

PREPARING FOR YOUR  
**Heart Surgery**

 **The Elliot**

Heart and  
Vascular Center

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# Preparing for Your Heart Surgery

Before your heart surgery, you'll receive education and support from our team of doctors, nurse practitioners, physician assistants, and nurses to help you feel prepared and confident. You'll be given written instructions and also receive verbal guidance from the cardiac surgery office. Use this guide to help you get ready for surgery and know what to expect each step of the way.

## Getting Ready for Surgery

If you're coming from home on the day of your operation, there are important steps to follow in advance. These instructions are designed to keep you safe and make sure everything goes smoothly. If you are already staying in the hospital, your nurse will help you complete these steps.

## Key Pre-Surgery Preparation

-  **Stop smoking**  
If you smoke, please let your surgeon know. You'll need to stop at least four weeks before your surgery to support healing and reduce complications.
-  **Speak with a Cardiothoracic office nurse**  
Our nurses can help you plan for your needs after surgery and discuss options for recovery at home or in a care facility. Contact our office to learn more.
-  **Follow all instructions carefully**  
Your care team will explain what you need to do leading up to surgery. Please follow these directions closely to ensure the best possible outcome.

## The Day Before Surgery

You will receive a phone call from our office the evening before your procedure with your exact arrival time. We often don't receive the final operating room schedule until later in the day, so thank you for your patience. In rare cases, your surgery may be postponed due to an emergency.

## The Night Before Surgery

**You cannot eat or drink anything after midnight the night before surgery.**

One of the most important things you can do is prepare your body for surgery by reducing germs on your skin. You'll be asked to complete a pre-operative shower using a special antiseptic soap called chlorhexidine gluconate (CHG), provided by our team.

### How to Perform Your Pre-Operative Scrub:

1. Wash your hair with regular shampoo and rinse thoroughly.
2. Wet your entire body.
3. Turn off the water or step out of the spray.
4. Apply the CHG soap from the neck down, avoiding your eyes, ears, and mouth.
5. Gently scrub your entire body, focusing especially on the area where surgery will take place (typically the chest), for about three minutes.
6. Rinse the CHG soap off completely.
7. Do not use regular soap afterward.
8. Pat yourself dry with a freshly washed towel.
9. Do not apply any powders, lotions, or deodorant.
10. Dress in clean, freshly washed clothes.
11. Do not shave the surgical area (chest or legs).

# The Day of Surgery

## Morning Preparation

- ✔ **Repeat your CHG shower** using the same instructions as the night before.
- ✔ **Keep your stomach empty.** Do not eat or drink anything.
- ✔ **Brush your teeth or use mouthwash,** but do not swallow.
- ✔ **Take only approved medications** with a small sip of water, as directed by your care team.

### Medication Instructions




- ✔ **Take:**
- Aspirin
  - Beta-blockers (e.g., metoprolol, atenolol, labetalol)
- ✗ **Do NOT take:**
- Diuretics (e.g., Lasix, hydrochlorothiazide)
  - ACE inhibitors (e.g., lisinopril, enalapril, captopril)
  - Oral diabetes medications
  - Metformin (stop 2 days before surgery)
  - If you are taking Coumadin or Plavix, please confirm instructions with your surgical team. If no instructions received, please notify the office.

### Diabetes Medication Specifics:





- **NPH insulin:** Take half your normal dose.
- **Lantus/Glargine insulin:** Take usual dose.
- **Insulin pump:** Continue normal basal rate.

### What to Bring (and Not Bring)

#### You may bring:

-  Toothbrush, comb, slippers, and a robe
-  Glasses, contact lenses, hearing aides, or dentures
-  CPAP machine, if you currently use one at home

#### Please do not bring:

-  Jewelry, including wedding rings (your fingers may swell)
-  Makeup or nail polish
-  Valuables or large personal items
-  Food, candy, mints, gum, or liquids

## Arriving at the Hospital

- Please arrive at the hospital at 5 a.m.
- Park at the Main Entrance of Elliot Hospital, 1 Elliot Way, Manchester, NH.
- Come in through the Main Entrance. A security guard will greet you at the front desk and contact the Intensive Care Unit on your arrival.
- A staff member will escort you to the Intensive Care Unit where you will be prepped for surgery. One family member may accompany you at this time.



## During Surgery

- You'll first be brought to the Intensive Care Unit for preparation, including hair clipping.
- Then, you'll be moved to the **operating room**, where anesthesia will be given through your IV.
- After you're asleep, IV lines, a breathing tube and a urinary catheter will be placed.
- Surgery usually lasts **4 to 6 hours**.

Your family will receive regular updates from our surgical team during the procedure. The surgeon will speak with your designated family contact once the surgery is complete.

### Contact Us With Questions

We're here to help you feel safe and supported as you prepare for surgery. Please call us if:

- You develop a **fever or feel ill** within 48 hours of your surgery.
- You notice **worsening symptoms** such as chest pain or shortness of breath.
- You have **questions or concerns** about medications, instructions, or your recovery plan.
- We're here to help you feel safe and supported as you prepare for surgery.





# What to Expect After Your Surgery: Days 1-2

In the first couple of days after your surgery, our care team will be closely monitoring your recovery and working to keep you comfortable, informed, and progressing safely. We will keep you and your loved ones updated on your daily care goals and your estimated discharge date. Here’s what to expect during this important stage of healing.

## Monitoring and Recovery Goals

Our focus is to help you reach key health goals, such as becoming more alert, mobile, and ready to take your first steps toward going home. During days 1 and 2, you can expect:

- Continuous monitoring of your vital signs
- Daily lab work to track progress
- Updates from your care team on your recovery milestones
- Evaluations by physical and occupational therapists
- The removal of drains, lines, and catheters—typically on day 1 or 2
- Possible transfer out of the Intensive Care Unit (ICU), if appropriate.

## Activity and Mobility

Getting up and moving is a critical part of your recovery. We’ll help you safely increase your activity level with support from our nursing and rehabilitation staff. You may expect to:

- Get out of bed 2–3 times daily
- Walk (or “ambulate”) around your room
- Physical Therapy
- Learn safe movement techniques and sternal precautions to protect your chest and surgical site

## Breathing and Lung Function

To protect your lungs and reduce the risk of complications such as pneumonia, we’ll guide you through respiratory exercises listed below. These techniques are simple but powerful tools to help keep your lungs healthy.

- Coughing and deep breathing
- Using an incentive spirometer 10 times each hour while awake

## Nutrition and Diet

A dietitian will assess your dietary needs and help determine when it’s safe to resume your regular diet. In most cases, patients can eat normally unless otherwise advised by the medical team.

- We monitor your weight daily
- By day 2, we aim for you to be eating at least 50% of your meals
- If needed, nutritional supplements may be recommended to support healing

## Pain Management

Managing post-surgical pain is essential to your recovery. You may experience discomfort due to the surgical impact on your skin, muscles, bones, and nerves. Our goal is to keep your pain at a manageable level so you can breathe deeply, move, and eat comfortably.

Pain medications are tailored to your needs and tolerance. We may also prescribe additional medications, such as stool softeners or laxatives, or iron supplements.

## Wound Care

- Your surgical dressing will be assessed by your nurse daily.
- If there is drainage at the incision site, your nurse will change the dressing every 24 hours or as needed.

## Discharge Planning

We begin discharge planning early to ensure a smooth transition from hospital to home—or to additional care if needed. A case manager will meet with you and your family to review:

- Home care assistance
- The potential need for a skilled nursing facility (SNF)
- Acute rehabilitation options

We’ll help coordinate referrals and next steps to support your continued recovery.

## Education and Support

Before you leave the hospital, our team will review essential post-surgery education with you, including:

- Sternal precautions
- Coughing and breathing exercises
- Incentive spirometer use
- Pain control strategies
- What activities are safe—and what to avoid
- An introduction to cardiac rehabilitation
- A printed post-operative teaching booklet to take home

If you have questions or concerns during your stay, don’t hesitate to speak with your care team. We’re here to support you every step of the way.



# What to Expect After Your Surgery: Days 3-4

As you move into days 3 and 4 of your recovery, you'll likely notice increased strength and independence. Our care team will continue to monitor your progress closely, guide your recovery, and keep you and your loved ones informed about your estimated discharge date.

## Monitoring and Recovery Goals

Each day, we'll continue daily lab work and check that you're meeting key health milestones. These include:

- Stable vital signs
- Being awake and aware, assessed three times daily
- Getting out of bed at least three times a day and for every meal
- Walking around or "ambulating" three to four times daily
- Effective pain management
- Using the incentive spirometer 10 times every hour while awake
- Eating at least 50% of meals by day 3 and 75% by days 4 or 5

We also regularly assess your drains, catheters, and IV lines, and remove them when appropriate.

## Increasing Your Activity

Being active helps speed your recovery and prevent complications. With help from our team, you should be able to:

- Get out of bed three times daily
- Sit up for all meals
- Walk at least 100 feet by day 3
- Walk at least 200 feet by days 4 or 5

You'll continue to work with physical therapy and follow any special movement precautions, such as sternal precautions, to protect your chest.

## Supporting Your Breathing and Lung Health

To lower the risk of pneumonia and improve your lung function, we'll continue to check your respiratory health with:

- Coughing and deep breathing exercises
- Incentive spirometer use—10 times every hour while you're awake
- Daily oral care to reduce bacteria

These activities are small but essential steps in your recovery.

## Nutrition and Diet

You'll likely return to your regular diet unless your care team recommends otherwise. Our goals for nutrition include:

- Eating at least 50% of all meals by day 3
- Eating at least 75% of meals by days 4 or 5
- Monitoring your weight daily

If you need extra support meeting your nutrition goals, we may recommend dietary supplements.

## Pain Management and Medications

Controlling pain helps with breathing, sleep, appetite, and mobility. Your surgical team will regularly review your medication needs to ensure you're comfortable and safe.

In addition to pain medication, you may receive:

- Anti-nausea medications
- Stool softeners or laxatives
- Iron tablets
- Some of your regular home medications, as clinically appropriate

## Caring for Your Surgical Site

- Your surgical dressing will be assessed by your nurse daily.
- If there is drainage at the incision site, your nurse will change the dressing every 24 hours or as needed

## Discharge Planning

Our case managers will continue working with you and your family to prepare for your transition out of the hospital. Discharge planning may include:

- Evaluating your needs at home
- Discussing support services or in-home care
- Planning for a stay at a skilled nursing or rehab facility if needed

## Ongoing Education and Support

We'll continue providing education throughout your stay, covering important topics like:

- Sternal precautions to protect your incision
- Breathing and coughing techniques
- Incentive spirometer use
- Managing pain
- Activity guidelines after surgery
- Dietary recommendations
- An introduction to cardiac rehabilitation

You'll also receive written materials and a post-op packet to take home.

Our team is always here to help. Please reach out to your nurse or care provider at any time.



# What to Expect on Discharge Day

Discharge day marks a major step forward in your recovery. It means you’ve met important milestones and are ready to continue healing at home or in another care setting. Our team will make sure you feel confident and prepared before you leave the hospital.

## Discharge Evaluation

Before you’re discharged, we’ll perform a final check to ensure you meet the necessary criteria for a safe transition. If you meet the criteria listed below, you’re ready to leave the hospital.

**To be cleared for discharge, you must have:**

- ✓

Stable vital signs
- ✓

The ability to get out of bed three times a day and for all meals
- ✓

The ability to walk—either independently or with help from staff or a family member
- ✓

Effective pain management
- ✓

Had a bowel movement
- ✓

The ability to eat and drink well

## What Happens Next

Your case manager will go over your discharge plan, which may include:

- Going home with support
- Starting outpatient physical therapy
- Transferring to a skilled nursing or rehabilitation facility for additional care

Our team will help you and your family coordinate any follow-up services or referrals you may need.

## Caring for Your Surgical Site

Before you leave, we’ll:

- Remove any remaining drains, catheters, or IV lines
- Check your incision to ensure it is clean, dry, and healing properly

We’ll also give you clear instructions for taking care of your wound at home.

## Medications

We will review your discharge medications with you and your family, making sure you understand how and when to take them. Most prescriptions will be sent directly to your local pharmacy.

## Follow-Up Appointment

Before you leave, we’ll schedule a follow-up visit with your cardiothoracic surgeon or advanced practicing provider. This appointment usually takes place 2 to 3 weeks after discharge and allows us to:

- Check your incision site
- Monitor your recovery progress
- Answer any questions you may have
- Schedule an appointment with your cardiologist and your Primary care physician

## Have Questions Before You Leave the Hospital?

Our team is always here to support you. Don’t hesitate to call your care provider if you have concerns about your recovery, medications, or symptoms.

## Cardiothoracic Surgical Office

4 Elliot Way, Suite 201  
Manchester, NH 03103  
Phone: 603-314-6350 | Fax 603-314-6359

## Notes

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