



Preparing for **Heart Surgery** Guide

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Welcome to St Cecelia's Ward at the Mater Hospital. This information booklet has been prepared to help you and your family or carers understand more about your heart operation.

It aims to provide you with general information about what to expect from the time of your admission to your discharge home from the Mater. We encourage you to ask questions at any time during your stay and we will make sure your questions are answered.



Your admission date notice

You will be told your admission date at the pre-assessment clinic or by telephone by a member of the administration team.

Cancellations

If for any reason we have to cancel your operation, we will explain the reason to you. We understand that this is a stressful time for you and your family and we will try to provide you with a new date as soon as possible.

Reduce the risk of infection

A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. A surgical site infection is a risk with any type of surgery. You can take steps to reduce your risk of surgical site infection and complications. It will be necessary for you to take a bath or shower the day before and the morning of your surgery, using an antiseptic solution called **Hibiscrub**.

We will give this antiseptic solution to you.



Your hospital stay

We advise you to bring a minimal amount of personal belongings with you. We ask you to leave your valuables at home as the hospital cannot accept responsibility for their loss or damage.

What to bring with you

- Your admission letter
- Details of your next of kin
- A list of all medicines that you use (including herbal or over-the-counter medicines and nicotine replacement therapies)
- Your medical card (if you have one)
- Details of your health insurance policy (if you have one)

- ✓ Clothing – bring comfortable nightwear that is easy to put on, take off and move around in (we recommend non-underwire bras for the ladies)
- ✓ Slippers
- ✓ Walking aid, hearing aid, glasses, contact lenses and dentures, if you use them

What not to bring with you

- ✗ Large amounts of cash
- ✗ A lot of clothing (space is limited)
- ✗ Valuables and jewellery

The hospital is a very public place and you will be responsible for your property unless you hand it over to a nurse for safekeeping and receive a receipt.

Admission to St Cecelia’s Ward

Unless otherwise informed, we will admit you the day before your operation to a single room in St Cecelia’s Ward on Level 6 of the Whitty building. You will meet the nursing team and the health care attendant. You will also meet the surgical team who are responsible for your operation and the anaesthetist if you have not already done so at the pre-assessment clinic.



Day of Surgery

It will be necessary for you to take a bath or shower using Hibiscrub. It may be necessary also to have your body hair removed with clippers and one of the nurses or the healthcare assistant will do this. DO NOT attempt to shave yourself, or use hair removing creams or waxing as this may irritate your skin and make it easier to develop an infection.

A priest or minister will visit you before your operation at your request.



You will be fasting from midnight.

You will be given a gown to wear and asked to remove the following:

- ✓ dentures
- ✓ contact lenses
- ✓ jewellery (including wedding band)
- ✓ nail polish
- ✓ make-up

To help you relax, we normally give a medication we call ‘pre-med’ one or two hours before surgery. This medication may make you feel drowsy. You will be taken to the anaesthetic room where you will be anaesthetised for your surgery. This means you will be asleep for the whole operation.

Intensive care and cardiothoracic high dependency units – post surgery

Following your operation you will be taken to the intensive care unit, where you will stay for a minimum of one night. You will then be moved to the cardiothoracic high dependency unit. This is to provide you with the care you need for the initial recovery period after your surgery.

You will be sedated and on a ventilator (a machine to help you breathe). As soon as we are happy that your condition is stable, we will stop the sedation that is keeping you asleep. Both these units can be very busy, noisy and have lighting on for long periods. As you wake up, you may hear unfamiliar sounds including the alarms of the monitoring equipment but this is nothing to worry about.

A number of tubes, lines and drains may have been inserted during your operation and these include:

- ▶ 2-3 chest drains to drain any excess blood left from the operation. They are usually removed within 48 hours.
- ▶ An intravenous line in the side of your neck to give you fluids (while you cannot drink), pain relief and antibiotics.
- ▶ Pacing wires connected to a pacemaker box to assist your heart if your heart rate is slow.
- ▶ A blood pressure monitoring line in your hand.
- ▶ A tube in your bladder to drain your urine, called a urinary catheter

Day 1 post surgery



We will monitor your post-operative progress closely. Please remember that you will recover at your own pace. Make sure you tell your nurse if the pain relief medication is not adequate.

- ▶ You will be transferred to the cardiothoracic high dependency unit (CTHDU)
- ▶ It is important for your oxygen levels to remain good, therefore it will be necessary for you to wear an oxygen mask
- ▶ You will be attached to a heart rate monitor and your blood pressure and pulse will be recorded every hour
- ▶ We will encourage you to take fluids and eat a light meal
- ▶ A physiotherapist will perform breathing exercises with you and will assist you to sit in a chair
- ▶ You will wear elastic stockings until you're fully mobile

Day 2 post surgery



You will transfer to St Cecelia's Ward and some of your lines (in your hand, urinary catheter and drainage tubes) will be removed.

- ▶ We will monitor your heart rate and blood pressure every six hours
- ▶ A member of staff will help you get dressed in your pyjamas
- ▶ You will sit out of bed for longer periods today

Call...don't fall

Your safety and comfort are very important so please **call for help** to use the bathroom or before getting out of bed.

Day 3 post surgery

You will gently increase your mobility day by day and you will sit out of bed for longer periods of time.

- ▶ We will encourage you to have regular meals as it is important for your recovery
- ▶ We will inform you of your discharge date



Day 4 post surgery

You will be able to move all around the ward area. If you had valve surgery, you will have an ultrasound of your heart (echocardiograph) today. We will also remove your pacing wires and neck line.

- ▶ Your surgeon will check your wounds today (or tomorrow)
- ▶ You will be able to shower today with help from a member of staff
- ▶ We will give you a discharge advice booklet in how to look after your wound when you return home



Day 5 post surgery

You will be able to move independently by this time. The physiotherapist will walk the stairs with you and will give you advice on how to progress your exercise programme when you return home.

- ▶ If you are on warfarin, the pharmacist will go through any relevant information and give you a red warfarin book
- ▶ You can expect to be discharged home either today or over the next couple of days



Your discharge arrangements

You will likely be discharged from hospital 5 or 7 days after your operation. You will need to have someone stay with you at least a week after returning home. If this is not possible you will require convalescence or support services visiting you in your own home. This will be discussed with you when we are planning for your discharge.

Transport home

We aim to discharge our patients by 11am. You must arrange your own transport home. You can safely ride in a car but you must wearing a seat belt as normal.

Questions

Please contact the ward on **01 803 2740** if you have any questions or concerns.

Medications

We will give you a prescription for your medications. Do ask questions if you are unclear about your tablets.



Anticoagulation therapy

You may need to take warfarin after your surgery to prevent complications in the short or long term. All patients with a mechanical heart valve replacement will need to take warfarin for the rest of their life.

Public health nurse / community intervention team

If you need your stitches removed or your dressing changed, we will arrange to have the public health nurse or community intervention team visit you at home.

GP letter

We will give you this letter to take to your doctor's surgery. It will give a brief summary of your hospital stay and the type of operation you had and will list the tablets that you are now taking.

Out-patients appointments

The clinic secretary will schedule an appointment for you. You will see your surgeon 6-7 weeks after your discharge home.



Advice on returning home

The following guidelines have been written to answer any questions you may have over the next few weeks. Please remember it is very common to have good days and not so good days during your recovery and your daily activities will have to build up gradually.

Pain

It can take up to 12 weeks for your breastbone to heal properly. During this time, it will be common to feel aches and pains in your chest, back and shoulders. We will give you a prescription for pain medication. Some painkillers cause constipation so drink plenty of water and eat fresh fruit. If you think you will need laxatives, please discuss with the ward nurse before leaving hospital or with your GP.

Rest and Sleep

You may have vivid or bad dreams as a result of your recent surgery, the anaesthetic or the medicines but these will pass in time.

- ▶ It is important that you rest, as you did on the ward, for the first two weeks when you go home - set specific times to rest during the day and stick to them
- ▶ Rest properly by lying down, rather than just dozing in a chair
- ▶ Get up and get dressed every day and **gradually** get back into a daily routine
- ▶ Consider restricting visitors, especially in the early days

Exercise

The physiotherapist will discuss this with you before you leave hospital. Careful and sensible exercise will help you and your heart get fitter.

Sexual relationships

You may resume when you feel fit enough.

Hygiene

You may shower once your wound is dry and healing. Do not take a bath as getting in and out of the bath may put pressure on your breast bone. Make sure you wash your hands before you touch your wound.

Return to work

Discuss going back to work with your surgeon, cardiologist or GP. How quickly you return to work will depend on how quickly you heal and the type of work you do.

Driving

You will not be allowed to drive for at least 6 weeks. Your surgeon at your follow up outpatient appointment will tell you when you can resume driving.

Flying

It is advisable not to plan any holidays until after your follow up outpatient appointment. You will not be allowed to fly for at least 6 weeks after your surgery.

Smoking

Do not smoke. We can refer you to a smoking cessation nurse for help if you need it.

Alcohol

Excess alcohol should be avoided and it is important to stay within the national guidelines (no more than 11 units of alcohol per week for women and no more than 14 units per week for men). A unit of alcohol is a

half pint of beer, a small glass of wine or a single measure of spirits. You should try for at least two alcohol-free days per week and do not binge drink.

Diet

Eat a well-balanced diet and eat regularly. Ask someone to prepare your meals for you.

- ▶ Try to eat at least 5 portions of fruit and vegetables a day, which will give you the important vitamins and fibre you need.
- ▶ Eat a variety of protein sources such as meat, fish, poultry, pulses, tofu and nuts.
- ▶ Cut the fat of meat and remove the skin from poultry.
- ▶ Try to eat one portion of oily fish per week, such as sardines, mackerel, salmon, trout, herring, kippers or fresh tuna. Oily fish contains Omega 3 fatty acids and helps reduce the risk of blood clots.
- ▶ Include starchy carbohydrates at each meal to keep you feeling fuller for longer such as rice, pasta, bread, cereals, potatoes and noodles.
- ▶ Avoid high fat and sugary foods such as biscuits, cakes, crisps, sweetened fizzy drinks and fruit juice.
- ▶ Eat healthier low fat varieties of milk, yoghurt and cheese to get your daily calcium requirements.
- ▶ Choose margarines and oils such as olive, rapeseed and sunflower oils and spreads.
- ▶ Minimise your salt intake as high levels of salt can lead to high blood pressure. Use herbs, spices and extra pepper to help flavour your food instead of salt.
- ▶ Poach, steam, grill, stir-fry, bake or microwave your food rather than frying.

Cardiac rehabilitation

You will be invited to a cardiac rehabilitation programme which will be an important part of your recovery. The local cardiac rehabilitation centre will contact you 10-12 weeks after your surgery.

Useful telephone numbers

St Cecelia's Ward	01 803-2740	Level 6 Whitty building
Intensive Care Unit (ICU)	01 803-2762	Level 3 Whitty building – on arrival ring bell and wait for assistance
Cardiothoracic High Dependency Unit (CTHDU)	01 803-4479	Level 6 Whitty building – on arrival press D1 and wait for assistance
Cardiac Nurse	01 803-4265	

Please do not phone with enquiries during nursing handover times (between 7.30 – 8.00am and 8.00 – 8.30pm)

Visiting hours are 2.00pm – 4.00pm and 6.30pm – 8.00pm.

