

Path to Recovery After Heart Surgery



Appointments

Family Doctor - call for an appointment	Within 1 week after discharge.
Cardiologist - call for an appointment	Within 3 to 4 weeks after discharge. (If you do not have one, your family doctor will refer you to someone.)
Cardiac Surgeon - the office will call you for an appointment	6 to 8 weeks or _____
Cardiac Rehabilitation - the office will call you for an appointment	6 to 8 weeks

Other appointments:

Valve surgery patients: Call your surgeon before having dental, bowel or bladder procedures, and/or if you have any signs of infection.

What is my goal?

[illegible]

Topics	How well I understood?	Path to Recovery	Teach-back completed by and when
Follow up appointments or tests	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page (i)	
What to expect in the hospital and preparing to leave.	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 4 to 5	
Medication at home (You may fill your prescription at the Hamilton General Drugstore)	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 18	
Incision care	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 15 to 16	
Managing pain at home	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 26 to 27	
Taking care of myself at home:			
• Bathing/shower	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 15	
• Driving	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 36	
• Lifting	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 36	
• Be smoke-free	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 53 to 55	
Managing symptoms:			
• Ankle and leg swelling	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 17	

Topics	How well I understood?	Path to Recovery	Teach-back completed by and when
Managing symptoms (continued)			
• Constipation	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 28 to 29	
• Palpitations	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 59	
• Chest pain	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 59	
• When to call for help	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 59	
Physical activities:			
• Exercise at home	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 32 to 38	
• Save your energy	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 39 to 42	
• Sleep	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 30	
Eating heart healthy at home	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 43 to 49	
Managing Diabetes	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Pages 50 to 52	
Managing your emotions	<input type="checkbox"/> I understand what I need to do. <input type="checkbox"/> I need more help understanding.	Page 31	
Returning to work	<input type="checkbox"/> Ask your surgeon when you can return to work.		
Hamilton Niagara Haldimand Brant Local Health Integrated Network (HNHB LHIN)	<input type="checkbox"/> The health care team made plans for additional care at home, if needed		
Post-op video Discharge class	<input type="checkbox"/> I watched the video. <input type="checkbox"/> I attended the class.		

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Introduction

It takes time and effort to recover after heart surgery. You are now on the path to recovery from your heart surgery.

This book is your guide for 6 to 8 weeks after your surgery and includes information on:

- what to expect after your surgery
- what food to eat after surgery
- what exercises to do after surgery
- what to avoid after surgery
- how to take care of your incisions
- when to get medical help
- cardiac rehabilitation programs

We hope this book helps you take part in your own care and well-being. Any member of the health care team will be pleased to speak with you at any time – no question is too small to ask.

Welcome to 5 South

How will I feel after my surgery?

The first few days on 5 South you may feel:

- Very tired and weak. This is normal and will pass.
- A sore and dry throat. This is from the breathing tube used during surgery. Try sucking on ice chips to relieve the discomfort.
- The sensation of your heart beating in your chest. This will happen more often when you lay in bed. You should not feel a very fast, pounding heart beat. Tell your nurse if you feel dizzy or like you have just run a race. Your heart monitor will alert staff if your heart is beating irregularly. You will get medications to treat this.
- Pain when breathing deeply or coughing. You will get pain medication to treat this.
- Pain in your incisions. The pain may feel like burning, itching or tingling along your incisions. The incisions can also feel numb. You will get pain medication to treat this.
- Shortness of breath with activity. Your shortness of breath should be easily relieved by slowing down or sitting down. Tell your nurse if you are short of breath when resting or lying in bed. Practice the breathing and coughing exercises that the physiotherapist will teach you.
- Trouble sleeping. The ward is busy and noisy. Try getting naps when ever you can.
- Forgetful and unable to think. Surgery can be stressful. This will likely pass.
- Constipated the first 2 to 3 days after surgery. You should have your first bowel movement within 3 days and go back to your normal bowel routine.







The staff on 5 South will work with you to make a plan for your care. Your goals on 5 South include:

- Start and continue eating a no added salt diet.
- Teaching you how to sit up in bed or a chair.
- Taking short walks with staff at first and then by yourself when you are ready.
- Teaching you breathing exercises.
- Teaching you exercises for home.
- Keeping your bowels moving.
- Reviewing your home medications.
- Referring you to a cardiac rehabilitation centre of your choice.

What to expect after surgery

The information in the chart on pages 4 and 5 will help you learn what to expect while in the hospital and how to prepare to go home.

Note: These are guidelines only. Each patient's recovery is different.

GOALS	Post-op Day 1	Post-op Day 2
Pain Management 	<p>You will get pain medication regularly.</p> <p>Let your nurse know if you need stronger pain medication.</p>	<p>Start asking for pain medication when needed.</p> <p>Do not let pain get severe.</p>
Activity 	<p>You will:</p> <ul style="list-style-type: none"> do deep breathing and coughing exercises do calf exercises sit in a chair <p>Support your chest.</p>	<p>You will:</p> <ul style="list-style-type: none"> do deep breathing and coughing exercises. sit in a chair with each meal walk with a nurse or physiotherapist <p>Bring shoes that fit.</p> <p>Support your chest.</p>
Nutrition 	<p>You may begin to eat a no added salt diet.</p>	<p>You will continue to eat a no added salt diet.</p>
Bowel and Bladder 	<p>You will:</p> <ul style="list-style-type: none"> have a urine catheter start to pass gas 	<p>You will:</p> <ul style="list-style-type: none"> have the urine catheter removed have your urine measured pass gas be weighed
Bathing 	<p>You will have help with bathing at the bedside.</p>	<p>You will have help with bathing at the bedside.</p>
Going home – help from family and friends 	<p>Bring in glasses and hearing aids.</p> <p>Let the nurse know of any concerns about going home, including barriers you think may affect your family/friend's discharge home.</p>	<p>Bring:</p> <ul style="list-style-type: none"> shoes that are supportive list of medications from home music and headphones <p>Let the nurse know if your family or friend is having trouble sleeping in the hospital.</p>

Post-op Day 3	Post-op Day 4	Post-op Day 5
Continue to ask for pain medication when needed.	Continue to ask for pain medication when needed. You will likely need less pain medication to feel comfortable.	Tylenol will likely control most of your pain. A prescription for stronger pain medication will be given for home.
You will: <ul style="list-style-type: none"> • sit in a chair with each meal • get up to the bathroom independently, if able • walk by yourself 3 times a day Support your chest.	You will: <ul style="list-style-type: none"> • sit in a chair with each meal • walk by yourself 3 times or more a day • practice stairs with a physiotherapist Support your chest.	You will be independent with no assistance, including walking and getting in and out of bed. Support your chest.
You will continue to eat a no added salt diet.	You will continue to eat a no added salt diet.	You will continue to eat a no added salt diet.
You will: <ul style="list-style-type: none"> • have the urine catheter removed • have your urine measured • pass gas • be weighed 	You will: <ul style="list-style-type: none"> • have a bowel movement; If not, let your nurse know • be weighed 	You will have at least one bowel movement before discharge.
You will have help with bathing if needed.	You will bathe independently.	You will bathe independently.
A family member or friend can help you walk if approved by your nurse or physiotherapist. Arrange to have someone pick you up on your discharge day. Bring in loose clothing to wear home when discharged.	You may be discharged home on day 4 or day 5. Ask the nurse for the estimated time of your discharge. Bring a wheelchair up from the front entrance for your family member.	You may be discharged home on day 4 or day 5. Ask the nurse for the estimated time of your discharge. Bring wheelchair up from front entrance for your family member.

Eating well after surgery

Your body is working hard to recover and heal so eating well is important. Your appetite may be poor at first but should improve day by day.

Make sure you eat foods with protein at your meals – not just the liquids like tea and juice.

Foods with protein help the body to heal and include:

- fish, chicken, turkey and other meats
- legumes such as kidney beans, chick peas and lentils
- nuts, nut butters and seeds (unsalted)
- milk and alternatives – milk, yogurt and cheese

If you feel too full to finish your meals, snack between meals and in the evening. Here are some snack ideas:

- crackers and partly skimmed milk cheese
- crackers and peanut butter
- pudding
- sandwich
- yogurt

You may also try a nutrition supplement to help increase your intake of calories and protein. Examples of nutrition supplements include:

- Ensure®
- Boost®
- Carnation Breakfast Essentials®

They are available in the hospital and at most grocery stores or pharmacies.

If your appetite does not improve while you are in the hospital, ask to see the Registered Dietitian. If your appetite continues to be poor at home and you are losing weight, contact your family doctor.

Once your appetite returns, it is important to follow the heart healthy eating guidelines on pages 43 to 49.

Confusion or Delirium

Confusion, also called delirium, is a sudden confused state of mind. It may occur during illness or after an operation. It is more common in elderly patients who have become ill and go into the hospital.

Signs of delirium:

- unable to remember where you are
- unable to pay attention
- restless or upset
- seeing or hearing imaginary things
- sometimes okay but at other times very confused

What are the causes of delirium?

Some of the causes of delirium are medications, infection and being in the hospital. You are more likely to get delirium if you have any of these conditions:

- memory or thinking problems
- severe illness
- dehydration
- problems with seeing or hearing

If you develop delirium, the health care team will try to figure out what is causing the confusion, which usually means doing tests and asking your family questions about you before you came to the hospital.

How is delirium treated?

Treatment may include medications. There are also many things family members can do to help.

How can my family member help?

1. Promote healthy rest and sleep

- Reduce noise, distractions or overstimulation.
- Encourage use of eye covers, earplugs or music headphones.
- Add comfort with a familiar pillow, blanket, warm drink or back rub.
- If needed, family members may stay overnight.

2. Promote hydration and healthy eating

- Bring in favourite foods if you are not eating well.
- Help fill out the daily menus.
- Encourage and help with eating at mealtimes.
- Encourage fluids after checking with the nurse.

3. Promote physical activity and discourage immobility

- Encourage the patient to sit up and walk as directed by the health care providers.
- Ask the nurse about how they can help with exercises and activities.

4. Promote healthy hearing and vision

- Encourage the use of hearing aides and make sure the batteries are working.
- Encourage the use of eye glasses. Make sure it is the right pair and they are clean.

5. Promote mental stimulation

- Remind the patient of the date, time and reason he or she is in hospital and how long they have been there.
- Arrange for familiar people to visit.
- Talk about current events and topics.
- Read aloud or play mentally stimulating games.
- Bring in pictures of family and friends and encourage conversation.

Delirium often clears in a few days or possibly weeks with most people. Some may not respond to treatment for many weeks. You may continue to have problems with memory or thinking after you leave the hospital.

Exercise and activity

Right after your surgery, rest is very important. You will begin more activity by doing some of your own personal care and getting out of your bed into a chair. You will slowly increase the amount of walking you do.

Stop, rest and tell your nurse or therapist right away if you have these feelings during activity:

- chest pain or discomfort (After heart surgery some chest discomfort may be normal. You should not have angina symptoms.)
- pressure or tightness in your chest
- shortness of breath or trouble breathing
- lightheaded or feeling faint
- palpitations or feeling your heart is going very fast
- clicking in your sternum or breastbone

While on 5 South, your physiotherapist will teach you two ways to measure exercise and activity:

1. Measure how hard you feel you are working. See The Rate of Perceived Exertion (RPE) Scale on page 12.
2. Measure your pulse, also called heart rate. Your pulse is how many times your heart beats in a minute.

If you have a heart rhythm called atrial fibrillation, your pulse will be irregular. You will use the Rate of Perceived Exertion (RPE) Scale on page 12.

The Rate of Perceived Exertion (RPE) Scale

The Rate of Perceived Exertion or RPE Scale is used to measure how easy or hard you find an activity.

The scale has numbers from 0 to 10. For example, 0 (nothing at all) would be how you feel when you are resting in a chair.

Try to reach level 3 to 4 on the RPE Scale when you exercise.

When you use this scale, include any symptoms such as shortness of breath and how tired you feel in your legs and body.

The Rate of Perceived Exertion (RPE) Scale

0..... Nothing at all, very easy

1..... Very slight

2..... Slight

3..... Moderate

4..... Somewhat hard

5..... Hard

6.....

7..... Very hard

8.....

9..... Very, very hard (almost maximal)

10..... Maximal

To take your pulse, follow these steps:

1. Rest for 15 minutes.
2. Put 2 fingers of one hand on your opposite wrist, just below the thumb. If you have trouble finding your pulse, talk to your nurse or therapist.
3. Count your pulse for 15 seconds. This is your resting pulse rate.
4. To guide your level of exercise, take your pulse during _____ or exercise:
 - You want your pulse to increase 5 beats in 15 seconds.
 - If you take a beta blocker medication, your pulse should only increase 3 beats in 15 seconds. A beta blocker medication lowers your heart rate. See page 20 for information on beta blockers.



If your pulse is higher than these guidelines, you need to slow down or rest.

Your pulse should never be higher than 30 beats in 15 seconds or 120 beat in a minute.

5. Tell your doctor, nurse or therapist if you feel any changes in your pulse, such as:
 - pauses
 - sudden fast beats
 - irregular beats

Use your pulse to judge if you are doing enough exercise. Gradually increase your activity when your heart rate or pulse is not increasing while you exercise.

Medications

Many of your medications may change after surgery. You will get new prescriptions before you leave the hospital. There are no repeats on these prescriptions. Your family doctor will review and renew these prescriptions.

Your nurse will review your medications with you before you leave the hospital. Make sure you know what changes have been made. If you have any questions please ask.



At home

This section of the book has information about what you will need to do at home to keep healthy.

Incision care

Your incisions should be dry and have no open areas after the staples have been removed and sutures dissolved. Any drainage from your incisions should be clear and in small amounts.

The muscles in the front of your chest will be tender for at least 3 months after surgery. Your bones will start to heal within 6 to 8 weeks after surgery but may take up to several months to heal completely.

During the first few weeks you are home, your incision area may be bruised. It may also be sore, feel numb or itch. Your incisions will heal and lighten in colour over several months. You may notice a lump at the top of your chest incision. This is normal and will disappear over time.

Tips to help your bones heal the first 6 to 8 weeks after surgery

Do Not:

- lift, push or pull anything heavier than 10 pounds or 4.5 kilograms
- raise your arms over your head to do work such as cleaning out a cupboard
- sit behind an airbag until your surgeon gives you permission

Do:

- hug a pillow or rolled up blanket when you cough to provide support to your chest

Tips to prevent infection:

- Keep your incisions clean with mild soap and water daily.
- Do not scrub your incisions. Pat dry.
- Have warm showers instead of baths. Do not let the water hit your chest. Turn your back to the shower water.
- Do not pull sutures if you see them – they will dissolve or fall out on their own.
- Do not use any lotions or creams on any open areas or scabbed areas unless prescribed by your doctor.
- Do not pick at any scabs forming. Let them fall off naturally.

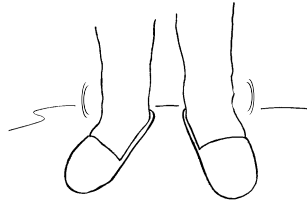


Contact your heart surgeon if you have:

- increased drainage from your incisions, redness or swelling in your incisions
- new pain in your incisions
- fever or chills with a temperature above 38°C or 100°F
- flu-like symptoms with any type of discharge from your incisions

Leg and ankle swelling

Your feet and ankles may swell for several weeks after your surgery. This swelling should decrease when you elevate your feet, especially at night when you sleep. The swelling can last up to a month.



Tips to decrease swelling in your feet and ankles when at home:

- Elevate your feet when you rest.
- Do not cross your legs.
- Wear TED® support stockings or anti-embolism stockings given to you in the hospital. If you did not get these talk to your family doctor or the staff at the Cardiac Health and Rehabilitation Centre at 905-577-8033.
- Walk daily.
- Do your feet, ankle and leg exercises daily.
- Do not stand in one position for a long period of time without moving your feet.

Weigh yourself once a day in the morning and after you first use the bathroom. Use the Weight Diary on page 60 to record your weight.

Medications at home

Medications are used for many reasons. You will have your own medication plan to follow based on your condition. You may need medication to:

- lower your blood pressure
- help your heart beat more slowly and strongly
- relax and open up the blood vessels
- help keep your heart beat in a regular rhythm
- manage your blood cholesterol levels
- increase the iron in your blood
- help keep your bowels moving regularly
- remove excess water

Take your medications as prescribed, even when you feel better. You may need to continue some medications to help you stay well. Never take anyone else's medications. Do not share your medications with other people.

The chart on the next few pages lists the common medications used to treat heart disease. Medication names are listed by their generic name first and then some of the common trade names in brackets.

Type of medication	Generic and Trade Names (Generic names are listed first with no capital letters)	What medication does
Ace Inhibitors	benazepril (Lotensin®) captopril (Capoten®, Apo-Capto®) cilazapril (Inhibace®) enalapril (Vasotec®) fosinopril (Monopril®) lisinopril (Prinivil®, Zestril®) perindopril (Coversyl®) quinapril (Accupril®) ramipril (Altace®) trandolapril (Mavik®)	<ul style="list-style-type: none"> • helps slow down the further weakening of the heart • treats heart failure • lowers high blood pressure • improves blood flow to and from the heart • delays or prevents kidney damage from diabetes
Angiotensin Receptor Blockers (ARB's)	candesartan (Atacand®) eprosartan (Teveten®) irbesartan (Avapro®) losartan (Cozaar®) telmisartan (Micardis®) valsartan (Diovan®) olmesartan (Olmetec®)	<ul style="list-style-type: none"> • lowers blood pressure • treats heart failure • improves blood flow to and from the heart

Type of medication	Generic and Trade Names (Generic names are listed first with no capital letters)	What medication does
Beta Blockers	acebutolol (Sectral® , Monitran®) atenolol (Tenormin®) bisoprolol (Monocor®) carvedilol (Coreg®) labetalol (Trandaxe®) metoprolol (Lopressor®) nadolol (Corgard®) pindolol (Visken®) sotalol (Sotacor®) timolol (Blocadren®)	<ul style="list-style-type: none"> lowers heart rate and blood pressure helps to treat and prevent angina helps to prevent a heart attack in patients who have had one keeps your heart beat in a regular rhythm
Calcium Channel Blockers	Heart rate controlling: diltiazem (Cardizem®SR, Cardizem®CD, Tiazac®) verapamil (Isoptin®, Isoptin SR®, Chronovera®)	<ul style="list-style-type: none"> lowers heart rate and blood pressure helps prevent and treat angina keeps your heart beat in a regular rhythm
	Non-heart rate controlling: amlodipine (Norvasc®) felodipine (Plendil®, Renedil®) nifedipine (Adalat PA, Adalat XL®)	<ul style="list-style-type: none"> lowers blood pressure helps prevent and treat angina

Type of medication	Generic and Trade Names (Generic names are listed first with no capital letters)	What medication does
Diuretics	amiloride hydrochloride (Amilide®) furosemide (Lasix®) hydrochlorothiazide (Apo/Hydro®/ Novo-Hydrazide®) indapamide (Lozide®) metolazone (Zaroxolyn®) spironolactone (Aldactone®)	<ul style="list-style-type: none"> • removes excess fluid from the body which reduces swelling • lowers high blood pressure
Lipid Lowering Agents	<p>Statins: atorvastatin (Lipitor®) fluvastatin (Lescol®) lovastatin (Mevacor®) pravastatin (Pravachol®) rosuvastatin (Crestor®) simvastatin (Zocor®)</p> <p>Fibrates: bezafibrate (Bezalip®) fenofibrate (Lipidil Micro®, Lipidil Supra®, Lipidil® EZ) gemfibrozil (Lopid®)</p> <p>Others: ezetimibe (Ezetrol®) nicotinic acid (Niacin)</p>	<ul style="list-style-type: none"> • lowers total cholesterol and LDL cholesterol (bad cholesterol) • lowers triglycerides • increases HDL cholesterol (good cholesterol)

Type of medication	Generic and Trade Names (Generic names are listed first with no capital letters)	What medication does
Nitrates	Long acting: isosorbide dinitrate (Isordil®) nitroglycerin patch (Nitro-Dur®, Minitran®) isosorbide mononitrate (Imdur®)	<ul style="list-style-type: none"> relaxes blood vessels to reduce the work of the heart treats and prevent angina
	Short acting: nitroglycerin spray (Nitrolingual Pumpspray®) nitroglycerin sublingual tablets (Nitrostat®)	<ul style="list-style-type: none"> relaxes blood vessels to reduce the work of the heart gives immediate relief of your angina pain
Platelet Inhibitors and Anticoagulant Medications	acetylsalicylic acid (Aspirin®, Entrophen®, Novasen®, ASA) clopidogrel (Plavix®) warfarin (Coumadin®)	<ul style="list-style-type: none"> prevents blood clots or platelets from sticking together helps to reduce the chance of another heart attack you may be on more than one of these
Other	amiodarone (Cordarone®) digoxin (Lanoxin®)	<ul style="list-style-type: none"> keeps your heart beat in a regular rhythm lowers heart rate and strengthens the heart
	hydralazine (Apresoline®)	<ul style="list-style-type: none"> lowers blood pressure and treats heart failure

Sometimes a medication can be a combination of 2 different medications. Here is a list of some of these medications.

Brand name	Generic names of medication in product
Accuretic™	quinapril and hydrochlorothiazide
Altace-HCT®	ramipril and hydrochlorothiazide
Aldactazide®	spironolactone and hydrochlorothiazide
Apo®-Triazide	triamterene and hydrochlorothiazide
Atacand® Plus	candesartan and hydrochlorothiazide
Avalide®	irbesartan and hydrochlorothiazide
Caduet™	amlodipine and atorvastatin
Coversyl® Plus	perindopril and indapamide
Coversyl® Plus HD	perindopril and indapamide
Coversyl® Plus LD	perindopril and indapamide
Diovan-HCT®	valsartan and hydrochlorothiazide
Hyzaar®	losartan and hydrochlorothiazide
Hyzaar®DS	losartan and hydrochlorothiazide
Inhibace® Plus	cilazapril and hydrochlorothiazide
Micardis® Plus	telmisartan and hydrochlorothiazide
Olmetec® Plus	olmesartan and hydrochlorothiazide
Prinzide®	lisinopril and hydrochlorothiazide
Tenoretic®	atenolol and chlorthalidone
Teveten®Plus	eprosartan and hydrochlorothiazide
Viskazine®	pindolol and hydrochlorothiazide
Vaseretic®	enalapril and hydrochlorothiazide
Zestorectic®	lisinopril and hydrochlorothiazide

Tips to help you manage medications:

- Know the names of your medications, how much and when you need to take.
- Use a pill organizer or blister pack (prepared at your pharmacy) to help you remember to take your medication.
- When at home do not stop any medication unless told by your family doctor, cardiologist or heart surgeon.
- Speak to your doctor or pharmacist when the medication label says “0 repeats”. This does not mean you are to stop this medication, it may mean that it needs to be re-ordered by your doctor. Your doctor may want to see you to monitor your health.
- Bring all your medications in their original bottles to your doctor appointments.
- Wear a Medic Alert® identification if you are on warfarin, have a permanent pacemaker, implantable cardioverter defibrillator device (ICD) or a mechanical heart valve.

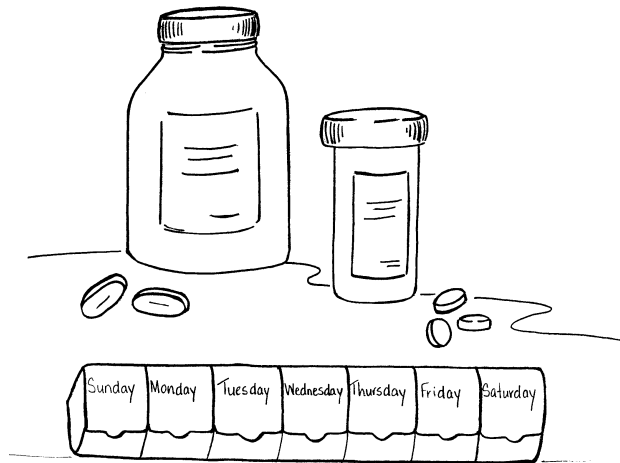


Ask your community pharmacist for a medical alert identification form or - visit www.medicalert.ca

- If you are going to be away from home, carry enough medication with you so you do not miss a dose.
- Read the medication handouts from the pharmacy. These handouts tell you about the problems your medications can cause and when to contact your doctor.

- Get rid of any medications you no longer use. Take your unused medications to your pharmacy for environmentally safe disposal. Do not throw medication in the garbage, down the sink or toilet.
- Call your doctor, nurse or pharmacist if you have any questions about your medication.

Carry an up-to-date list of your medications and the amounts you take with you all the time. Do not stop taking your medications without talking to your doctor first.



Managing pain at home

Take your pain control medication when you are in pain. Follow the directions on the label. Take pain control medication before the pain is severe. Too much pain will slow down your recovery. When you have pain it is hard to sleep, eat or be active.

You should be able to increase your activity as your pain decreases.

Call your surgeon if you have increased pain in your incisions.

Tips to help you take your pain control medication:

- Follow the directions on the label. Usually you can take 1 or 2 pain medication tablets every 4 to 6 hours. Try taking one tablet of pain medication initially. Give the medication 60 minutes to work.

If you still have pain after 60 minutes, then take the second tablet.

- If the pain control medication makes you dizzy or doopey, take less pain control medication the next time you need it.
- Do not drink alcohol while you are taking pain control medication.
- Do not drive or operate machinery while you are taking pain medication.
- If you feel dizzy, sit or lie down until you are no longer dizzy. Then get up slowly.
- Narcotic pain medication such as codeine and oxycodone can cause constipation. Plain acetaminophen (Tylenol®) does not cause constipation. See page 28 for tips to help manage constipation.

Angina pain

You should not have angina pain. If you think you have angina pain, do the steps in the chart below.

1	Rest	Stop what you are doing right away. Sit or lie down. This will decrease the work of the heart.
2	Relax	Take slow, deep breaths.
3	Take nitroglycerin	Take your nitroglycerin as prescribed: <ul style="list-style-type: none">• take your 1st dose of nitroglycerin. Spray or place tablet under your tongue.• if the chest pain does not go away after 5 minutes, take a 2nd dose.• if the chest pain is still there after 5 or more minutes (now a total of 10 minutes), take a 3rd dose.
4	Get help	If you still have chest pain or discomfort after taking 3 nitroglycerins at 5 minute intervals (now a total of 15 minutes): <ul style="list-style-type: none">• have someone call 911 for an ambulance right away.• do not drive yourself to the hospital.

Managing constipation at home

Constipation is straining or pushing to have a bowel movement or pass stool. You have constipation when your pattern of bowel movement changes and you find it hard to pass stool.

Other signs of constipation:

- Your stomach feels bloated.
- You do not feel hungry. You have nausea.
- You feel the urge to have a bowel movement, but when you sit on the toilet nothing happens.
- You need to push a lot to have a bowel movement.
- Your stool is very hard.

Keep a diary of your bowel movements at home for the first few weeks after surgery. It is common to have changes in your bowel movements during this time.

At home, if you have not had a bowel movement for 2 days, take a medication for constipation.

Medication for constipation

Stimulant laxatives

Use stimulant laxatives only when needed. When stimulant laxatives are used for too long, your bowel becomes weak and lazy and it is hard to get bowel control back.

Stimulant laxatives help your bowel muscles to push stool out. You may feel some cramps as the bowel muscles begin to work.

It may take 6 to 12 hours to have a bowel movement after taking a stimulant laxative.

Suppositories usually work within 15 minutes.

You can buy the recommended laxatives below at the pharmacy without a prescription:

- **Bisacodyl** – brand names include, Apo®-Bisacodyl, Dulcolax®, PMS-Bisacodyl®, Correctol® and Feen-A-Mint®
- **Senna** – brand names include senokot

Stool softeners

Stool softeners help the stool hold water and become soft. Taking a stool softener regularly can help prevent constipation. It may take 1 to 4 days before your stools become softer.

Recommended stool softeners are:

- **Docusate** – brand names include Colace® and Soflax®. Start by taking one capsule of a stool softener with breakfast and one capsule with dinner. You may increase to 2 capsules with each meal if needed.
- **PEG** (polyethylene glycol) – brand names include Lax-a-day, PegLax. Add ½ to 1 package or 1 to 2 teaspoonfuls of powder (if bought in bulk) to any fluid and drink daily. PEG is tasteless and causes little gas.

Tips on how to prevent constipation

- Eat high fibre foods such as prunes, whole grains, fruits and vegetables.
- A soft stool contains a lot of water. Drink 1½ to 2 litres or 6 to 8 cups of water a day. This will help you to have a soft stool.

If you are not allowed to drink a lot of fluids, talk to your health care provider. They can help you find a way to prevent constipation that is safe for you.

- Start and maintain a regular walking and activity program.

Talk to your family doctor or pharmacist if you have questions or concerns about constipation or how to treat it at home.

Iron

You may be given a prescription for iron when you go home. Iron helps the body make blood. If your blood level (hemoglobin) is low, you may feel tired and weak.

Tips about iron

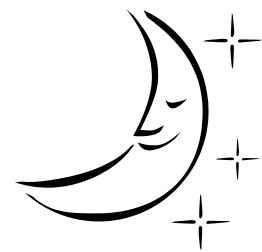
- Iron can easily upset your stomach. To avoid stomach upset, take your iron with a meal or snack.
- Iron can cause severe constipation or severe diarrhea.
- Iron makes your stool or bowel movement black.

Sleep

Sleep and rest are very important to your recovery. However, trouble sleeping is common after heart surgery. It will take time to return to good sleep patterns. It is common to take short naps after surgery. With time you will return to sleeping all night.

Tips to help you sleep

- If you cannot sleep at night because you are in pain, take your pain medication 15 to 30 minutes before you go to bed.
- Use pillows to arrange your body in comfort.
- Sleep upright in a recliner if you find it more comfortable or easier to breathe.
- Make your home quiet – turn off the ringer on the phone.
- Listen to your body. Take naps during the day as needed. To return to nighttime sleeping, limit your daytime naps when you feel strong enough to do so.
- Talk to your family doctor if you feel you need help sleeping.



Emotions

Why do I feel emotional sometimes?

Recovery from heart surgery may leave you feeling tired and weak. This can affect your emotions and cause you to feel overwhelmed.

Your symptoms may include:

- crying easily
- feeling irritable, angry, frustrated, sad or blue
- feeling anxious
- not being able to concentrate

You may notice a change in these emotions over the next 8 to 12 weeks.

Tips to help you manage your emotions:

- Get plenty of rest even if it means resting during the day.
- Space out your activities to prevent feeling overwhelmed.
- Allow others to help you prepare meals, shop and do household chores, both inside and outside of the house.

These emotions should not last. If they last for 2 weeks in a row, call your family doctor or nurse in the Cardiac Health and Rehabilitation Centre at 905-577-8033.

Exercise and activity at home

Stretches at home

Good posture is important to help your:

- lungs expand
- sternum and muscles heal in proper position

It is important to keep your chin level and shoulders straight. Check your posture each time you look in the mirror.

Here are exercises you learned while in the hospital to help improve your posture and prevent muscle and joint stiffness.

Continue these exercises at home for a total of 6 weeks after your heart surgery.

Exercise #1

Stand or sit. Place both hands on your belly. Take a deep breath in to expand the belly. Then exhale to contract your belly.

Do 10 deep breaths every hour while awake.
Follow breathing with 2 to 3 coughs.

Hug a pillow or rolled up blanket while coughing to support your chest.



**Repeat these exercises 3 times.
Do each set of exercises 2 times each day.**

Exercise #2

Sit or stand with good posture. Keeping your face forward, tip your ear toward your right shoulder. Repeat to the left side.



Exercise #3

Sit or stand with good posture. Turn your head to the right side. Repeat to the left side.



Exercise #4

Sit or stand with good posture. Raise both arms and lower both arms. Repeat.



Exercise #5

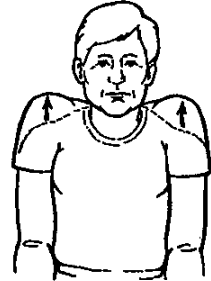
Sit or stand with good posture. Pull the right elbow and arm across your chest gently. Repeat with left elbow and arm.



**Repeat these exercises 3 times.
Do each set of exercises 2 times each day.**

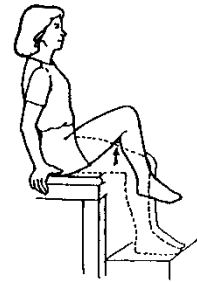
Exercise #6

Begin with shoulders relaxed. Hunch shoulders up toward your ears.



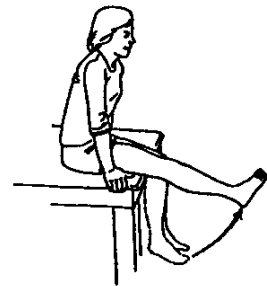
Exercise #7

Sit in a chair with your knees bent as shown. Lift your right foot off floor, slowly lower. Repeat with left foot.



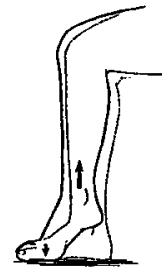
Exercise #8

Sit on the edge of a bed or chair. Straighten right knee fully. Repeat with left knee.



Exercise #9

Sit in a chair with feet touching the floor. Push your toes down and lift your heel. Repeat with other foot.



Exercise #10

Sitting in a chair, keep your heel on the floor and raise the toes up as high as possible. Repeat with other foot.



Pictures for exercises 2 to 11 are used with permission from The Saunders Group Inc.

Walking at home

Walking is one of the best types of exercise. Walk with someone the first few times when walking outdoors. This will make you and your family confident.

It is important to warm up and stretch your muscles before you walk. The exercises on pages 32 to 34 will give you a good warm-up.

At first, start by walking the distance walked in the hospital. Walk 5 to 6 times a day. Do not walk more than 5 minutes at one time. As you increase your distance, decrease how often you walk.

Often people find it easier to do a few short walks in a day rather than taking one long walk. Here are some tips to help you plan your walks:



- Increase the amount of walking 1 to 2 minutes at a time. Use your pulse or perceived exertion scale as a guide for when to increase the amount of walking.
- A good rule to remember is, "Walk so you can talk". If talking is hard to do, you need to slow down.
- A shopping mall is a good place to walk. It is climate controlled and the surface is flat. There are often benches along the way to rest.
- Wear proper walking shoes to avoid muscle and joint problems.

Stop walking if you feel:

- dizziness or faint feeling
- palpitations or unusual heart beats
- a racing heart
- trouble breathing
- nausea

If these symptoms do not go away with 10 minutes rest, call your family doctor.

Avoid activities for at least 6 to 8 weeks

Do not:

- lift or push anything over 4.5 kilograms or 10 pounds – this includes children, pets, groceries, laundry and weights.
- drive – ask your heart surgeon when you can drive.
- garden and cut grass.
- shovel snow or dirt.
- vacuum.
- do activities where your arms are kept over your head such as washing windows, painting and hanging decorations.
- go in a sauna or hot tub – these activities are not recommended for heart patients due to extreme heat. Talk to your doctor for guidelines.
- take a bath until your incisions are healed – you may shower or sponge bathe for the first 6 weeks.
- strain or hold your breath – this includes straining on the toilet, or trying to open a window that is stuck.
- have sex – ask your doctor, nurse, physiotherapist or occupational therapist when you can have sex. See page 55 for more information.
- climb stairs as a form of exercise for 6 weeks after heart surgery. It is okay to walk stairs as needed. If you have trouble breathing while climbing stairs: stop, climb more slowly and try taking one step at a time.
- go swimming for 3 months.

Tips to exercise at home

Things to do:

- Warm up and stretch your muscles before exercising.
- Wear loose and comfortable clothing.
- Wear comfortable walking shoes.
- Walk on a flat surface instead of steep hills and streets.
- You may use an exercise bike or treadmill. Start with low tension on the bike and a flat surface on the treadmill.
- Follow the pulse guidelines on page 13.
- Plan to exercise at a time when you feel rested, such as in the morning.
- Talk to your doctor, nurse or physiotherapist about exercises or activities you may be thinking of doing.
- Use the **Exercise and Pulse Record** on page 38 to record your exercise, pulse rates and how you feel.

Things not to do:

- Never exercise on a full stomach. Wait 2 hours after a large meal.
- Avoid exercising outside in very hot or very cold temperatures.
- Avoid windy weather.
- Do not do activities that involve repetitive movements of your arms, such as golfing, rowing, using hand weights or a ski machine. Ask your heart surgeon or exercise therapist when you can return to these activities.

Remember ...

- ✓ Know your resting pulse rate.
- ✓ Do not let your pulse increase more than 5 beats in 15 seconds with exercise. If you take a beta blocker medication, your pulse should not increase more than 3 beats in 15 seconds with exercise.
- ✓ **Your heart rate should never be higher than 30 beats in 15 seconds or 120 beats in a minute.**

Exercise and Pulse Record

Date	How long I walked (minutes)	Time of Day	15 second pulse rate			How I felt	RPE Scale 0 to 10
			resting pulse	target pulse	exercise pulse		
<i>April 26</i>	<i>5 min</i>	<i>12:00 pm</i>	<i>20</i>	<i>23</i>	<i>23</i>	<i>Felt well</i>	

Save your energy

It will take you a number of weeks before you are able to do all of the activities you did before your surgery.

When you go home, it is important to remember that the activities you do every day are as much work as exercise. A few examples are:

- climbing stairs
- light housework such as preparing meals and doing dishes
- personal care such as bathing and dressing

Tips to save your energy when you go home:

✓ **Plan ahead**

Learn to plan your exercise and your activities. Ask questions such as, “Does this task really need to be done?” and “Must it be done by me?” Plan to do your activities at a time when you feel rested, such as in the morning.

✓ **Pace yourself**

Do only what you really need to do and rest between activities.
Stop before you are too tired!

✓ **Do not lift**

Do not lift, push or pull more than 10 pounds or 4.5 kilograms.
Divide laundry, garbage and groceries into smaller piles.
Use a wagon or cart. Slide rather than lift an object.

✓ **Avoid bending and reaching**

Keep things you use the most often within easy reach.

✓ **Sit down when you can**

Sit down when dressing, sorting laundry and preparing meals. You can use a tub chair in the shower.

✓ **Use good posture**

Use a chair with good back support. A footstool helps prevent pressure on the back of your legs.

✓ **Limit visitors**

Rest is an important part of your recovery. Too many visitors or phone calls can be very tiring for you and can get in the way of your recovery. Limit your company to 2 short visits a day.

Although your family and friends care about you and want to see how you are doing, you may need to limit visiting times. Do not be afraid to tell your company that you need your rest as part of your recovery and excuse yourself from the room when you feel tired and need to rest.

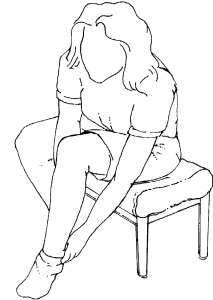
✓ **Avoid temperatures that are too hot or too cold**

Avoid exercising if it is too hot or too cold outside. Use warm water for showering. If you had surgery, you will not be able to take a tub bath until your incisions are healed. Please speak with your health care provider before using a bathtub or shower.

Ways you can save your energy

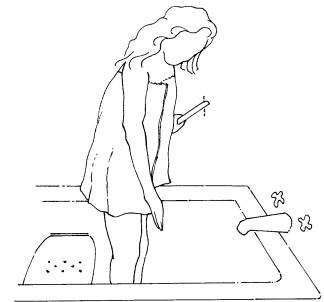
Dressing:

- sit when dressing
- have your clothes within arms reach
- wear loose-fitting clothing as it is easier to put on and take off
- dress the lower part of your body first as this takes up the most energy
- avoid bending



Grooming and bathing:

- sit on a stool or chair while washing, shaving or putting on make-up
- use a bath chair and hand-held shower to avoid standing
- use a long-handled brush sponge to clean yourself
- wear a long terrycloth housecoat to help dry off after bathing



Cleaning:

- clean one room at a time – if cleaning the whole house, spread the job over a number of days
- have someone vacuum for you



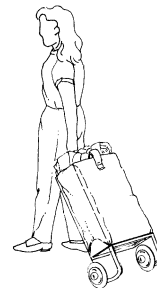
Kitchen work:

- store items used most often in the easiest place to reach
- sit to prepare food and wash dishes
- allow dishes to air dry
- prepare extra at meals and freeze for a future use
- use a food/meal delivery service to your home



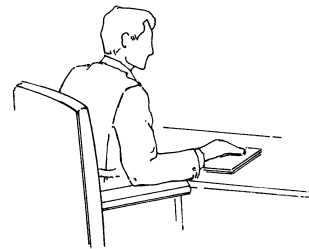
Shopping:

- use a delivery service to your home where possible
- use a cart to move shopping bags rather than carry them
- if you need to carry shopping bags, divide into smaller loads and hold them close to your body



Working at a desk:

- remember that posture is very important
- organize your work space to avoid bending and reaching
- take frequent stretch breaks



Eating heart healthy at home

Recent studies show that following a Mediterranean-type diet is heart healthy.



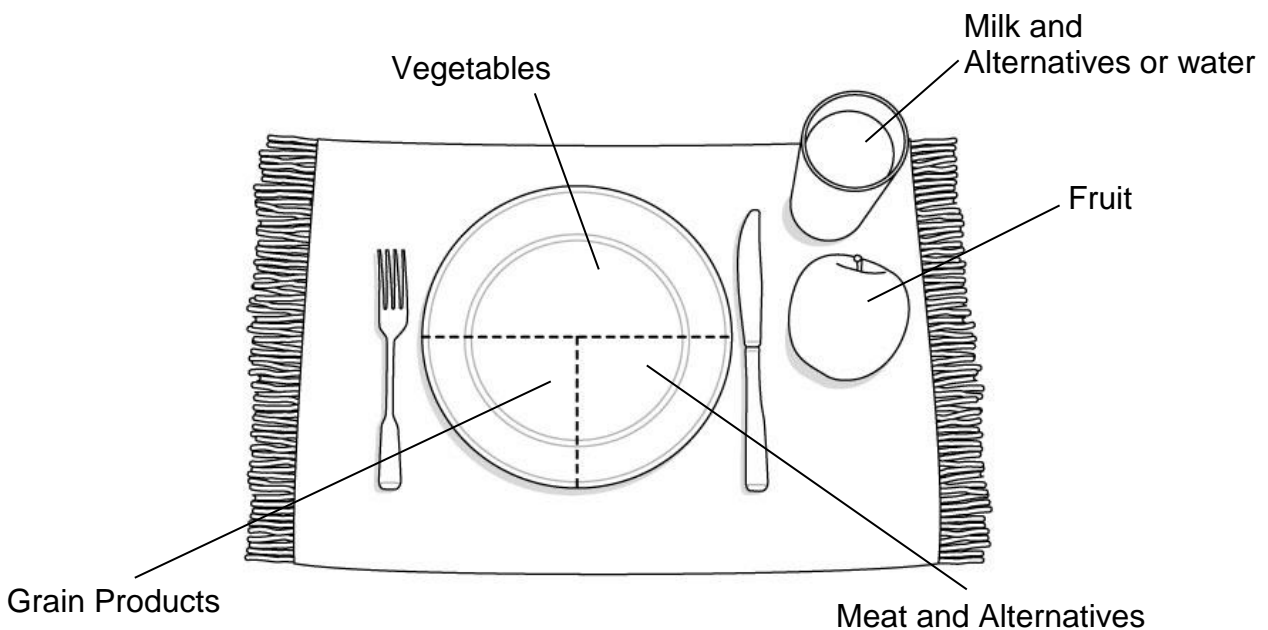
How do I follow a Mediterranean-type diet?

- Eat mostly plant based foods such as:
 - Vegetables and fruit
 - Legumes such as kidney beans, chickpeas and lentils
 - Nuts, nut butters and seeds (unsalted)
- Eat fish often.
- Eat chicken, turkey, legumes and nuts often.
- Limit beef, veal, pork, lamb and cheese.
- Replace butter with healthy fats such as olive oil, canola oil and non-hydrogenated margarine.
- Use herbs, spices and lemon juice instead of salt and salt containing seasonings to flavour food.
- Drink wine in moderation – check with your doctor first.
- Enjoy meals with family and friends.

How to build a healthy meal

As much as possible, plan your meals to include vegetables, fruit, whole grains, legumes, nuts and seeds, olive or canola oil, and herbs and spices.

- ✓ **Vegetables and Fruit** – Make $\frac{1}{2}$ of your plate vegetables. Choose dark green, red and orange colours more often. Have a piece of fruit for dessert.
- ✓ **Grain Products** – Make $\frac{1}{4}$ of your plate whole grain pasta, whole grain bread or brown rice.
- ✓ **Meat and Alternatives** – Make $\frac{1}{4}$ of your plate low fat meat and alternatives such as fish, legumes or tofu.
- ✓ **Milk and Alternatives** – You may include a glass of skim or 1% milk or a small container of 1% or less MF yogurt to complete your meal.



Eat more	Serving size	Eat less often or avoid
Vegetables 4 to 5 servings each day (Include at least 2 deeply coloured vegetables a day)	<ul style="list-style-type: none"> • 1 cup raw or ½ cup cooked leafy vegetables • ½ cup raw or cooked vegetables • ½ cup low sodium vegetable juice 	<ul style="list-style-type: none"> • Limit potatoes to ½ cup a day
Fruit 4 to 5 servings each day (Have whole fruit more often than juice)	<ul style="list-style-type: none"> • 1 medium sized fruit • ½ cup fresh, frozen or unsweetened canned fruit • ¼ cup dried fruit • ½ cup 100% juice 	<ul style="list-style-type: none"> • Sweetened canned fruit
Grain Products 3 or more servings each day	<ul style="list-style-type: none"> • 1 slice whole grain bread (at least 2 grams of fibre/serving) • ½ cup cooked whole grain such as brown rice or whole grain pasta • high fibre cereal (at least 4 grams of fibre/serving, serving size varies) • ¾ cup cooked oatmeal or oatbran 	<ul style="list-style-type: none"> • Refined grains such as white bread, rice, pasta • Low fibre cereals
Milk and alternatives 2 to 3 servings each day	<ul style="list-style-type: none"> • 1 cup skim or 1% milk or fortified soy beverage • ¾ cup (175 gram) yogurt (1% MF or less) • skim milk cheese (7% MF) (as desired) 	<ul style="list-style-type: none"> • 1 ½ oz partly skim milk cheese (20% MF or less) or regular cheese (more than 20% MF)

Eat more	Serving size	Eat less often or avoid
Vegetable oils and other fats 2 to 6 servings each day	<ul style="list-style-type: none"> 1 teaspoon olive oil, canola oil, corn oil, sunflower oil, safflower oil, or non-hydrogenated margarine 	<ul style="list-style-type: none"> Butter or hard margarine Palm kernel or other tropical oils Avoid trans fats
Fish and shellfish 4 servings each week	<ul style="list-style-type: none"> 3 ounces, cooked or canned fish 	<ul style="list-style-type: none"> Commercially prepared deep fried or breaded fish
Legumes and soy 3 or more servings each week	<ul style="list-style-type: none"> $\frac{3}{4}$ cup cooked chick peas, kidney beans, lentils, black beans or soybeans $\frac{3}{4}$ cup tofu 3 ounces soy based meat alternatives 	
Nuts and seeds 5 or more servings each week	<ul style="list-style-type: none"> $\frac{1}{4}$ cup unsalted nuts or seeds 2 tablespoons nut butter 	<ul style="list-style-type: none"> Salted nuts or seeds
Chicken or turkey 2 or more servings each week	<ul style="list-style-type: none"> 3 ounces, cooked, with visible fat and skin removed 	<ul style="list-style-type: none"> Chicken or turkey skin Dark meat Deep fried or processed
Egg whites As desired	<ul style="list-style-type: none"> 2 egg whites $\frac{1}{4}$ cup egg substitute 	

Eat less	Serving size	Avoid
Egg yolks 2 or less servings each week.	<ul style="list-style-type: none"> • 1 egg yolk 	
Red meat 1 or less servings each week.	<ul style="list-style-type: none"> • 3 ounces of lean cuts, cooked, with no visible fat or marbling 	<ul style="list-style-type: none"> • Bacon, hot dogs, sausage, cold cuts, deli meats and other processed meats
Sugar and sweets 5 or less servings each week.	<ul style="list-style-type: none"> • 1 tablespoon maple syrup, sugar, jelly or jam • ½ cup sorbet or Jell-O™ • 5 jelly beans or one small candy • 1 cup pop or lemonade • 1 cookie or small muffin 	

Metric and Imperial Sizes

250 mL = 1 cup
 175 mL = ¾ cup
 125 mL = ½ cup
 60 mL = ¼ cup
 15 mL = 1 tablespoon
 5 mL = 1 teaspoon
 30 grams = 1 ounce

Eat less salt and sodium

Most Canadians eat more salt and sodium than they need. Too much salt and sodium can lead to high blood pressure, heart failure or kidney disease.



Most of the salt and sodium in our diet is from processed or convenience foods.

Ways to reduce salt and sodium in your diet include:

- ✓ Eat less processed or convenience foods that are high in salt and sodium:
 - canned soups
 - spaghetti or tomato sauce
 - processed cheese
 - soy sauce
 - pickles
 - frozen meals
- ✓ Eat less processed meats:
 - sausage
 - bacon
 - hot dogs
 - deli meats or cold cuts such as bologna, turkey breast, salami or ham
- ✓ Compare the sodium in food products. Read labels and choose products with lower sodium levels.
- ✓ Have restaurant or take out foods less often.

You might be aware that pizza, hot dogs and hamburgers are high in sodium. But did you know that “healthier” choices such as stir fries, salads, vegetable soup and sandwiches are often high in sodium too?

Check websites for the sodium content of meals before you eat out.

- ✓ Cook more often. If you prepare more meals or parts of meals from scratch you can lower your sodium intake a lot!
- ✓ Take the salt shaker off the table. Try seasoning your foods with herbs, spices and lemon juice instead.
- ✓ Replace onion, garlic and celery salt with the fresh product or powder.

Caffeine and alcohol

- If you have a racing heart, also called palpitations, limit your intake of beverages with caffeine. Have no more than 4 cups (1 cup equals 8 oz or 250 ml) a day for the first month or longer after surgery.
- Alcohol can react with your pain medication. It is best not to drink alcohol until you have recovered from your heart surgery. Talk to your doctor about how much alcohol is right for you.



For more information visit these websites:

Heart and Stroke Foundation
www.heartandstroke.ca

Dietitians of Canada
www.dietitians.ca

How can I see a Registered Dietitian?

While you are in a cardiac rehabilitation program ask to see a Registered Dietitian. See page 57 for more information about cardiac rehabilitation.

You may also ask your family doctor to refer you to a Registered Dietitian at an outpatient clinic in the community.

Diabetes

Your blood sugar targets

Before meals	4.0 to 7.0
2 hours after meals	5.0 to 10.0



After your surgery, having high blood sugars may:

- cause you to take more time to heal.
- increase your chance of infection.

The main things that will help you manage your blood sugars are:

- eating heart healthy – see pages 43 to 49. A heart healthy diet is suitable for people with diabetes.
- doing regular physical activity – see pages 32 to 37.
- taking diabetes medications as directed.
- checking your blood sugars.

Ask staff for a copy of “Diabetes – the basics” for information on how to manage diabetes or print it from: www.hhsc.ca/PEDL.

Carbohydrates and diabetes

When you have diabetes, it is important to know which foods affect your blood sugar. Foods with carbohydrates break down into sugar (glucose) in your blood. There are two types of carbohydrates; complex and simple.

Complex carbohydrates:

- Contain fibre.
- Slow down the rise of your blood sugar.
- Sources include vegetables, fruits, whole grain breads and cereals, and legumes such as kidney beans, lentils or chick peas.

Choose foods with complex carbohydrates more often.

Simple carbohydrates:

- Contain little or no fibre.
- Cause your blood sugar to increase quickly.
- Sources include fruits, fruit juice and milk, refined breads, cereals and pastas, sugar, foods containing added sugars such as cakes, cookies and pop.

Choose foods with simple carbohydrates less often – see next page.

Choose foods in the right hand column more often:

Foods with simple carbohydrates Avoid or choose less often ...	Choose instead ...
Sugar - white, brown, icing, honey, molasses, maple syrup	Artificial sweeteners such as Equal®, Splenda®, Sugar Twin®, Sweet'N Low®
Regular jam, jelly, marmalade	Jam such as E.D. Smith® No Sugar Added, President's Choice Too Good To Be True, Ultra-Lite®, Smuckers® Double Fruit
Regular pudding, gelatin (Jell-O®)	Pudding such as Jell-O® Fat Free pudding mix, Smart Choice™ Light instant pudding Pudding (single serving) such as Kozy Shack® - No Sugar Added, Jell-O® Sugar-Free Gelatin such as Jell-O® Light, Equality™ Light jelly powder
Regular pop and tonic water	Diet pop, diet tonic water, club soda
Sweetened fruit drinks and iced tea	Drink crystals such as Crystal Light™ and diet iced tea
Popsicles® - regular	Popsicles® - Sugar-Free, Ice Pops – No Sugar Added
Canned fruit in syrup	Fresh fruit or unsweetened canned fruit
Pies, cakes, pastries, iced cookies, doughnuts and sweetened cereals such as Frosted Flakes™	Plain cookies such as arrowroot, social tea or digestive Cereals such as Cheerios™, Special K®, Shredded Wheat™
Candy, chocolate, regular gum	Sugar-free gum

Be smoke-free

Quitting smoking is the best way you can improve your health.
This includes:

- cigarettes
- cigars
- pipes
- chewing tobacco
- marijuana
- water pipes



All of these products cause heart disease as well as many other diseases.

Quitting smoking is a journey that takes time. It takes practice to be a non-smoker. Most people quit after several attempts. Learn from your mistakes and do not give up. You will quit smoking as long as you do not quit trying.

Medications can increase your chances of quitting smoking. Many products are available at your pharmacy without a prescription. Before using these products, talk to your doctor or pharmacist about their possible side-effects and proper use.

Ask staff for a copy of "Medications to help you quit smoking"
for more information or print it from: www.hhsc.ca/PEDL.

Programs in Hamilton and surrounding area to help you quit:

- Smokers' Helpline: 1-877-513-5333 www.smokershelpline.ca

This telephone service lets you talk to a trained Quit Coach. The website provides a list of quit smoking services in your area. You need your postal code to search their website.

- Hamilton Public Health Quit Smoking Clinic: 905-546-5566

Appointments are 30 minutes in length with a nurse who works with you for better withdrawal control and lifestyle change. Priority is given to pregnant women, young families, people living in poverty, persons with mental illness and those with no family doctor.

- Your family doctor, dentist and pharmacist are good sources for help and support. Quitting “cold turkey” does not work for many people. You have other options. Your health professional can suggest products to help with the withdrawal symptoms.
- Most cardiac rehabilitation programs offer smoking cessation.

Staying smoke-free is challenging. To remain successful, you will have to change your lifestyle. This often includes:

- planning other ways to deal with stress
- choosing healthy snacks to limit weight gain
- being more active through an exercise program

Tips to cope with the cravings:

- Practice deep breathing exercises when you have a craving.
- When you get a strong urge to smoke, delay it. The urge will most likely pass in about 5 minutes.
- Stay away from situations that make you want to smoke such as drinking alcohol and being around others that smoke.
- Make a habit of distracting yourself during urges and cravings such as doing housework (if able), listening to music, reading a book or walking.

These are just a few things that may help with cravings. You may find other ways that work for you.

When am I able to have sex?

In general, you can have sex in 3 to 4 weeks. Your heart works harder during sex. When you can climb 24 stairs without any chest pain, discomfort or trouble breathing (shortness of breath), you can safely have sex.

At first it is normal for people with heart disease to have little desire for sex. Couples may also be afraid to have sex. Feel free to talk about your feelings or concerns with your health care provider.



Ask staff for a copy of "Living, Loving and Your Heart"
for more information or print it from: www.hhsc.ca/PEDL.

Tips about sex:

- Be relaxed and rested before you begin.
- Choose a place where you are comfortable.
- Choose a position that you are comfortable in. Some positions make your heart work harder.
- Avoid positions where your arms are holding your weight.
- Avoid large meals, drinking too much alcohol and smoking before sexual activity. These all increase the work of the heart. Sex would then increase the work of the heart even more. Wait at least 2 hours after a meal.

If you get chest pain or discomfort during or after having sex, stop and rest. If the pain does not go away, take your pain control medication as prescribed. If you think this chest pain is angina, take a nitroglycerin tablet or spray as prescribed.

Can I take medication to improve erectile dysfunction?

It is not recommended that you take these types of medications while recovering from a heart attack or heart surgery for about 4 to 6 weeks. Talk to your doctor about when you can take erectile dysfunction medications, such as Viagra® (sildenafil) or Cialis® (tadalafil).

Do not take these medications if you have taken or used nitroglycerin as it will cause your blood pressure to become so low you may faint. Very low blood pressure puts stress on you and your heart.

If you have any chest discomfort while having sex after taking erectile dysfunction medications:

- **STOP** what you are doing
- sit or lie down
- do **NOT** take any nitroglycerin

If you still have chest pain or discomfort after resting for 5 minutes, have someone call 911.

Cardiac rehabilitation

You will be referred to the Cardiac Health and Rehabilitation Centre at the Hamilton General Hospital.

If you live outside of Hamilton and prefer to attend a program closer to your home, talk to your nurse **before** you leave the hospital. Making arrangements before you leave the hospital will help prevent delays in attending cardiac rehabilitation.

How will a cardiac rehabilitation program help me?

Taking part in a cardiac rehabilitation program will:

- help you manage many of the risk factors that lead to heart disease.
- keep you safe while making you strong.
- allow you to return to the activities you enjoy.
- reduce your chances for future heart problems.

What types of programs are offered at the Cardiac Health and Rehabilitation Centre?

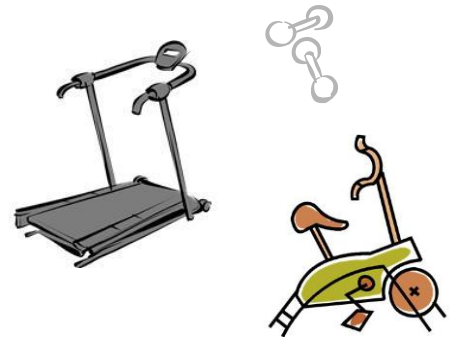
We offer services such as:

- an exercise program designed specifically for you, and exercise counseling
- nutrition counseling and education
- nursing education and support
- stress management
- smoking cessation support
- you may also see a doctor as needed

The health care team is trained to help you make lifestyle changes that are right for you.

Our gym includes:

- a walking track
- treadmills, stationary cycles, arm cycles, stair climbers and weights
- locker rooms with showers



How long is the cardiac rehabilitation program at the Hamilton General Hospital?

Your cardiac rehabilitation program may last up to 6 months depending on your needs.

Where is the Cardiac Rehabilitation Centre located?

3rd Floor, Section E
Hamilton General Hospital
237 Barton Street East
Hamilton, Ontario
L8L 2X2

Phone: 905-577-8033

Fax: 905-528-3148



We look forward to helping you reach your heart health goals!

When to call for help



Call your family doctor if you:

- gain 5 pounds (2 to 3 kg) over 2 to 3 days
- have swelling in your feet or ankles that is worse in the morning than it was the night before and does not decrease with rest and elevating your feet
- have more shortness of breath
- have shortness of breath after resting for 5 minutes
- feel more tired or weak
- have angina
- have bleeding – severe nosebleed, black or bloody stools, red urine

Call your heart surgeon if you have:

- increased drainage from your incisions, redness or swelling in your incisions
- new pain in your incisions
- fever and chills with a temperature above 38°C or 100°F
- flu-like symptoms with any type of discharge from your incisions

Call 911 right away if you have:



- severe shortness of breath that will not go away
- angina that lasts for more than 15 minutes and is not relieved by rest or nitroglycerin
- fast or irregular heart beats or a “racing heart” that makes you feel dizzy or unwell
- fainted

Weight Diary

Weigh yourself every day for the next 6 weeks. The best time to weigh yourself is in the morning sometime after you use the bathroom and before you eat breakfast.

- If you gain 5 pounds (2 to 3 kg) over 2 to 3 days, call your family doctor, because your medications may need to be changed.

Date	Weight	How you are feeling (short of breath, tired, swelling)	Did you call your doctor about a weight gain or loss? Your doctor's advice?

We hope this book has been helpful to you and your family in answering your questions after heart surgery. This can be a stressful time as you continue on the path from the hospital to caring for yourself at home.

The caring does not end here. The information you receive and the choices you make will continue to help you remain well over the next months and for many years ahead.

