

Carolinas HealthCare System Sanger Heart & Vascular Institute

Your Journey to a Healthier Heart

Our goal is to put you at ease by answering any questions and addressing any concerns you may have.



Carolinas HealthCare System

Sanger Heart & Vascular Institute

Thank you for choosing the world-class care at Sanger Heart & Vascular Institute. We are honored to be part of your healthcare team. As you go through your surgery and healing, you and your family may have questions. Our goal is to put you at ease by answering any questions and addressing any concerns you may have.

You will get a call in a few days to plan your pre-op visit. Tests and blood work may be done at this time. Someone from our team will explain what to expect before, during and after surgery. Below is a list to help you plan for your recovery:

•	Bring any forms to your pre-op visit. For example:		
	 Short-term disability 	_	Living Will
	- Family Medical Leave Act (FMLA)	-	Healthcare Power of Attorney

- Bring all medicines that you take to your pre-op visit. Also bring vitamins and herbals that you take.
- Someone will need to be with you at all times during the first two weeks after you leave the hospital. We can talk about choices you may have.
- Someone will need to help:
 - Cook for you

- Drive you to follow-up visits

- Go with you on daily walks
- It may be hard to walk up or down stairs after surgery. Decide the best place for you to sleep.
- You should be able to return to work and activities in three to six weeks. This depends on the type of surgery you had.
- Review with your family any papers or videos you may get from our team.

Please list anything that you and your family would like to ask or tell our team.

Bring this letter and any questions you have to your pre-op visit.

Before Surgery







As you begin your journey to a healthy heart, we want you to know about your healthcare team:

- **Surgeon:** The doctor who does your surgery. He will follow you through your hospital stay.
- **Cardiologist:** The doctor who performed your heart tests like a catheterization. They worked with your surgeon to decide if surgery would be best for you.
- Intensivist: A specialized doctor that will follow you in the intensive care unit. They help to manage your breathing.
- Anesthesiologist: The doctor who puts you to sleep and helps to wake you up after surgery.
- Advanced Care Practitioner (ACP): This is a person who works with the surgeon such as a Nurse Practitioner (NP) or a Physician Assistant (PA). They will help manage your care throughout your recovery.
- Nurse: These nurses care for the special needs of heart patients. The nurses will be with you every step of the way. They will support, teach and care for you and your family.
- **Respiratory Therapist:** They will work with you on your breathing after surgery. This includes getting the breathing tube out and taking deep breaths.
- **Physical Therapist:** The person who helps you to get moving again as early as the day after surgery.
- Clinical Case Manager: They will help in your discharge planning. Setting up a Home Health Nurse and any other equipment you may need.
- Cardiac Rehabilitation Team: This team is made up of nurses and exercise specialists. They will teach you how to live a healthy and active life.

Meet Your Healthcare Team

We are honored to be part of your healthcare journey.

Before Surgery: Your Journey to a Healthier Heart

Getting Ready for Surgery

- Your surgeon will decide what tests and lab work you will need. Some of these tests may be done during your pre-operative visit. Other tests may be done while you are in the hospital.
- Once your surgery is scheduled, you will get a call from our pre-operative team. They will ask for a brief history, review your home meds and set up a time for you to come in to complete the remaining tests and paperwork.
- During your pre-operative visit, you will meet with a member of our team. They will go over what to expect with your surgery. You will see them again after you leave the Cardiovascular Intensive Care Unit (CVICU).

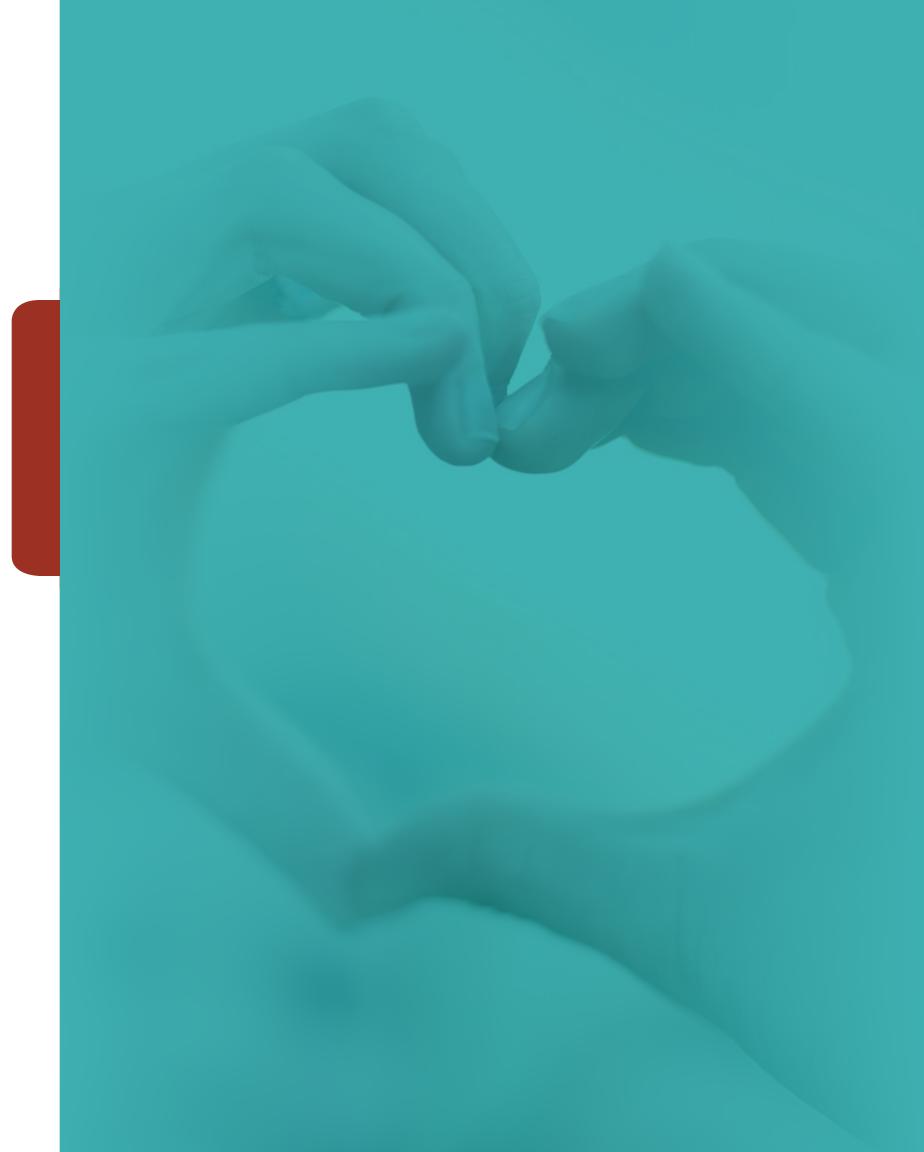
Planning for Your Discharge Starts Now

- You will be out of your "normal routine" for about 5-8 weeks after surgery. You should plan on being out of work for at least 6 weeks.
- You will need to have someone with you around-the-clock for the first 2 weeks after you go home. This person will help make sure you are eating, walking and taking deep breaths. They will also help you with lifting and driving you to your appointments. It will be about 5-6 weeks before you can drive yourself. We will help you look at other choices if no one is able to be with you. It is also important to realize that you will not be able to provide care to others during your recovery. This includes parents, spouse, children, grandchildren, and pets.
- We will go over your discharge instructions with you and your caregiver. They will need to bring some comfortable clothes for you to wear home. We will make sure that you feel prepared for discharge by the time you leave. On the day of discharge, we plan to have you out by noon.
- Now is also a good time to gather any papers you may need to have signed. This may include short-term disability or medical leave (Family Medical Leave Act). If you have a healthcare power of attorney or living will, please bring it with you to your pre-op visit. It will be scanned into the medical record and returned to you.
- It may be hard for you to walk upstairs after surgery. Decide the best place for you to sleep. Most patients find a chair that lays back to recline is the most comfortable. You may find that a shower chair is useful when you go home.
- Visitors should be kept to close family and friends. Children under age 16 are not allowed to visit you in the CVICU. Remind all visitors to wash their hands when coming in and leaving your hospital room. If a visitor is not feeling well, they should stay home.
- Please see enclosed brochure or Education Sheet which will be reviewed with you by a nurse during your pre-op visit.

Please see enclosed brochure or education sheet which will be reviewed with you by a nurse during your pre-op visit.

Your Big Day and Beyond







If you are coming from home:

- You will be scheduled for a pre-op visit. This appointment may take up to 2 hours.
- You may have more blood work and or x-rays done.
- You will meet with the anesthesiologist (person who puts you to sleep).
- You will be told what medications you will need to take before surgery and which medications to stop (and when).
- You will be told when and where to arrive at the hospital.
- Please make sure you do not eat or drink after midnight the night before your surgery.
- You will need someone to come with you the morning of surgery.
- You will be given special cleansing wipes to use the morning of surgery.

If you are currently in the hospital waiting for surgery:

- Your tests and visits will be done while you are waiting for surgery.
- You will meet with the anesthesiologist (person who puts you to sleep).
- You will not be able to eat or drink anything after midnight the night before surgery.

Getting Ready for Surgery

Pre-Op Teaching

- It will be very helpful during your journey if you review the information that you have been given.
- You will meet with a nurse who will go over what to expect before, during and after surgery.
- You will be able to ask questions and discuss any concerns you may have.



You will meet with a nurse who will go over what to expect before, during and after surgery.

Day of Surgery

- Your family should plan to be here early to see you before you go to surgery. You will be told what time they should be here.
- Please send any important or valuable items home.
- Your family will be given frequent updates during the surgery.
- The surgeon will meet with your family when surgery is over.
- It may be up to two hours after they meet with the surgeon before they can see you.
- Please check the brochure for visiting hours and restrictions.
- We encourage your family to go home and rest. They are welcome to call your nurse for any updates or concerns.

Your Intensive Care Experience

- You will be brought to a special intensive care unit after surgery.
- The nurses and care team are highly trained.
- Your care team meets many times a day to discuss your care. In some units the healthcare team can "camera in" to check on you.
- You will have many lines and tubes immediately following surgery.
- The breathing tube usually comes out six hours after surgery. Using your incentive spirometer will help you to take deep breaths once this tube comes out.
- Taking deep breaths is very important. It will help keep your lungs working well.
- Getting better after heart surgery is hard work. Our goal is to have you sitting in a chair the day after surgery.
- The healthcare team will watch you closely. This makes sleeping hard, so try to nap when you can.
- You will have pain after surgery. Your care team will work with you to reach an acceptable pain level.
- Your blood sugar will be watched closely. Insulin is a medication that may be used to control your blood sugar level.



Your Cardiac Floor Experience

- Your care team will make sure you are ready to go home.
- Everything that you do on this unit you will also need to do at home:
 - Walking 3 to 4 times a day
 - Staying out of the bed during the day
 - Using your incentive spirometer to make your lungs strong
- Someone will need to be with you at all times during the first two weeks after you go home. A Clinical Case Manager will discuss options if you do not have someone to be with you. Now is the time to make this plan.
- A Clinical Case Manager will meet with you to set up home health and discuss any discharge needs you may have.

In order to go home, you must:

- "Pee and poop"
- Use your incentive spirometer
- Walk at least three to four times a day with minimal help
- Have your pain controlled
- Meet with the Cardiac Rehab Nurse



Now is a good time to review your discharge materials with the healthcare team and your family.



Completing Your Journey





Completing Your Journey to a Healthier Heart

- You will be given follow-up appointments to meet with your surgeon and healthcare team.
- Going home does not mean you are on your own. Your care team will give you numbers to call with any concerns you may have.
- You should call the surgeon's office for the following concerns:
 - Redness, swelling or warmth around your incision site(s)
 - Fever of 101° or higher that is not helped by Acetaminophen (Tylenol)
 - Drainage that is yellow, green or thick coming from your incision site(s)
 - Increased shortness of breath
 - Weight gain of more than three pounds in one day or five pounds in one week
 - New or increased swelling in your hands or feet.
- Your eating and sleeping will take time to return to normal.
- Call 911 for all emergencies.

- Poor appetite is common; try to eat enough protein.
- You may feel sad or a little "blue" after surgery
- You will have some "up" days and some "down" days.
- This will get better over time.
- Your nurse will review your discharge medications with you.
- Your discharge information will have all your appointments and medications listed for you.
- It is important to weigh yourself each day. In this notebook, we have given you a chart to help keep track of your weight, blood pressure and heart rate. If you do not have a scale to weigh yourself, please let your nurse know.

Resources to Help with Your Recovery:

- Mended Hearts: Volunteers who have had heart surgery like you.
- Patient Family Advisory Council (PFAC): This group of former patients and family members work with the healthcare team to develop educational materials and support for our patients.
- Local places to eat and places for your family to stay.

Frequently Asked Questions About Open Heart Surgery

When will I be able to drive?	Your surgeon will generally clear you to drive between 4-5 weeks after surgery.			
When will I feel like my "old self again"?	For most patients, it takes anywhere from 4-6 weeks before you feel like you are back to your old self.			
When can I shower?	Your surgeon will let you know when you can shower. Generally, you can shower when you go home if you feel like you have enough energy. You will not be able to take tub baths, go swimming, or go in a hot tub till after your follow up visit with your surgeon.			
What are my major restrictions?	You will be on "sternal precautions" for about 2-3 months. You will not be able to lift more than 10 pounds during that time. Pushing, pulling and using your arms for support must be avoided. It takes about 2-3 months for your breast bone to completely heal. Your surgeon will lift some of your restrictions during your follow up appointment. Sexual activity can usually be safely resumed after your follow up appointment with your surgeon.			
What type of care do I need when I go home?	When you go home, you will need someone with you at all times. They will cook and clean for you as well as driving you to and from your appointments. Having people around to remind you to walk four times a day and use your incentive spirometer is important for your recovery.			
When will I no longer need pain medications?	Pain is different for each person. Some people are able to decrease their pain medicine by the time they go home. Most patients find that being active and walking helps to decrease the need for pain medicine.			

Why is it so important to join a cardiac rehabilitation program?	Cardiac rehabilitation helps you improve your endurance and strength following your heart procedure. Their goal is to help you make a full recovery so you can return to an active, healthy lifestyle. Patients who attend cardiac rehabilitation are less likely to be readmitted to the hospital with another heart event. Patients who complete the program have a greater chance of living longer.
What are some of the biggest recovery issues patients report?	Most patients report their appetite takes time to return to normal. Eating small meals packed with protein will help. Night sweats along with cold spells are common in the early weeks of recovery. These symptoms are your body's normal response to open heart surgery and will pass in time.
Is it normal to feel fine one day and terrible the next?	Yes, patients often report feeling fine one day and having little energy the next. You may feel fine for part of the day and then feel tired and worn out later in that same day. It will take a while for you to get a good night's rest. It is normal to wake up many times a night during the first few weeks. Avoid drinks with caffeine after 12 noon, and try not to sleep during the day hours.
What will my incision look like when it finally heals?	For most patients, the incision will turn into a small scar which may fade over time. The glue used after surgery to protect your incision will dissolve on its own. Do not scrub the incision sites or use any powder, lotions or scar cream. The swelling or bump at the top of your incision will return to normal over the next few weeks.

Your journey to a healthy heart is hard work. We are here to support you every step of the way!

Open Heart Log

Weigh yourself every day:

- At the same time in the morning, on the same scale
- After you have gone to the bathroom
- Before you eat breakfast
- Wearing similar clothes/no shoes

Call your doctor if:

- Heart rate is greater than 100 or feels fast or seems slow
- Blood pressure is higher/lower than usual

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Advice for Caregivers from Caregivers

Here are actual tips and thoughts from family members of our heart patients. This section is for you. While you may not be the patient, this experience can seem scary and unfamiliar.

Taking Care of Yourself

The night of surgery:

- "Go home and get a good night's sleep...Don't feel guilty about leaving the hospital to get a good night's sleep because you need to be rested when they come home from the hospital." By the way, most hospitals do not allow an overnight guest the night of surgery.
- The nurse will give you a phone number that you can call to check on your loved one if you wake up during the night.

During the Hospital Stay:

- Keep the number of visitors in the Intensive Care Unit down. If it is hard for you to turn visitors away, the nurses can do it for you.
- Take notes on things that are important. You are both stressed and it is easy to forget even the simplest of instructions.
- While you are visiting and your loved one is napping, take a nap too.

At home:

- Look after yourself as well.
- If someone is visiting, take a walk around the block and get some fresh air.
- Let someone else walk your dog for the first couple weeks.
- Nap when the patient is napping. Life is pretty intense for the first two weeks, then it starts to get easier.

What to Take with You to the Hospital:

- Phone charger(s)
- Tablet/iPad
- Reading material
- Money for lunch or parking
- Snacks
- Bottled water
- Lip balm for the patient
- Phone numbers of those you want to contact
- Wear comfortable clothing and bring a light sweater or jacket (hospitals tend to be cold). Don't be afraid to ask for a blanket.

Day of Discharge:

Have everything ready for your loved one to rest before you come home from the hospital:

- Bed or recliner (use a fitted twin sheet to make it feel more like a bed)
- It's hard to lay flat for several weeks.
- Try various pillows, blankets, and positions until you find one that's comfortable.

- Multiple pillows will be necessary (4 or 5 is not unusual).
- A chair at the end of the foot of the recliner helps support the feet when the patient slides down in the chair. It also provides a place to set the blankets and pillows when they get up.
- Remind your loved one of the importance of keeping their feet elevated at all times to reduce swelling.
- Small portable fan (to help regulate temperature and noise without getting up)
- Music player with earbuds
- Earplugs may be useful for sleep
- You'll want everything they need to be close by.
- Clear path to the bathroom without rugs or cords to trip over.
- A raised toilet seat makes it easier to get up and down for the first few weeks.
- A headlamp or flashlight makes it easier to navigate in the middle of the night.

Medications

- Have a notepad (or use the medication form) to write down when you give all their meds and what time they were given.
- Have a notepad and pen to make note of visitors, gifts, flowers, etc. This makes it easier to write thank you notes later.
- This notepad is also useful for you to write down questions for the home health nurse and the doctor.

At Home After Surgery

- Either you or someone will need to be with the patient all the time for the first 12 to 14 days.
- If you need something from the grocery store, drug store, etc., don't hesitate to ask a friend to help. People really want to help and LOVE getting an assignment. It makes them feel special and important.
- If people offer to provide a meal, take them up on it. It's one less thing for you to do.
- Put a note on the doorbell for people not to ring or disturb you. People mean well but don't always think about what is best for the patient.
- If someone calls and asks if they can visit, set a time limit for their visit. You could say something like,
 "We are looking forward to seeing you. To keep us well rested, please limit your visit to 30 minute or less."
- Initially, ask friends to send emails or text messages rather than phone calls of support and concern.

Home Health

- This is set up while your loved one is in the hospital.
- These people are great. They are a good support to you in understanding medications and the recovery process.
- Keep a running list of questions so you won't forget what you wanted to ask them when they arrive.

Incision Care

- The incision may be raised and reddish-purple for a while. It usually heals in a thin, clean line.
- Gently wash it with soap and water, then dry it completely.

Mood Changes

- Frustration as well as a "roller coaster" of emotions is common for both of you. Don't let these mood swings get the best of you.
- Crying over little things may happen as well.
- This gets better as they get better and start doing more usual activities.

Personal Grooming

Clothes

- Encourage wearing layers of clothes. It's easier to deal with the frequent temperature swings.
- Sweat/jogging pants, shirt, blanket, socks, knitted cap, blanket and shawl might be useful.
- Socks: the ones from the hospital give great traction, but may cause a sensitivity over time. Switch it up with slippers or tennis shoes.

Most people will tell you that our minds control so much of our recovery. It shapes your outlook as well as your attitude.

Cleansing

- Have toothbrush, toothpaste, hand wipes, tissues and a trash can nearby.
- Taking that first shower will help make your loved one feel normal. Stay close by during that time.
- A shower chair will allow the patient to sit down and keep them from getting so tired.
- A hand-held shower head may also be helpful.
- Think about having someone come to the house to cut and/or style the patient's hair as a treat.
- "I never knew how hard it was to put socks on someone else. We both just worked harder to keep our sense of humor."

Communication/Technology

- Since one person may be sleeping upstairs while the other is downstairs, communication may be an issue.
- A baby monitor or cordless intercom system will allow communication without shouting. You can also use your cell phones to keep you rested from climbing too many stairs.

Entertainment

- Enjoy the chance to catch up on TV shows and old movies while you sit with your loved one.
- Reading a book and or listening to music will help pass the time for both of you.

Exercise

- Breathing exercises with the incentive spirometer are still really important. Be a cheerleader and encourage them to use their incentive spirometer.
- Walking remains important! Try to increase the distance and frequency a little every day. Fresh air and walking is something that helps both of you.
- If they overdo it one day, they may feel more tired the next day.
- Help them keep realistic goals when it comes to walking.

Food/Snacks

- Finding foods for your loved one to eat is hard. Their lack of appetite can be frustrating at times. Here are some suggestions of possible foods to offer
 - Dried nuts and/or fruit make a handy snack
 - Eggs and dry toast
 - Ensure/Glucerna/ or Carnation Instant Breakfast are good options with protein and calories

Respectfully reviewed by our Patient Family Advisory Committee (PFAC).

Notice of Non-Discrimination and Accessibility

Carolinas HealthCare System complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Carolinas HealthCare System does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Carolinas HealthCare System:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - _ Information written in other languages
- If you need these services, call 1-800-821-1535

If you believe that Carolinas HealthCare System has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Steven B. Martin Vice President Carolinas HealthCare System 720 East Morehead Street Charlotte, NC 28204 704-355-3777 (phone) 704-355-7449 (fax) steven.martin@carolinashealthcare.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Steven B. Martin, Vice President, is available to help you.

You can also file a civil rights complaint with the US Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby. jsf, or by mail or phone at:

US Department of Health and Human Services 200 Independence Avenue SW Room 509F, HHH Building Washington, DC 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-821-1535.

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-821-1535。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1- 800-821-1535.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-821-1535 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-821-1535.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-1535-280 (رقم هاتف الصم والبكم: .

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-821-1535.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-821-1535.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-821-1535.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-821-1535.

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-821-1535.

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-800-821-1535 まで、お電話にてご 連絡ください。

ប្រយ័គ្ន៖ បើសិនងាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតឈ្នួល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 1-800-821-1535 ។

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-821-1535 पर कॉल करें।

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-800-821-1535.

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Carolinas HealthCare System Sanger Heart & Vascular Institute