

## **Patient Timeline to Surgery and Recovery – Mechanical Circulatory Device**

### **Pre-Mechanical Circulatory Device (MCD) Implantation**

#### **First Visit: Heart Failure Team**

- Assess history and physical exam
- Complete other tests prescribed by the doctor
- Review medical records and test results
- Discuss treatment options
- Share review of findings with referring doctor
- Talk over case with cardiac surgeon

#### **Second Visit: Cardiac Surgeon**

- Assess history and physical exam
- Review medical records, surgical history, medicine, and test results
- Discuss timeline for surgery
- Create timeline to stop medicines
- Schedule other tests or exams needed
- Share review of findings with the heart failure team
- Talk over MCD evaluation consent

#### **MCD Coordinator**

- Review MCD system
- Discuss plan for post-surgical education
- Share a post-surgical recovery course
- Talk over post discharge instruction
- Learn of patient, community, doctor, and hospital planning

### **Prepare for Your Hospital Stay**

- Stop drinking alcohol
- Leave all jewelry, rings, large sums of money, and credit cards at home
- Bring pajamas, robe, non-skid slippers, cell phone, and other personal items with you
- Bring labeled inhalers or CPAP equipment, glasses, hearing aids, dentures, and prosthesis

### **Admission for Mechanical Circulatory Device Implant**

#### **Day of Hospital Stay**

- Blood is drawn
- Complete admission paperwork
- Meet with a heart failure nurse practitioner
  - Update medical history and physical exam
  - Review medicines and discuss plan for taking medicines
  - Order required tests, such as an echocardiogram or right heart catheterization
- Meet with a cardiac surgery nurse or physician's assistant
  - Discuss post-surgical course
  - Complete surgical evaluation
  - Sign consent for surgery

- Meet with a MCD Coordinator
  - Review MCD materials
  - Discuss post-surgical education plan
  - Complete quality of life survey and preparing the house checklist
- Meet with an anesthesiologist
  - Discuss the time you will go down to operating room for surgery
- Meet with surgeon before surgery for questions

### **Night Before Surgery**

1. Eat a light, low-fat meal
2. Stop eating solid food at 7 PM
3. Stop drinking milk, and juice with or without pulp at 7 PM
  - Stop drinking clear liquids at midnight
  - No eating or drinking after midnight unless discussed with a staff nurse
  - Shower with an antimicrobial soap
    - Scrub from the neck to the toes for 2 to 3 minutes
    - Do not break the skin when scrubbing
    - Do not apply lotions or powders to skin
  - Remove all make makeup and nail polish

### **Morning of Surgery**

- Brush teeth and rinse do not swallow
- Shower with antimicrobial soap called Hibiclens<sup>®</sup>
  - Follow instructions given the night before
- Take morning medicines as directed by the surgeon

### **Family Instruction: Day of Surgery**

- Two family members may escort you to the operating room
- Family will be guided to the family waiting area by operating room staff
- Family will need to give a phone number to the operating room staff
- Family will need to pick up a pager from the operating room staff
- Family will be updated on your condition throughout the surgery
- Family will be taken to the to the post-op unit after surgery
- Family will be updated by the surgeon after the surgery is done

### **After Surgery**

#### **Day of Surgery: Cardiothoracic Surgery Unit (B4/5)**

- Family may visit after a recovery period (1-2 hours).
- A breathing tube will be in place after surgery. You will not be able to talk. It is removed as soon as you are awake enough to breathe on your own. After the tube is removed, you may begin to talk.
- Several tubes and lines will be placed during surgery. Please see the section in the binder called “Common Tubes and Lines” for details.
- You and your family will hear several noises, such as the beep of the monitor and the bubbles from the chest tubes. The noises you hear are normal.
- Wrist restraints may be in place after surgery. The restraints protect you from hurting yourself while waking up from anesthesia.
- The nurse will start turning you the evening of surgery.

### **Post-Op Day # 1-2**

- The Cardiac team visits daily to assess progress, called rounding. The time of day may vary. They first meet outside the room to discuss your progress. Then they go into the room to update you and your family and answer any questions.
- See the section in the binder called “Your Health Care Team” for a list of health care workers involved in your care while in the hospital. Focused teams, not listed in this section of the binder may also visit you, based on your needs.
- The MCD team will visit daily to assess your recovery progress.
- Removal of tubes and lines is based on your progress. It is reviewed daily.
- Diet begins at clear liquid (e.g., water and ice chips) and advances as tolerated.
- Cough and deep breathe daily using an incentive spirometer (breathing device).
- Physical therapy will help you sit, stand, and walk. The nurse can also help.
  - The goal is to get out of bed and sit in the chair at least 3 times a day.
  - The goal is to walk in the hallway 4 times a day.
- Education about the MCD is given to you and your family.

### **Post-Op Day 3 Until Discharge**

- The Cardiac team visits daily to assess progress, called rounding. The time of day may vary. They first meet outside the room to discuss your progress. Then they go into the room to update you and your family and answer any questions.
- See the section in the binder called “Your Health Care Team” for a list of your health care workers. Focused teams, not listed in this section of the binder may also visit you, based on your needs.
- All tubes and lines are assessed daily for removal.
- Physical therapy will help you sit, stand, and walk. The nurse can also help.
  - The goal is to get out of bed and sit in the chair at least 3 times a day.
  - The goal is to walk in the hallway 4 times a day.
- Cough and deep breathe daily using an incentive spirometer (breathing device).
- Staff from Cardiac Rehab will meet with you on post-op day 4 or 5.
- Education is provided to you and your family every day while in the hospital.
- Discharge date will depend on your recovery. As well as your knowledge of the MCD, family’s ability to do dressing change, blood pressure control, and stable weight.

## **Day of Discharge**

- A member of the heart failure team talks about discharge with you. Please see the section in the binder called “Homeward Bound” for details.
- A pharmacist reviews medicines with you and your family.
- The nurse reviews discharge instruction with you and your family.
- MCD planner reviews what is expected of you and your family post discharge. They answer any questions.
- Other members of the health care team may meet with you and your family before leaving the hospital.
- Pick medicines at your local pharmacy of choice before arriving home or our hospital’s outpatient pharmacy.
- Another follow-up care is arranged as needed.

## **Recovery After Leaving the Hospital**

### **Care at Home**

- Daily, you must review the MCD numbers and collect a weight. Bring those to clinic for evaluation by the provider.
- Every patient is unique in how they recover and feel after MCD implant. There are some common feelings each patient has after surgery.
- Please see the section in the binder called “Homeward Bound” for more details.

### **Follow-Up Visit: 2-3 Days After Discharge**

- Blood will be drawn in the lab before your follow-up visit.
- You will meet a MCD team member to discuss progress.
- Future follow-up visits will be scheduled.

### **Follow-Up Visit: 2-4 weeks After Discharge**

- You will meet a MCD NP to discuss your progress.
- Cardiac Rehab begins around this time.

### **Follow-Up Visit: 4-6 Weeks After MCD Implant**

- Tests will be done before your visit as ordered by the surgeon.
- You will meet with a MCD team member.
- Surgeon will talk to you about driving.
- Surgeon will discuss changing daily dressing to every three-day dressing change.
- Surgeon will discuss changing the lifting limit.

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#7893