# **UWHealth**



### Homeward Bound after a Mechanical Circulatory Implant

**Reminder:** The patient and support person(s) can expect to stay in the hospital 10-14 days. They will learn how to care for the patient and their Mechanical Circulatory Device (MCD) at home.

## Who will be present on the day of discharge?

A family member or support person(s) will be present the day of discharge. They will receive home instructions.

#### What occurs on the day of discharge?

These are discussed the day of discharge:

**Medicine:** The patient will receive prescriptions for medicines and instruction on how to take the medicines. The medicines will be different than what the patient was taking before the MCD implant. It is important for the patient to remember the names, doses, and times of their medicines. The patient is instructed not to take medicine they were taking before surgery. Unless it is instructed by a MCD team member. It is important for the patient to bring their medical insurance card to their pharmacy when filling and picking up medicine prescriptions.

**Transportation:** The patient needs a family member or support person(s) to drive them home. Travel help is needed for the patient, until told otherwise by the team. **Support Person(s):** A family member or support person(s) needs to stay with the patient for at least 2 weeks after discharge from the hospital. This stay includes a 2-4 day stay in the Madison area right after discharge if needed. The support person(s) will need to transport the patient to clinic visits and other appointments.

**Follow-up Visits:** The first clinic visit will be scheduled before discharge. The first follow-up visit is 2-3 days after discharge. At this visit, sutures holding the driveline in place may be removed. Five weeks after discharge, the patient will meet with the cardiac surgeon. At 8 weeks, the patient will meet with the heart failure doctor.

**Incision Care:** At discharge, the only dressing needed is the dressing at the site of the driveline. On all other incisions, a dressing is only needed if drainage is present. It is important to keep incisions clean and dry. Do not apply ointments, powders, or lotions to the incisions. At first the incisions may be red and swollen. This will lessen as the incision heals.

**Care for the Surgical Incisions:** Wash with warm non-scented soap and water. The incision must be patted dry. Do not rub the incisions until they are completely healed. Do not apply ointment or creams to this incision.

**Care for the Driveline:** The patient and support person(s) will learn to care for the driveline. There is a special method called sterile technique used to care for the driveline. Follow instructions given to you.

**Signs of Infection:** Contact a MCD member with any signs of infection or incision issues. Signs of infection include:

- Increased redness, warmth, and soreness
- Chills and heavy sweating
- Loss of hunger or weight loss
- Thick yellow drainage
- Persistent fever (Temperature greater than 100.5° F)

**Record Requirements:** The patient is required to monitor their weight daily. It is required for the patient to record their:

- Weight
- Systems check
- Mechanical Circulatory Device numbers

Document or spreadsheet as directed by the team.

**Fluid Limits:** The patient will need to restrict fluid and follow a low salt diet. The doctor often prescribes a water pill (diuretic) after surgery. Restricting fluids and lowering salt will help lower swelling. In turn, ease the patients breathing efforts.

Activity Level and Limits: As the patient heals, they will feel stronger and more independent. It will take weeks and sometimes months to feel strong. It is important to balance activity with rest and sleep. Deep breathing and coughing help the lungs recover. The patient will deep breath and cough with a machine called incentive spirometer after discharge for 3 weeks. Patients can be as active as they feel they can be. They know their body the best. Call the MCD planner if you have questions or concerns.

**General Limits:** All patients have activity limits after a MCD implant. It takes about 12 weeks for the bone in your chest to completely heal. **These limits apply for a 6-week time or until doctor approval after implantation:** 

- Eight-pound weight limit or the weight of a gallon of milk.
- Shoulders should not be flexed or extended beyond 90 degrees.
- Do not push or pull with arms when moving in or out of bed.
- Avoid reaching too far across the body.
- Do not hold breath during activity.
- Brace the chest when coughing or sneezing.
- Avoid long periods of shoulder activity.
- Do not repeat motions that cause the chest to pull or stretch.
- Report any clicking or popping noises around your breastbone to your surgeon.

**Driving Limits:** Approval from the surgeon or heart failure doctor must be granted before the patient can drive. This includes cars, trucks, ATV's, boats, motorcycles, and dirt bikes. **Other Limited Activities:** Avoid twisting motions and heavy lifting until directed by the surgeon or MCD team. The activities to avoid include:

- Snow shoveling
- Lawn mowing
- Golf
- Tennis
- Hunting
- Fishing
- Running
- Bike riding
- Motorcycle riding
- Contact sports (e.g., soccer and football)
- Weight lifting
- Bowling
- Vacuuming and sweeping

**Approved Activities:** There are many activities that the patient can do while they are healing. Below are examples of light weight activities:

- Light housework
- Visiting with friends
- Walking
- Shopping

**Dental or Surgical Appointment:** Take antibiotics before all dental work (cleaning), surgery, and major tests. The patient's dentist or doctor can order the antibiotics for them. Always take them before the visit.

**Return to Work:** The MCD social worker will complete all needed paperwork about employment for the patient and support person(s). It is important to bring the paperwork to the hospital before discharge. You should discuss this with your MCD team.

**Common Experiences:** These are some common patient experiences:

**Shortness of Breath:** Many patients feel shortness of breath. This occurs when extra water is in the body, anemia, or stress. Having shortness of breath with activity is common. Call your MCD planner if the shortness of breath gets worse.

**Decreased Appetite:** Patient may have deceased appetite or notice that food tastes different. The food can have a metallic or bitter taste. Decreased appetite may be caused by medicines used during the surgery, such as anesthesia. Eating small meals throughout the day may help to prevent feeling full quickly. The patient should eat what they can, while sticking to a low salt diet and restricting fluids. Protein is needed for healing. It is helpful to eat high protein meals. Any appetite changes or taste changes should return to normal a few weeks after the implant.

Loss of Sleep: Patients often have sleeping problems. They have trouble falling asleep or staying asleep. Patients can have strange or vivid dreams. There is no known reason for any of these. Naps or periods of rest are important in the first few weeks after discharge. Most patients find their sleeping problems go away in a few weeks. A sleep aid may be helpful for a short period of time. Ask the MCD team about medicines if sleeping is a problem.

**Changes in Mood:** Changes in mood, such as feeling low or depressed, are common. It is due to stress after surgery. It is best for the patient to share their thoughts and feelings with another person. Patients with a strong support system tend to recover more quickly. It may take several weeks for patients to feel better. If problems with coping exist, talk with the MCD team. When to Call for Help: It is important to know who and when to call for help. Call 911 when the patient:

- Has chest pain that is different than incisional pain.
- Has chest pain that feels like angina.
- Has severe shortness of breath.
- Has a faster irregular heart beat more than 10 minutes while at rest.
- Is fainting or feels like they are going to faint.
- Is unconscious.
- Is not responding to commands.

Call the MCD planner when the patient:

- Feels short of breath.
- Legs and/or feet are swollen.
- Has a weight that goes up or down by 2 pounds in 1 day.
- Has a weight that goes up or down by 5 pounds in 1 week.
- Has any sign of infection.

**Phone Numbers:** The patient should record the phone number of their surgeon.

The phone numbers for the surgeons during business hours (Weekdays 8:00 AM to 4:30 PM):

- Dr. Takushi Kohmoto 608-262-3858
- Dr. Lucian Lozonschi 608-262-3858
- Dr. Satoru Osaki 608-263-0439
- Dr. Paul Tang **608-263-1407**

#### After hours/weekend/holiday: 608-263-

**6400.** This will get the paging operator. Ask for the MCD planner or heart failure attending on call. The patient will leave their name and phone number with an area code. The someone will return the call.

#### Out of the Area: 1-800-323-8942. This will

get the paging operator. Ask for the Mechanical Circulatory Device coordinator or heart failure attending on call. The patient should leave their name and phone number with an area code. The attending will return the call.

#### Appointment Questions: 608-263-1530.

Please call the Cardiology Clinic during regular business hours (weekdays 8:00 AM to 4:30 PM).

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 6/2019 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7892