lower blood pressure

♥ For diabetics-control blood sugar

- Follow your prescribed diet and take your medication.
- Try to keep your blood sugar level within normal limits.

♥ Manage stress

- Understanding and dealing with stress helps your heart.
- Get support from family and friends.
- Consult your family doctor if you think you need professional help to manage stress.

Coronary artery bypass surgery

- Coronary artery bypass surgery creates a bridge that allows the blood to bypass a blocked artery. To make this bridge, a section of a vein from your leg and/or an artery in your chest or forearm will be used. Your condition may require more than one bypass depending on the number of blocked arteries.

This operation will restore the blood flow to the heart muscle. Refer to the diagram below to better understand a coronary artery bypass (Figure 3).

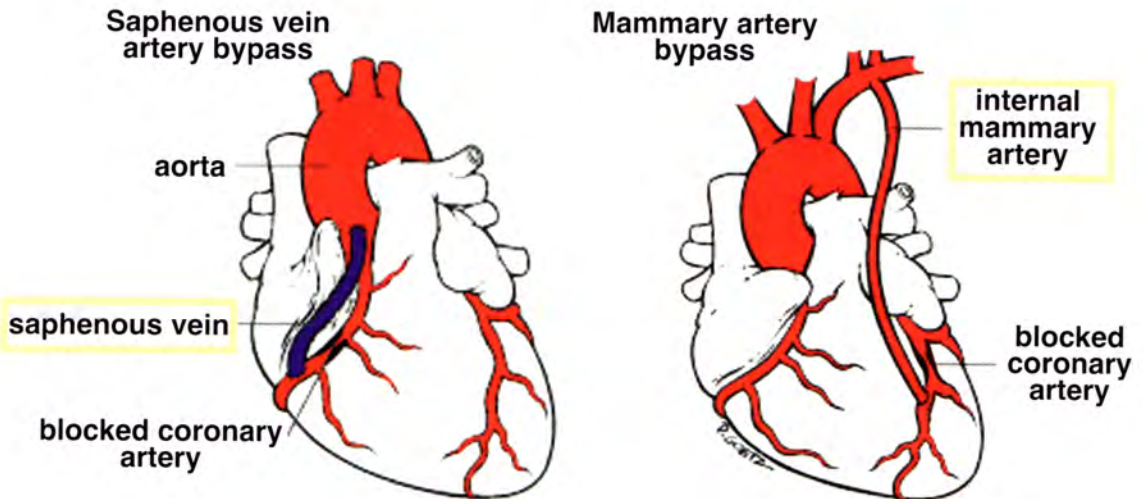


Figure 3

- You will have at least one incision on the chest and perhaps one on the legs and/or one on the forearm (Figure 4).

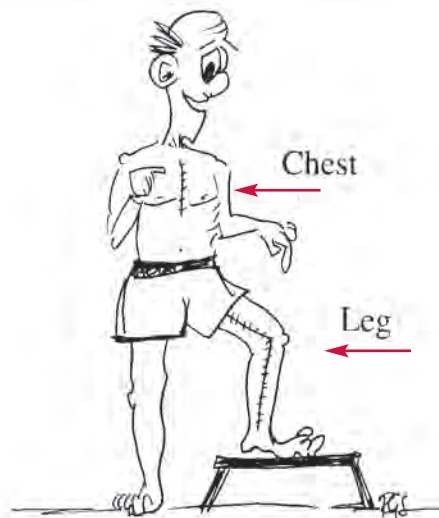


Figure 4

Valve surgery

● The heart valves are like doors that open and close with each heartbeat. Locate the 4 valves below (Figure 5): the aortic valve, the mitral valve, the pulmonary valve and the tricuspid valve. If these valves malfunction, they may need to be repaired or replaced. If a valve needs to be replaced, your surgeon will decide with you which type of valve (mechanical or tissue) to use.

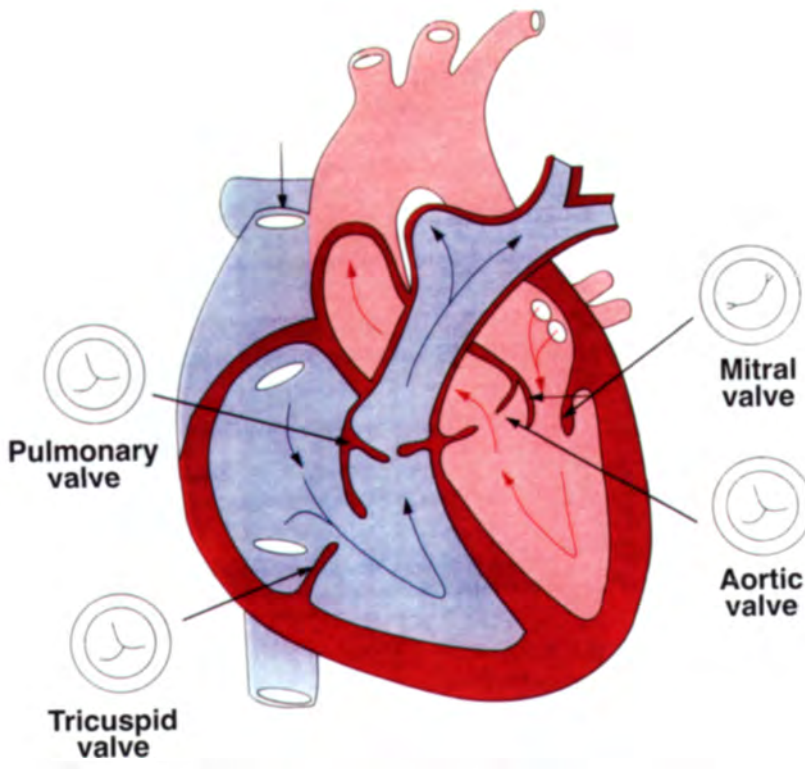



Figure 5


Special instructions for valve surgery:


Before valve surgery:


 See your dentist and try to have all dental work done before your valve surgery.


After valve surgery:

From now on,

 You **must avoid infections for the rest of your life as an infection can destroy your valve and may mean you would need another valve replacement.**

 Consult your family doctor if you suspect an infection (for example an abscess, cut(s), cough or persistent sore throat) or if you have fever (a temperature higher than 38° C/ 101° F) that lasts more than 24 hours.

 You **must** tell any medical personnel (**doctor, dentist, nurse, medical secretaries**) that you have had a valve operation. It is important to do this when making appointments, as it is likely that you will need to take antibiotics before having medical procedures or surgery ie. teeth cleaning, colonoscopy, cystoscopy, etc. If you are taking Coumadin®, you may need to stop taking it for a certain period of time. The doctor should give you these instructions.

 After valve surgery you may have to take Coumadin® which increases the risk of bleeding. Refer to page 26 for precautions and information while taking this medication. We recommend that you wear a Medic Alert™ bracelet. This bracelet will state that you have an artificial valve and that you take Coumadin®. You will receive a card that you must carry at all times. It contains specific information about your valve.



Hospital stay

Length of hospital stay

- Five (5) days for bypass surgery
- Six-seven (6-7) days for valve surgery

The admitting office will call you to tell you when to come to the hospital.

Please bring:

- **Eyeglasses and hearing aid(s)**
- **Toothpaste/toothbrush, electric razor**
- **A brassier is very important for women after surgery.**
- **Loose fitting non-slip slippers**
- **All pills, drops, insulin and puffers you use in their original containers**
- **A small amount of money – no more than \$20**
- **This booklet and your questions**
- **Have your family bring home your coat and boots. We have lockers to store one bag per person.**

It is important to plan your return home in advance, as you may need help with meals, groceries, house chores etc.

- **You will need a driver since you will not be allowed to drive your car for four (4) weeks after surgery.**
- **If you do not have family or friends to help, let your nurse know so we can make arrangements.**

Your family and friends may visit you at any time, either on the heart surgery unit (S8 or M5) or the intensive care unit (ICU).

Before surgery- please wait until you receive a call from the admitting office before presenting yourself to the hospital.

If you are admitted the day before surgery:

- Take the medications as usual the day before surgery, unless you were told to stop certain medications.
- Before coming to the unit, you must go to the Admitting Office (room A1.25) in order to pick up your papers.
- You will have a blood test, a chest x-ray and an electrocardiogram.
- You will see a doctor, an anaesthetist and a nurse.
- Do not shave your chest, arms or legs for 2 days prior to surgery. We will use a clipper to prepare your skin the morning of surgery.
- You will take 2 showers followed by disinfectant wipes: one in the evening (before surgery) and one in the morning of your surgery.
- Do not eat or drink anything after midnight the night before surgery.

If you are admitted the morning of surgery:

- Apply a small amount of Bactroban (antibiotic cream) in both nostrils the night before surgery.
- Do not shave any part of your body 2 days prior to surgery.
- Follow the instructions received at the preadmission clinic on how to prepare your skin before surgery.
- Do not eat or drink anything after midnight the night before surgery.
- Do not take any medication in the morning but please, bring them all with you; including bactroban.
- Before coming to the the cardiac surgery unit (S8), you must go to the Admitting Office (room A1.25) at 06h45 a.m. in order to pick up your papers.

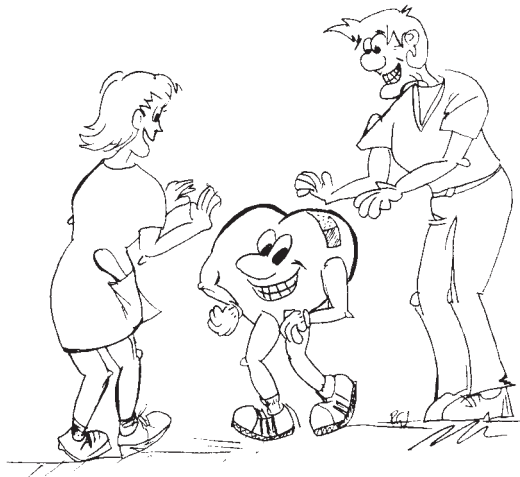
If you take the medication Pradax, you must stop taking it five days before your surgery date.

The day of surgery

- An orderly will bring you to the operating room. Your surgery will last 3 to 4 hours. During the surgery, we suggest that your family wait in the waiting room of the intensive care unit. The operating room, ICU and waiting room are all located on the 5th floor of Centennial Pavillion (C5). Once the surgery is finished, the surgeon will contact a member of the family (by telephone or in the waiting room) to give them information about the surgery.
- You will go to the ICU where you will be monitored at all times. You will stay there for about 24 hours. When you wake up it is very important to stay calm. You will hear noises from the equipment being used. You will not be able to speak since you will have a tube in your throat that will help you breathe. Once the tube is removed, you will be able to speak again. Other tubes and equipment will also be present.

Returning to the surgical unit

- After the ICU you will be transferred to the heart surgery unit. The tubes will be removed. Then we will help you sit up in a chair and get up and walk. You will stay here until it is time to go home.



What to expect during your hospital stay

Breathing exercises

- After surgery a physical therapist (PT) will show you breathing and coughing exercises to help loosen the secretions in your lungs.

- To help expand your lungs, you will be shown how to use an inspirometer (Figure 6). These exercises should be done every hour.



(Figure 6)

- You should cough up these secretions. You will be given a cushion to squeeze over your chest to help decrease the pain when you cough.

Walking after your surgery

- You will sit in a chair the day after surgery.

- The physical therapist (PT) will show you exercises for your neck, arms, and legs.

- You will begin to walk with help on the second (2) day after your surgery. You should try to walk as much as possible while in hospital.

- Before you leave the hospital the PT will make sure you can walk safely and climb stairs.

Pain

- After your surgery you may feel pain along your incision(s) and also in your shoulders and back.

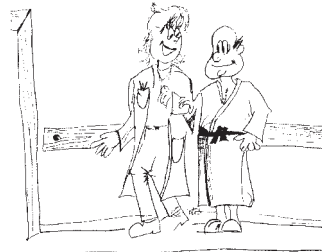
- Your pain level will be measured on a scale from “0” (no pain) to “10” (extreme pain).

- Ask your nurse for pain medication as soon as you feel the pain and before doing your exercises.

- Do not let the pain stop you from doing your breathing exercises and walking while you are in the hospital.

Eating and drinking

- Once the breathing tube is removed, you will receive ice chips. Slowly you will progress to a normal diet.



Normal effects of the surgery and some advice

♥ Shortness of breath

It is normal to feel short of breath when going up stairs or doing exercises

☞ This should resolve at rest.

♥ Fatigue and difficulty sleeping

It is normal to feel tired and weak, or to have difficulty sleeping after your surgery. This is only temporary and it may take several weeks for you to feel like yourself again.

☞ Stay active but allow yourself time to rest.

♥ Emotions

You may feel sad or more anxious. Remember to focus on the progress you are making.

☞ Talk about your feelings with your family, friends, or members of the health care team.

♥ Decrease in appetite

A decrease in appetite is normal. You will gradually regain your appetite.

☞ Follow the advice on page 19 of this booklet.

♥ **Swollen legs**

Your legs may become swollen after surgery. If a vein was removed from your leg, the swelling may continue for a few weeks.

- ☞ Continue your exercises and walk every day.
- ☞ When sitting in a chair, rest your legs on a stool or coffee table.
- ☞ Avoid crossing your legs.

♥ **Constipation**

Constipation is a common problem after surgery.

- ☞ Drink plenty of liquids (1.5 to 2 litres per day).
- ☞ Eat foods rich in fibre (bran cereal, prunes, fruit with the skin on) on a daily basis.
- ☞ Walk as much as possible. Physical activity promotes regularity

♥ **Difficulty concentrating**

Do not worry if you notice that you are having difficulty concentrating. It should return to normal in a few weeks.

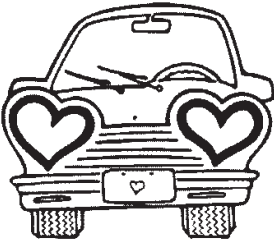
♥ **Irritated throat and weak voice**

You may feel that your voice is weaker or that you have difficulty swallowing. This is due to the breathing tube you had in your throat. This will improve within a few days.

- ☞ To decrease the discomfort, gargle with salt water and take some ice chips.

Guidelines for your return home

Resuming usual activities

Week 1 to 6:	After 6 weeks:	*After 3 months:
<p>1st week: Dress every day Eat at a table Walk up and down stairs Walk outside (in nice weather) daily Do light housework e.g. set the table, fold clothes</p> <p>Starting on Week 2: Cook Increase housework e.g. dust, wash dishes Walk outside for longer distances</p> <p>Starting on Week 3: Take the bus or metro You may walk up small hills Do light gardening e.g. potting plants, trimming flowers Go see a movie, go to a restaurant You may use a stationary bike</p> <p>Starting on Week 4: Drive your car Play mini golf Use treadmill if your cardiologist agrees</p>	<p>Vacuum, sweep Walk the dog on a leash</p> 	<p>Shovel snow Swim Jog, bicycle, golf Do heavy housework/gardening</p> <p><small>*http://www.sts.org/doc/3563</small></p>

These are just guidelines but everyone recovers at their own rate. Gradually go back to your normal activities and rest when you are tired.

General recommendations

Exercise

♥ Recovery time lasts from 6 weeks to 3 months. Remember that everyone gets better at a different rate. It is normal to feel tired and have shortness of breath with activity up to a few months after the surgery. Remember you need a balance of rest and exercise in order to heal so alternate activity with rest periods.

Lifting and reaching

♥ In general the breastbone takes 6-8 weeks to heal. Avoid positions that can cause pain or pulling across the breastbone. Avoid supporting yourself with your arms. Do not push, pull or lift anything more than 5 pounds for 6 weeks after your surgery. For example, do not push heavy doors, lift children/animals, lift grocery bags, walk the dog or shovel snow.

♥ Try not to do any activity where your arms are above shoulder level for a long time as this increases the work of your heart.

Sexual activity

♥ As a guideline you should be able to tolerate walking briskly or climbing 2 flights of stairs before having sexual intercourse. It is recommended to wait 2 to 3 weeks after you leave the hospital.

Stairs

♥ Use the handrail for support and avoid pulling yourself up with your arms, instead use your legs.

Breathing exercises

♥ Continue to use your spirometer for at least 1 week after you leave hospital.

Walking

♥ Gradually increase the distance and the frequency of your walks as tolerated.

♥ Walking in a shopping mall is recommended because there are benches to sit on and the temperature is pleasant.

♥ Try not to walk in extreme heat or cold.

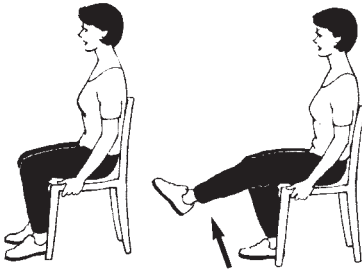
♥ Do 20 minutes of activity daily (does not have to be in succession).

Home exercises

● The following exercises should be done every day while you are sitting in a chair. Try not to hold your breath while doing the exercises. It is normal to feel stretching of the muscles of your upper body and neck, and along your incision. Stop the exercise if you begin to have pain or feel dizzy.

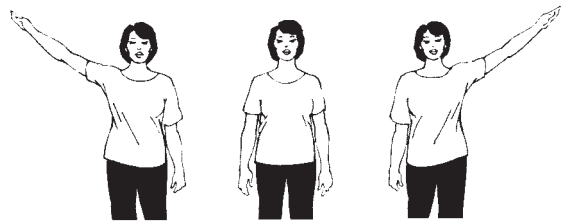
1. Knee extension

Straighten one knee slowly and hold for 5 seconds. Slowly lower. Do the same with your other leg. Repeat 10 times.



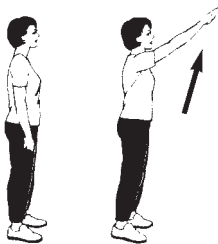
3. Side arm lift

Lift one arm up to the side as high as you can. Slowly lower your arm to your side. Repeat 10 times. Then repeat the exercise with your other arm.



2. Arm lift

Lift one arm straight up above your head. Slowly lower your arm to your side. Repeat 10 times. Then repeat the exercise with your other arm.



4. Neck rotation (side to side)

Gently turn your head towards your right side, turning your chin towards your right shoulder. Slowly turn your head towards your left side, turning your chin towards your left shoulder.



For those of you who have a pacemaker, remember your restrictions:
No push/pull/lift with your arm where the pacemaker was inserted
No elevation of your arm above the shoulder
No arm movements behind your body for four weeks

Good nutrition for a healthy heart

♥ Good nutrition after surgery

- **To promote healing, eat foods rich in protein like eggs, chicken, fish, lean red meat and milk products.**
- **To improve your appetite, eat 3 small meals and 3 snacks per day.**
- **Avoid or limit coffee, tea and soft drinks. Instead choose milk, milkshakes and juice, which offer more energy and nutrition.**
- **If you are losing weight, consult a dietitian.**
- **If possible, prepare meals ahead and freeze.** Take advantage of meal offers from friends and relatives. Find out about your local “meals-on-wheels” program.

♥ Good nutrition after recovery

- The recommended number of servings from each food group of **Canada's Food Guide will provide the nutrients required for good health.**
- The foods you eat could affect the fat and cholesterol in your blood. Too much cholesterol in your blood may cause a fatty plaque build-up on the wall of your arteries and cause them to become narrow.

Meal guidelines

Vegetables and fruits, 7 to 10 servings per day

- ✓ 1 medium size vegetable or fruit
- ✓ 1/2 cup (125 ml) of fresh or frozen vegetables or fruit
- ✓ 1 cup (250 ml) of dark green lettuce salad
- ✓ 1/2 cup (125 ml) of vegetable or fruit juice



Grain products, 6 to 8 servings per day

- ✓ 3/4 cup (200 ml) hot cereal
- ✓ 1 slice of whole grain bread
- ✓ 1/2 cup (125 ml) of pasta or rice
- ✓ 1/2 bagel



Milk products, 2 to 4 servings per day

- ✓ 1 cup (250 ml) of low fat milk
- ✓ 2 slices of low fat processed cheese or 2 oz (50 g) of cheese
- ✓ 3/4 cup (175 g) of low fat yogurt



Meat and alternatives, 2 to 3 servings per day

- ✓ 2-3 oz (50-100 g) of lean meat, poultry or fish
- ✓ 1 to 2 eggs
- ✓ 1/2-1 cup (125-250 ml) of kidney beans, split peas or lentils
- ✓ 1/3 cup (100 g) of tofu



Vitamins

- If you are unable to get an adequate intake of any one of the four food groups, speak to your dietitian about taking a multivitamin supplement.

Alcohol

- Drink only in moderation, one drink per day or less.
- One drink is a glass (5 oz/150 ml) of wine, (12 oz/350 ml) of beer or 1 1/2 ounces (45ml) of spirits (40% alcohol).

Caffeine

- Moderate intakes of caffeine are not linked to any serious health problems. Moderation means 2 cups (500 ml) per day.

Salt

- **Reduce your salt intake.**

- ♥ Avoid the salt shaker at the table.
- ♥ Use only a bit of salt 1/2 tsp (2.5 ml) in your cooking per day.
- ♥ Avoid ready-to-eat and canned foods; they contain too much salt.
- ♥ Read labels. The higher salt (sodium) is listed on the ingredients list, the more salt the food contains.
- ♥ Antacids such as baking soda, Bromo Seltzer™ and ENO™ are high in salt (sodium).
- ♥ Check with your doctor or dietitian before using salt substitutes.
- ♥ Avoid drinks with high salt content such as mineral water.

Maintain a healthy weight

- **Being overweight can increase the work of the heart.**

In addition, obesity increases the risk of developing diabetes, high blood pressure and high cholesterol; all of which are risk factors for heart disease. These risk factors are less likely to be present in people with a healthy weight.

- **To lose weight you should eat the right types and amounts of foods and become more physically active.**

Your cardiologist will provide you with guidelines for increasing physical activity. You may also be referred to a dietitian to have a weight loss plan developed for you.

Suggested recipes:

Heart Smart: The Best of Heart Smart Cooking, by Bonnie Stern, February 2006.

The New Lighthearted Cookbook: Recipes, by Anne Lindsay, April 2005.

Suggested website: www.dietitians.ca, www.diabetes.ca, www.hc-sc.gc.ca, www.annelindsay.com, www.bonniestern.com

Hygiene and incision care

♥ You may take a shower 4 days after your surgery.

♥ Take a **shower** rather than a bath, during the first 2 weeks after you leave the hospital.

♥ Clean your incisions with mild soap (non-perfumed) and rinse.

♥ Do not use alcohol or peroxide to clean your incisions.

♥ Pat your incisions dry with a towel.



♥ If you have clips along your incisions, they will be removed by a nurse from the hospital or the CLSC 10-14 days after your surgery.

♥ Small pieces of tape will be applied once the clips are removed. You may remove them 7 days later, if they do not come off on their own.

♥ **If there is discharge from your incisions :**

•♥ Always wash your hands well before and after touching your incisions.

•♥ Continue taking a shower every day.

•♥ Use dry gauze to absorb the discharge. Change the gauze twice a day and whenever needed.

•♥ When there is no longer any discharge, leave your incision open to air (without gauze).

Warning signs of infection at the incision site(s):

•♥ Redness

•♥ Warmth

•♥ Yellow or green, foul smelling discharge

•♥ An increased amount of discharge

•♥ Fever (oral temperature greater than 38° C or 101° F)

•♥ Increasing pain

Note: Itchiness and dryness at the incision sites are normal signs of healing.

♥ **Women should start wearing a bra two days after surgery to decrease the tension on the incision. To prevent discomfort place a gauze pad where the bra touches the incision.**

Medication

- When you go home a new medication prescription will be given to you. **Get this prescription filled right away and take only the medications from this prescription.**
- Your medication will be reviewed by your cardiologist 4 - 6 weeks after surgery. Your nurse will give you information about your medication. Do not hesitate to ask questions. It is important for you to know why you are taking these medications.

Important rules

- ▶ **Keep a list of the medications you are taking with you at all times. The list should include the name of the medication, the dosage, the time you take it and the reason for taking it.**
- ▶ **Take your medication as prescribed by the doctor. Never increase, decrease or stop taking your medication without speaking to your doctor.**
- ▶ **If you forget to take a medication, do not double a dose. Continue with your regular schedule.**
- ▶ **Check with your pharmacist before taking any other medication. For example: antacids, laxatives, medication for a cold or a cough, homeopathic or herbal supplements.**
- ▶ **Always consult your pharmacist if you have any questions or concerns pertaining to your medication.**

Medication most often prescribed:

ENTROPHEN® (coated ASPIRIN)

This medication is used to stop the formation of clots in your blood. Take this medication with food to reduce stomach irritation.

LOPRESSOR® (METOPROLOL), TENORMIN® (ATENOLOL)

These medications decrease blood pressure and heart rate. They also prevent angina. They function by decreasing the work of the heart after surgery and which helps the heart to heal. Since these medications decrease blood pressure, you can minimize dizziness by getting up slowly from a lying position.

SUPEUDOL® (Oxycodone)

These medications are for pain. Take them as needed, one to two pills every 4 to 6 hours. Common side effects of these drugs include nausea, constipation, drowsiness and dizziness. To decrease nausea, take your pills while eating. To avoid constipation, eat foods rich in fiber (see page 15), drink lots of water and take Colace® as prescribed.

COLACE® (SODIUM DOCUSATE)

This medication prevents constipation. Do not take this medication if you are vomiting or have abdominal cramps.

LIPITOR® (ATORVASTATIN), ZOCOR® (SIMVASTATIN), MEVACOR® (LOVASTATIN), PRAVACHOL® (PRAVASTATIN), LESCOL® (FLUVASTATIN)), CRESTOR® (ROSUVASTATIN)

These medications decrease the amount of fat in your blood. It is preferable to take this medication in the evening.

SOTALOL® (SOTACOR)

This medication is sometimes used to control an irregular heartbeat. It can cause dizziness, therefore, get up slowly. If your pulse is slow (less than 50 beats per minute) or irregular, notify your physician.

 **DIGOXIN**[®] (LANOXIN)

This medication is used to strengthen your heart and slow down the heart rate. Symptoms of nausea, vomiting and diarrhea are signs that your dosage may be too high. Consult your doctor or your pharmacist if you experience these symptoms.

 **VASOTEC**[®] (ENALAPRIL), **ALTACE**[®] (RAMIPRIL),
PRINIVIL[®] (LISINOPRIL), **COVERSYL**[®] (PERINDOPRIL).


These medications are used to decrease blood pressure and to help the heart function better. To prevent dizziness while taking these medications, avoid getting up quickly. Avoid taking salt substitutes. If you develop a dry, persistent cough, notify your doctor.

 **LASIX**[®] (FUROSEMIDE)

This medication eliminates extra water from your body and will cause you to urinate more frequently. Taking this medication leads to a loss in potassium. Therefore, include foods rich in potassium in your diet such as bananas, oranges, kiwis, potatoes with skin and dried fruit (dates, prunes).

 **K-DUR**[®] (POTASSIUM CHLORIDE)

This medication is a potassium supplement that your body needs when you are taking LASIX[®]. Take your K-DUR[®] with meals to prevent stomach upset.

 **PLAVIX**[®] (CLOPIDOGREL)

This medication is a blood thinner that helps to reduce heart problems caused by a build-up of fat in your arteries. It can be taken alone or with Aspirin[®] - they both thin the blood but by different mechanisms. Notify your doctor if you have any unusual bleeding or bruising.

 **CORDARONE**[®] (AMIODARONE)

This medication is used to treat and prevent the recurrence of an irregular heartbeat. It may make your skin more sensitive to sunlight. Use a sunscreen when you are outdoors. This drug has many interactions with other drugs. For this reason, you should always go to the same pharmacy to prevent this problem. Amiodarone can affect the liver and lungs - notify your doctor if you have labored breathing, dark-colored urine or pale stools, yellowing of your skin or the whites of your eyes.

COUMADIN® (WARFARIN)

● This medication helps to prevent clots from forming in your blood vessels. It thins the blood. If you forget to take your **COUMADIN®**, and then remember on the same day, take it immediately. If you remember the next day, do not take the missed dose, and continue with your usual schedule.

Never double your dose on the same day.

Side effect

The side effects of coumadin are bleeding or hemorrhage.

This is how you can help prevent them:

- Use a soft toothbrush to prevent bleeding gums when brushing your teeth.
- Use an electric razor rather than a straight razor to avoid cutting yourself when shaving.
- Be extremely careful when handling sharp objects.
- Avoid contact sports.

Notify your doctor immediately if you have any of the following symptoms:

- Blood in your urine (a pink, red or brown colour to your urine).
- Blood in your stools (red or black stools).

- Vomiting (reddish or brownish content).
- Bruises on your skin.
- Nosebleeds or coughing up blood.
- Bleeding gums.
- Persistent and severe headaches.

Important guidelines:

- Never miss appointments for your blood test. This test will allow your doctor to adjust your **COUMADIN®** dose.
- Notify your doctor immediately if you forget to take your **COUMADIN®** for two or more days.
- You must tell every doctor, pharmacist or dentist that you take **COUMADIN®**.
- Wear a Medic Alert™ bracelet or carry a card, which states that you take **COUMADIN®**.
- Products containing aspirin should only be taken on the advice of a doctor.
- Consult your dietitian or your doctor before changing your dietary habits or before starting a new diet.
- Limit the consumption of the following foods to 1 portion (1 cup or 250 ml) per day: spinach, broccoli and brussel sprouts. Vitamin K in these foods counteracts coumadin and thickens the blood.



Pain

- Following your surgery you may feel:
 - pain in your breastbone and your leg
 - discomfort in your shoulders and back
 - numbness and itchiness near the incisions

Take your pain medication regularly (every 4 hours) when needed.

- This medication is Supeudol™ or Tylenol™. Refer to the medication section (page 24) for more information. Never wait for the pain to be so intense that it prevents you from doing your activities. Over time your pain will diminish and Tylenol™ should control your pain.

Discharge

- Discharge from the hospital is approved by your surgeon one day in advance or the day you leave the hospital. We ask you to leave your room by 11:00 in the morning. Therefore, it is important to notify your family. You may return home in a car, however, **you cannot drive.**

- On discharge you will get:
 - ✓ **A medical summary**
 - ✓ **A prescription**
 - ✓ **An appointment with your surgeon (if necessary)**

Return to work

- You can return to work within 2 or 3 months after your heart surgery. We suggest that you discuss this with your cardiologist or your surgeon.

Follow-up

- We will make arrangements with your CLSC for removal of clips from the incision site, dressings and/or home care.
- When you return home, make appointments with your family doctor and cardiologist. If you do not have a cardiologist, let us know.
- We recommend that you see your cardiologist 4 to 6 weeks after surgery.
- Always bring a list of your current medications and your medical summary when you see the doctor.

Conclusion

We hope that the information contained in this booklet answers your questions.

Feel free to contact the nurses and doctors from the heart surgery unit:

RVH (514) 934-1934, ext. 34985

Have a good recovery!



Important – please read:

Information provided by this pamphlet is for educational purposes. It is not intended to replace the advice or instructions of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.

Important telephone numbers

When in the hospital:

- ☎ The heart surgery unit: (514) 934-1934, local 34985
- ☎ The intensive care unit: (514) 934-1934, local 34769
- ☎ Dietitian: (514) 934-1934, local 31576
- ☎ Physiotherapist: (514) 934-1934, local 34985
- ☎ Patient care coordinator: (514) 934-1934, local 36809

When you return home you may contact the following resources :

- ☎ Nurse-in-charge on Surgical 8: (514) 934-1934, local 34985
- ☎ Your pharmacist: _____ ☎ Your cardiologist: _____
- ☎ Your family doctor: _____ ☎ CLSC of your area: _____
- ☎ Heart and Stroke Foundation : 1-800-567-8563
www.heartandstroke.qc.ca/
- ☎ Canadian Diabetes Association : 1-800-226-8464
- ☎ Canadian Medic Alert Foundation : 1-800-668-6381
- ☎ Smoking Cessation Program - Montreal Chest Hospital: (514) 843-2080
- ☎ Quebec Quit Smoking 1-866-527-7383 or www.jarrete.qc.ca or
Health Canada website: www.hc-sc.gc.ca

These are programs you can contact for heart rehabilitation:

- ☎ The Cardiovascular Health Improvement Rehabilitation Program (CHIP): (514) 489-6630
- ☎ Catherine Booth Hospital Heart Rehabilitation Program: (514) 481-0431 local 1004
- ☎ Montreal Heart Institute Preventive Medicine and Physical Activity Center (EPIC):
(514) 374-1480 or by email info@centreepic.org
- ☎ Notre Dame Hospital Preventive Cardiology Center: (514) 890-8000 local 23761
- ☎ Laval Cardiovascular Center: (450) 681-6116
- ☎ Heart Education and Support Program, Lakeshore General Hospital :
(514) 630-2225 local 1894
- ☎ Education Program "La vie à coeur", Centre Hospitalier Angrignon
(514) 362-1000 local 2856

What to take home with you from the hospital:

- This booklet
- Your spirometer for deep breathing exercises
- Red heart for deep breathing and coughing exercises
- Appointment with surgeon (if required)
- Medical summary
- Prescription to bring to your pharmacist. You must only take the medications on this prescription. It has been revised based on the medications that you were taking before surgery and your new medications.
- Your valve's temporary identification card (if you had valve surgery)
- If you are taking coumadin, you need a booklet and appointment date for a follow-up blood test (INR). Make sure you know the place and time of this appointment. After your blood test you should be contacted by the blood drawer to tell you what dose of coumadin you need to take. If you have not been called by 3pm, please call them.
- CLSC appointment

Important information when you go home

Medications:

Take only the medications on the prescription given to you at discharge. These medications will be reassessed by your cardiologist.

Follow-up appointments:

Make an appointment with your cardiologist and with your family doctor as soon as you get home. You should see your cardiologist 4 - 6 weeks after leaving the hospital.

Lifting:

Do not lift, push or pull anything heavier than a Montreal phone book (5 lbs) for 6 weeks after the surgery.

Driving:

Do not drive your car until 4 weeks after surgery.

Pain:

Take Tylenol (Acetaminophen) regularly, if you have pain. If your pain is not relieved, take Supeudol ® Oxycodone as prescribed.

If you have any question or concerns

**Call the Cardiac Surgery Unit at:
(514) 934-1934 ext. 34985
Ask to speak to a nurse**

Please read the important safety issues on the backpage

When and who to consult

- ♥ If you have intense **chest pain** and symptoms similar to those experienced before surgery (angina), **go to the Emergency Room**.
- ♥ If you experience **palpitations** lasting more than a few minutes, consult your cardiologist or **go to the Emergency Room**.
- ♥ If you feel **instability or a "clicking"** sensation in your breastbone, **go to the Emergency Room**.
- ♥ If you have a **fever** (oral temperature greater than 38°C or 101°F) for more than 24 hours, **go to the Emergency Room**.
- ♥ If you notice **increased redness, foul smelling, thick yellowish or greenish discharge** from your incision(s), consult your surgeon or **go to the Emergency Room**.
- ♥ If your legs **remain swollen** after 8 weeks, or if you have a **rapid increase in weight**, consult your cardiologist or your family doctor.
- ♥ If during your daily activities or exercises, you have symptoms such as: **shortness of breath** that does not go away with rest, **dizziness, nausea** or **vomiting**, consult your cardiologist or **go to the Emergency Room**.