What to expect at home

Pain management

Follow the instructions given to you by your healthcare team for taking medicine. Some people go home taking over-the-counter medicine to manage pain, and some people go home with prescription medicine to manage pain. Your healthcare team will talk with you about what is best for you. There are other things you can do to manage pain like moving around, using an ice pack, deep breathing, and finding a distraction like music, TV and games. What works best is different for each person.

Incision care

- Wash the area gently with warm, soapy water every day in the shower
- Pat the area dry with a clean towel
- If your incision is draining, cover it with a dry gauze pad and medical tape or with an adhesive bandage (e.g., Band-Aid®)
- Once the incision is not draining, leave it uncovered
- If you have staples at the incision, they will be removed at your follow-up visit seven to 14 days after surgery
- If you have clear surgical glue on your incision, it will fall off in 10 to 14 days

Do NOT:

- Use hydrogen peroxide or alcohol on the incision
- Soak in a bath or get in a pool until at least two weeks after surgery
- Put ointments, creams or oils on the incision for six weeks

Daily weights

Record your weight the day that you get home from the hospital and every morning thereafter. Record morning weights on a record sheet or the same document.

Who and when to call for problems

Call your surgeon's office for:

- Pain that is not getting better or gets worse
- ▼ Fever over 100.4° F
- Incision opens up or is bleeding
- Incision becomes redder, hard or has pus in it
- Signs of dehydration that do not get better by drinking water
- Urine (pee) is cloudy or smells very bad
- Blood in stools more than three days after surgery
- Nausea or vomiting that does not stop
- Not getting better as expected
- Heart seems to be beating fast and irregular
- Extreme shortness of breath that does not go away in 30 to 45 minutes of rest
- ▼ Persistent cough
- Unresolved constipation
- Weight gain of 3 pounds overnight or an accumulation of 5 pounds in a week
- Increased swelling, redness or pain in the legs
- Continued numbness of arms/legs, any absence of speech function, blurred vision, increased sleepiness/lethargy or change in personality

Call 911 for:

- Passing out
- Sudden chest pain
- Shortness of breath that is getting worse

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For more information, visit **BSWHealth.com/ERAS**.

The information provided herein is considered educational and should not be used during any medical emergency or for the diagnosis or treatment of any medical condition. A licensed medical morphisms of the bound be consulted for diagnosis and the teatment of any and all menical conditions. Call 91 for all medical emergencies. 60/2013 Raylor Scott & White Health 11-2.01 1.-719377 BIL. 1-719377 BIL. 1-719377 BIL.

Your cardiac surgery guide

Enhanced recovery after surgery (ERAS) plan

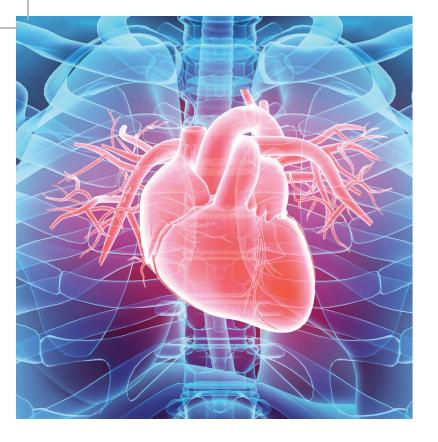












About the heart

What does the heart do?

The heart pumps blood around your body with each heartbeat. It is the muscle at the center of your circulatory system that sends oxygenated blood to all parts of the body and removes waste from the cells. Over time, your heart can become impaired related to valves no longer working properly or blockages that develop, reducing good blood flow to the heart. This can result in the need for heart surgery.

What are a few common heart surgeries?

Coronary artery bypass surgery: During bypass surgery, heart blockages are not removed. Rather, a new pathway is created around the blocked part of a coronary artery. First, a healthy blood vessel is taken from another part of the body. This is the bypass graft. The graft is attached to the coronary artery beyond the blockage. This way, blood flows through the graft and bypasses the blocked part of the artery.

Valve surgery: During valve surgery, an incision is made into the heart to expose the poorly functioning valve. The valve is exposed, and depending on the condition of the valve, it will be repaired or replaced.

Prepare: Getting ready for your surgery

Today

- ☐ Drink six to eight glasses of fluids, especially water, every day before surgery
- ☐ Limit alcohol like beer, wine and liquor.

 Stop drinking alcohol 24 hours (one day)
 before surgery
- ☐ Stop smoking
- ☐ Visit **BSWHealth.com/SurgeryGuide** for videos to get ready for surgery

Did you know?

Drinking fluids, especially water, and eating healthy foods before surgery will help your body heal after surgery.

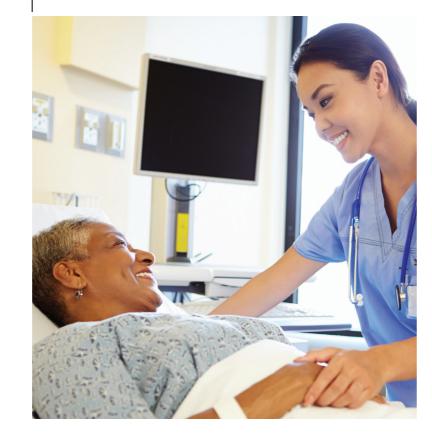
Day before surgery

☐ Bathe with chlorhexidine (CHG or Hibiclens®).

Wash your entire body except your face and genital area with chlorhexidine for three minutes

Did you know?

Following instructions for bathing before surgery helps prevent infection after surgery.



Morning of surgery

- ☐ Bathe with chlorhexidine (CHG or Hibiclens®).

 Wash your entire body except your face and genital area with chlorhexidine for three minutes
- □ Drink clear liquids up to two hours before surgery. You may have a special pre-surgery drink ordered. If you are asked to have the drink, it should be the last thing that you have.

 Finish it at ______
- ☐ Arrive at the hospital at ____

Do NOT:

- Shave
- Use lotions
- ▼ Put on makeup or perfumes

Did you know?

Drinking clear liquids up to two hours before surgery is safe and good for your body.

The pre-surgery drink has the right type and amount of energy your body needs for surgery.

Recover: What to expect as you start your recovery

Surgery day

- ☐ Manage pain with medicine taken by mouth
- ☐ Drink liquids
- □ Eat if able
- ☐ Use incentive spirometer every hour while awake
- ☐ Cough and deep breathe
- \square Spend time out of bed
- ☐ Start walking

Day AFTER surgery and beyond

- ☐ Manage pain with medicine taken by mouth
- ☐ Drink six to eight glasses of liquids
- ☐ Eat solid food
- ☐ Sit up for meals
- ☐ Use incentive spirometer every hour while awake
- ☐ Cough and deep breathe
- ☐ Spend the majority of the day out of bed to promote healing
- ☐ Walk in the halls at least four times each day

Before going home, you will need to:

- ☐ Walk safely in the halls
- ☐ Eat and drink without nausea or vomiting
- ☐ Manage pain with medicine taken by mouth
- ☐ Understand new prescriptions
- ☐ Show signs your bowels are working
- $\hfill\square$ Know when your follow-up visit is scheduled

Resume: What to expect when going home

Pain management

- ☐ It is normal to have some pain while you are healing
- ☐ Follow medicine instructions given to you by your healthcare team
- ☐ Use deep breathing, walking and distractions like music to help with pain management

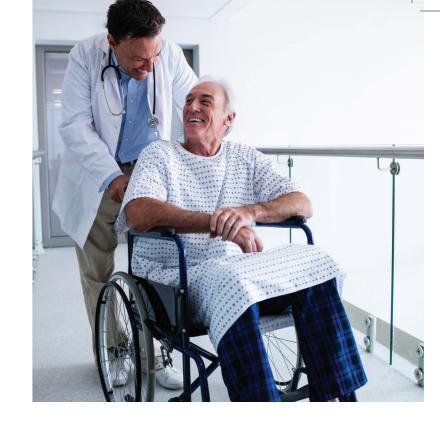
Drinking

- ☐ Drink at least six to eight glasses of water every day to stay hydrated
- ☐ Watch for signs of dehydration, including being overly tired, having a dry mouth, feeling dizzy, having nausea, having dark-colored urine (pee) or urinating less than normal
- ☐ Drink water if you have any of these signs.

 If you are not getting better after drinking water, call your healthcare team

Eating

☐ Eat healthy foods like cooked vegetables, low-fat dairy products, and proteins like lean meats and chicken



Activity

- ☐ Use your incentive spirometer about 10 times every hour while awake in the hospital and at home for four weeks
- ☐ Increase what you do each day to get back to your regular activities
- ☐ Sit up for all meals
- ☐ Spend at least six to eight hours out of bed each day
- ☐ Walk for 15 minutes four to six times during the day
- ☐ Rest when you feel tired
- ☐ Do NOT lift more than 10 pounds until your healthcare team says you can
- ☐ Ask your healthcare team when you can start activities like jogging, cycling and lifting weights

Driving

☐ Do NOT drive until you are cleared by your surgeon

Returning to work

- ☐ Going back to work depends on the type of work you do. Talk to your healthcare team to decide what is best for you
- ☐ Slowly increase the hours you work