

What to expect right after your MICS CABG

You have had open heart surgery called a MICS CABG.

MICS CABG stands for **M**inimally **I**nvasive **C**ardiac **S**urgery **C**oronary **A**rtery **B**ypass **G**raft.

It is different from the usual CABG surgery as your surgeon made a cut between your ribs rather than cut through your sternal bone.

After your surgery, follow the information in the booklet, “The Path to Recovery after Heart Surgery” except for pages 6 to 8. Use the information in this handout instead. Your recovery from a MICS CABG will be slightly different than from a CABG.

	Day of Surgery	Day 1	Day 2 to 4
Where you will stay	Intensive Care Unit (ICU West)	Cardiac Surgical Unit (5 South)	Cardiac Surgical Unit (5 South)
Tests and procedures	<p>Monitors will record your heart rhythm and blood pressure.</p> <p>You will not be able to talk while you have a breathing tube in your throat.</p> <p>Most of your tubes will be removed before you leave the ICU.</p>	<p>A smaller heart monitor called telemetry will continue to record your heart rhythm and blood pressure. You will wear this monitor and will be able to move around the unit.</p> <p>You may have your blood sugar tested often.</p> <p>You will have other blood work drawn daily until you are discharged home.</p> <p>The rest of your tubes will be removed, except for your pain pump.</p>	<p>You will wear a heart monitor for your entire hospital stay.</p> <p>You will have an electrocardiogram (ECG) on Day 3.</p> <p>You will have a chest x-ray on Day 3.</p>

	Day of Surgery	Day 1	Day 2 to 4
Medications	<p>You will have a small catheter connected to a pain control pump put into your chest incision during your surgery. This will stay in until you are ready for discharge.</p> <p>Additional pain control medication will be given through your intravenous or IV.</p>	<p>You will continue to receive pain control medication through your pain pump.</p> <p>Other pain control medications will be continued and are given by mouth.</p> <p>You will be started on other medications as ordered by your surgeon. These will be explained to you.</p>	<p>Your pain control pump will be removed before you are discharged home.</p> <p>Regular doses of other pain medication are stopped, but pain control medication will still be available when you need it. You are encouraged to ask for it.</p> <p>Your other medications will be adjusted to your needs before you go home.</p>
Diet	<p>You will start a clear fluid diet once your breathing tube is removed.</p>	<p>You will start a full fluid diet and by Day 2 or Day 3 you will likely be on solid foods.</p>	<p>By Day 3 you should be on solid foods (a Healthy Heart Diet).</p>
Activity	<p>The health care team will help you:</p> <ul style="list-style-type: none"> • roll in bed • sit up in bed or a chair • dangle your legs • take a few steps • take deep breaths and do splinted coughing 	<p>The health care team will help you:</p> <ul style="list-style-type: none"> • sit up in a chair • walk to the bathroom • take short walks in the hallway • take deep breaths and do splinted coughing 	<p>By Day 2 you will find you are able to get around more on your own.</p> <p>You are encouraged to move about your room and in the hallway by yourself.</p> <p>If you are unable to do this, members of the health care team will help you.</p>

	Day of Surgery	Day 1	Day 2 to 4
Daily routine with your nurse	You will be assessed and monitored continuously by your nurse and the healthcare team.	<p>Your vital signs include:</p> <ul style="list-style-type: none"> • blood pressure • heart rate • breathing rate • temperature <p>Your vital signs are checked every 4 hours or more often if needed.</p> <p>A full assessment is done every 12 hours or more if needed. A full assessment includes:</p> <ul style="list-style-type: none"> • changing your dressing if needed • cleaning your incision • listening to your chest, heart and abdomen • moving your arms and legs <p>Your weight is measured daily.</p>	<p>Your vital signs are checked every 8 to 12 hours or more often if needed.</p> <p>A full assessment is done every 12 hours or more if needed.</p> <p>Your weight is measured daily.</p>

	Day of Surgery	Day 1	Day 2 to 4
Teaching	<p>Your health care team will review your learning needs every day to make sure that you and your families have all of the information you need before you go home.</p> <p>Group classes are offered in the 5 South Sun Room during the week covering these topics:</p> <ul style="list-style-type: none"> • “Medications” taught by the pharmacist • “Caring for Yourself After Discharge” taught by the nurses in the Cardiac Health and Rehabilitation Centre. <p>Your family is welcome to attend the classes. The dates and time are posted on a board on the ward.</p>		
What to expect next as you prepare to leave the hospital	<p>Planning for your discharge begins early in your stay. A plan for discharge will be discussed with you and your family. You will be assessed daily to determine your needs at home.</p> <p>You should wear a seatbelt and you can sit behind an airbag in a car. You can begin to drive in about 2 weeks – as long as you are not still taking narcotic pain medication. You will likely be able to return to work in 4 to 6 weeks time.</p> <p>An information card with doctor appointments and medications is given to you before you leave the hospital.</p>		

What are the differences in recovery between a CABG and a MICS CABG?

The main differences are related to activity and include:

- You will get out of bed and walk short distances within the first 12 hours after your surgery.
- You may go home earlier.
- You do not have to protect your sternal bone for healing and do not have any major lifting restrictions. However, we suggest you do not lift anything heavier than 10 pounds or 4.5 kilograms for the first 2 to 3 weeks as a precaution. Let pain be your guide. Stop what you are doing if it causes pain at your surgical site.
- You will still use pillow to splint your incision when you cough.
- You will likely be able to return to work in 4 to 6 weeks.
- You will be able to drive about 2 weeks after your surgery – as long as you are not taking any narcotic pain medications. You can wear a seatbelt and can sit behind an air bag.

If you have any questions or concerns please contact your cardiac surgeon:
