



# Family Timeline to Surgery and Recovery-Mechanical Circulatory Device

## Pre-Mechanical Circulatory (MCD) Implant

First Visit: Heart Failure Team

- Complete history and physical exam
- Review medical records and test results
- Discuss treatment options
- Do other tests as needed
- Share review of findings with referring doctor
- Discuss case with cardiac surgeon

#### Second Visit: Meet with Cardiac Surgeon

- Complete history and physical exam
- Review medical records and test results
- Discuss treatment options
- Plan for surgery (if needed) and time frame to stop any over the counter blood thinners, aspirin, alcohol, smoking
- Do other tests before surgery, if needed
- Share review of findings with heart failure team
- Review MCD evaluation consent

#### Meet with MCD Coordinator

- Review the ventricular assist MCD system
- Review the care of the device to function well
- Review education plan in the hospital
- Review normal post-op phase- length of stay, lines, drains, tubes
- Review what you need to do after leaving the hospital-staying at a local

hotel (if needed), timeline of lab tests and clinic visits

• Talk about coordination with local hospital, doctors

### Home Instruction: Prepare for the Hospital Stay

- Your loved one should stop drinking alcohol.
- Your loved one should stop taking doctor prescribed medicines.
- Your loved one should leave all jewelry, rings, large sums of money, and credit cards at home.
- Your loved one should take along pajamas, a robe, non-skid slippers, cell phone, and other personal items.

# The Hospital Stay

### **Day of Admission**

- Your loved one will have blood drawn.
- Your loved one and you will be asked a series of questions to complete paperwork.
- Your loved one and you will 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
- Your loved one and you will meet with a cardiac surgery nurse practitioner or physician's assistant.

- Discuss expected postsurgical course
- Complete the surgical evaluation
- Sign consent for surgery
- Your loved one and you will meet with a MCD coordinator.
  - Review MCD materials
  - Discuss post-surgical teaching plan
  - Complete quality of life survey and checklist to prepare the house
- Your loved one and you will meet with an anesthesiologist.
  - Discuss the time patient will go down to operating room (OR) for surgery.
- Your loved one and you will meet with surgeon before surgery for questions.

## **Night Before Surgery**

- Your loved one may eat a light meal low in fat content.
- Your loved one should stop eating solid food at 7 PM.
- Your loved one should stop drinking milk, and juice with or without pulp at 7 PM.
- Your loved one should stop drinking clear liquids at midnight.
- Your loved one should not eat or drink after midnight unless discussed with a staff nurse.
- Your loved one will shower with Hibiclens<sup>®</sup> 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

## **Morning of Surgery**

- Your loved one should brush his/her teeth and rinse but should not swallow.
- Your loved one will shower with Hibiclens<sup>®</sup> soap again.
  - Follow the same steps from the night before
- Your loved one will take morning medicines as directed by the surgeon.

## **Day of Surgery**

- Two family members may go with the patient to the OR
- Family will be guided to the family waiting area by OR staff
- Family will need to give a phone number to the OR staff.
- Family will need to pick up a pager from the OR staff.
- Family will be updated on the patient throughout the surgery.
- Family will be sent to the to the postop unit after surgery.
- Family will be updated by the surgeon on the post-op unit after the surgery is done.

# **Post MCD Implant**

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

- Family may visit after the patient recovers (1-2 hours).
- Your loved one will have a breathing tube. It will be in place after surgery. The patient will not be able to talk. It is removed as soon as the patient is awake enough to breathe on their own. After the tube is removed, the patient may begin to talk.
- Your loved one will have many tubes and lines placed during surgery. Please see the section in the binder called "Common Tubes and Lines" for details.

- Your loved one and you will hear a lot of noises, such as the beep of the monitor and the bubbles from the chest tubes. The noises you hear are normal.
- Your loved one may have wrist restraints in place after surgery. The restraints protect the patient from hurting themselves while waking up from anesthesia.
- The nurse will start turning your loved one the evening of surgery.

## Day After 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 the patient's progress. Then they go into the room to update the patient and 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 the patient's care. Other teams, not listed in this section of the binder may also visit the patient, based on the needs of the patient.
- The MCD team will visit daily to assess patient recovery progress.
- Your loved one may have lines and tubes removed but will depend on his progress. It is reviewed daily.
- Your loved one may have a diet ordered. At first, the diet is only clear liquids (e.g., water and ice chips) and advances as tolerated.
- Physical therapy will help your loved one 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.

• We teach the patient and family about the MCD daily.

# Post-Op Day 3 Until Discharge: The Hospital Stay

- Same schedule as days 1-2.
- Discharge date will depend on the patient's recovery, knowledge of the MCD, and if the caregiver is able to help with dressing change, blood pressure control, and keeping a stable weight.

# Day of Discharge: Last Day at the Hospital

- A member of the heart failure team talks about discharge with the patient. Please see the section in the binder called "Homeward Bound" for details.
- A pharmacist reviews medicine with you and your loved one.
- The nurse reviews discharge instructions with you and your loved one.
- MCD coordinator reviews what you and your loved one need to do post discharge. They answer any questions.
- Other members of the health care team may meet with you and your loved one before leaving the hospital.
- You can pick up medicines at your loved one's local pharmacy of choice before going home or our hospital's outpatient pharmacy.
- Other follow-up care is arranged as needed.

# **Recovery at Home**

### Care at Home

- Daily, your loved one must review the MCD numbers and collect a weight. Bring those to clinic for review by the provider.
- Every patient is unique in how they heal and feel after a 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 from Discharge

- Your loved one will have blood drawn in the lab before the follow-up visit.
- Your loved one will meet an MCD team member to discuss progress.
- Future follow-up visits will be scheduled.

# Follow-Up Visit: 2-4 Weeks from Discharge

- Your loved one and you will meet a MCD NP to discuss progress.
- Cardiac Rehab begins.

### Follow-Up Visit: 4-6 Weeks from MCD Implant

- Your loved one may have tests to do before the visit as ordered by the surgeon.
- You and your loved one will meet with a MCD team member.
- Your loved one's surgeon will talk about when the patient can resume driving.
- Your loved one's surgeon will discuss changing daily dressings to every three-days.
- Your loved one's surgeon will discuss changing the lifting restriction.

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#7905