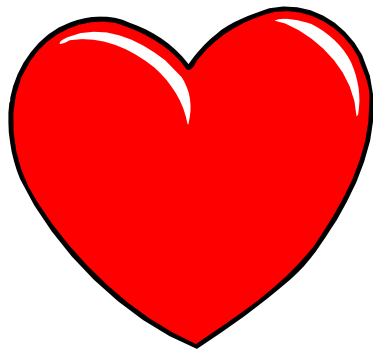




Preparing for Heart Surgery

At

East Jefferson General Hospital



**Cardiac Rehabilitation
Department**

503-4145

You have been scheduled for **Coronary Artery Bypass Grafting (CABG) and/or Valve replacement surgery** by your physician.

- Quit smoking and keep blood sugars under control **NOW** to avoid complications.
- If you are being admitted to the hospital the day of surgery, you will have to go through the pre-admit process the day before your scheduled surgery. This will include filling out necessary paperwork and meeting with the Anesthesiologist. Also, lab work, an EKG, chest x-ray and other tests will be performed.
- You will also be given instructions for the morning of your surgery. The day of your surgery, you will need to arrive at the hospital for 5:00am or the time designated by your surgeon. You will report to Same Day Surgery on the 3rd floor of the Domino Pavilion at the hospital. Parking is available in the Hudson garage, which is connected to the Domino Pavilion.
- Follow Pre-operative Surgery Showering Guidelines-Hibiclens (sheet included).
- When you arrive at the hospital, you will be given a surgical prep which involves clipping body hair from head to toe, bathing with special wipes and nasal swabs.
- Remember not to eat, drink, or take any medications after midnight, unless otherwise instructed by your doctor. The anesthesiologist may provide this information.
- Leave any valuables at home.
- Before being brought to the surgical holding area, you may receive an injection from your nurse to help you relax. You will not be allowed to get out of bed after this time.

- When you are on your way to surgery, your family may wait in the surgical waiting room, on the 3rd floor of the hospital. Your family will be notified in the waiting room at the time your surgery begins. They should not expect to hear anything until the surgery is over in about 4-6 hours.
- Once the surgery is over, you will be taken directly to the Intensive Care Unit (ICU). Your family can then wait in the ICU waiting room, also located on the 3rd floor. Your family will be able to come in to see you once you have been settled in the unit, which may take up to 1.5-2 hours. They will then have to follow the visiting hours, listed on the attached sheet. Your family may ask the nurse for the phone number to ICU when they go in for the initial visit.
- If you have dentures, eyeglasses, hearing aids, eye drops, or respiratory inhalers, your family may give these items to the ICU nurse on the first visit after surgery. A small bag of personal items may be left in ICU.
- Other personal items, including robe and slippers, can be brought to the step-down unit, once you are transferred out of ICU.
- See ICU Information for Families brochure for visiting times and information. This can be found in the ICU waiting room and in the ICU.

What to Expect Once You Begin to Wake Up From Surgery

- To get to the heart, your Heart Surgeon must cut through your sternum, which is the bone located in the middle of your chest. You will have an incision down the middle of your chest. Veins/arteries can be taken from both your legs and/or arm to be used for the

Bypass Graft on your heart. If the saphenous vein is used from your leg, your incision(s) will be on one or both legs. The leg incision could extend from your ankle to your upper thigh or will be smaller if endoscopic vein harvesting is used. You may also have an incision on one of your arms if the radial artery will be used for graft. The Internal Mammary artery may also be used. This is located in the left and right shoulder area. Your surgeon will decide which veins/arteries are used. All incisions will be covered for 48 hours.

- When you begin to wake up from surgery, you will notice that you have a breathing tube down your throat that is helping you to breathe until you are awake enough to breathe on your own. You will not be able to talk, but the ICU nurses may read lips and you can always write a note. The breathing tube will probably be removed the evening of your surgery.
- Your hands will be lightly restrained to prevent dislodgement of any lines or tubes. As soon as you are awake enough, the restraints will be removed.
- You may also have a tube going down your nose into your stomach to drain the stomach fluids.
- There will be an IV in your neck with a dressing covering the site. Another line in your wrist will monitor blood pressure.
- You will have a chest tube(s) coming from your chest. It will drain bloody fluid into a canister, hanging on the side of your bed.
- You will also have a catheter in your bladder draining urine.
- There will be electrodes on your chest that will be attached to the heart monitor on the side of your bed.

- Near your chest incision, there will be a set of wires in a test tube that will be taped down. These wires are available if your heart rate is too slow and you need to be connected to a temporary pacemaker.
- Once your breathing tube has been taken out, you will be asked to do coughing and deep breathing exercises. This will help prevent pneumonia. You will wear a Heart Hugger Sternum Support Harness to support your chest incision during coughing and position changes.
- You will be wearing stockings (Ted Hose) that will help prevent blood clots from forming in your legs. Move your legs while you are in bed to help prevent blood clots from forming. You should receive two pairs of Ted Hose. Stockings should be hand washed daily. NEVER put on dirty or soiled stockings.
- The morning after surgery, you should be sitting up in a chair eating breakfast. You should expect to be transferred to a regular room in the step-down unit on this day. Many of the tubes will be taken out before you are transferred. You may only have EKG electrodes, oxygen, and an IV.
- Once you are transferred, someone from the Cardiac Rehab Department will see you daily until you are discharged. They will discuss your discharge instructions and assist with your activity schedule.
- Your anticipated discharge date is usually 4-6 days after surgery.



Please write down any questions you may have, and someone from the Cardiac Rehab Department will be in to see you the day after your surgery.

Important Phone Numbers

Surgery Waiting Area (504) 503-4179 (504) 503-4195	ICU Family Room (504) 503-5539 (504) 503-5540
---	--

If your surgeon has not discussed pre-operative showering instructions with you, please utilize the following guidelines to keep your skin as clean as possible, and to help prevent infections.

1. Shower with an antibacterial soap, **Hibiclens**.
 - We recommend showering with Hibiclens starting 5 days before, including the night before, and the morning of surgery. If your procedure is within five days, start tonight.
 - You will need to purchase an additional bottle of Hibiclens in order to complete the 5 days of preoperative showering.
 - Do not use it on mucous membranes, such as your genital area. Do not get Hibiclens in your eyes or ears.
 - Follow package directions when using Hibiclens.
2. In the shower, wet skin and wash body from the neck down, front and back. Leave soap on for 1 to 2 minutes.
3. Pay special attention to the groin area, belly button, skin folds, underarms, hands and feet as well as the area where you will have surgery.
4. Ask someone for help if you are unable to wash certain areas of your body.

5. Rinse well.
6. Gently dry with a towel.

Please Remember:

1. **DO NOT SHAVE ANY BODY PARTS THE NIGHT BEFORE OR THE MORNING OF SURGERY** from the neck down (your legs or underarms). Shaving can increase your risk of infection when you have surgery.
2. **AFTER YOUR SHOWER** do not use any powder, deodorant, perfumes, or lotion prior to surgery
3. **WEAR FRESHLY LAUNDERED** pajamas to bed that night and sleep on freshly laundered sheets.
4. **SHOWER AGAIN** with Hibiclens, the morning of surgery, prior to arriving, following the above instructions.
5. **WEAR FRESHLY LAUNDERED** clothes to the hospital.