Your Heart's in the Right Place

RIVERSIDE CARDIOPULMONARY REHABILITATION

Post Angioplasty/Stent Cardiac Rehab Phase 1



CARDIAC REHAB LOCATIONS

Riverside Cardiopulmonary Rehabilitation, Kankakee

500 N. Wall Street, Suite C401 Kankakee, Illinois 60901 (815) 935-3271

Riverside Cardiopulmonary Rehabilitation, Bourbonnais

400 Riverside Drive, Suite 1700 Bourbonnais, Illinois 60914 (815) 432-7663

Riverside Cardiopulmonary Rehabilitation, Watseka

1490 E. Walnut Street, Suite A Watseka, Illinois 60970

815-432-7665

riversidehealthcare.org





POST ANGIOPLASTY/STENT CARDIAC REHAB PHASE 1

Thank you for choosing Riverside	Eating for a healthy heart
Medical Center for your heart	Sexual activity and your heart
procedure. We are here to assist	☐ Emotional changes after heart problems
you in your recovery and address	Development of heart disease
any questions you may have before	Ctross and your boart
going home.	Stress and your heart
	Smoking and your heart
Dear,	☐ Alcohol and your heart
We want to give you the best care possible to improve your heart health. Like most people with heart disease,	☐ Guidelines for activity/exercise at home
you probably have many questions. It is important for us to know what you are most interested in learning	☐ Activity/exercise precautions
while you are in the hospital. To help us address what information you need, please check all the topics that	Heart catheter procedure
interest you.	☐ Bypass graft surgery
☐ Treatments and related equipment	☐ Heart balloon procedure
Heart and arteries, structure and function	Stent placement procedure
Activity progression during hospital stay	☐ Valve repair/replacement procedure
☐ What to do for chest pain	Heart failure
☐ Emergency planning for home	Internal cardiac defibrillator
Heat attack and healing	Cardiac Rehab Phase II program
☐ Your risk factors	☐ Effects of heart problems on families
☐ How to take your pulse	Return-to-work questions
High blood pressure	Heart rhythms
High blood cholesterol	Development of heart disease
☐ Your medications	
Fitness and health	

During Angioplasty and Stenting

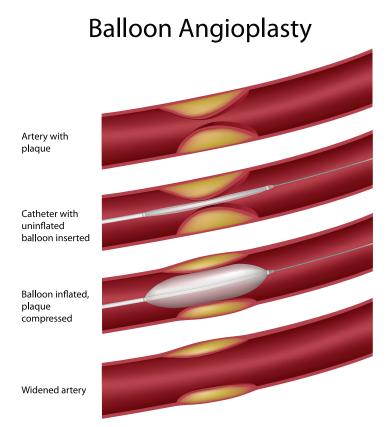
Angioplasty and stenting is used to open the artery that has a buildup of plaque. Plaque is a mixture of fat, cholesterol and other blood particles. The buildup of plaque in the artery is called atherosclerosis. The plaque narrows the path that blood has to flow, blocking oxygen from getting to the muscle of your heart. Buildup of plaque also makes it difficult for the artery wall to expand when the heart needs more oxygen. This leads to the symptom of angina. In some cases this blockage can close the artery off enough to cause a heart attack.

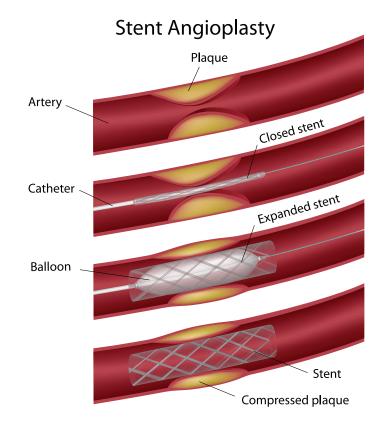
Balloon Angioplasty is a procedure that is performed during cardiac catheterization in order to open the narrowing of the artery from plaque. A catheter is put into an artery in your groin or wrist. The catheter will be guided through this artery to your heart and into the narrowed or blocked artery. A balloon catheter is placed into the artery using a guidewire. The inflated balloon pushes the plague against the artery walls. This opens them and allows more blood flow to your heart. The balloon is then collapsed and the catheter is then removed from the artery.

Stenting – A stent is a tiny wire mesh tube that supports the artery wall. It is placed in order to keep the now open artery patent. It is inserted on a catheter using the guide wire and placed at the site of the plague. One or more stents may be inserted depending on the size and location of the plaque. Once in place a balloon is used to open the stent. The balloon is collapsed and removed leaving the stent behind.

Angina – pain, pressure or tightness usually felt in your chest. Chest pain can come on when you are stressed or do physical activities. This may also cause pain in the neck, jaw, shoulders, arms and back. You may also experience shortness of breath, sweating, nausea or lightheadedness. This is a warning sign that you may be at risk for a heart attack.

Heart Attack – Unlike angina, the chest discomfort and other symptoms do not go away with rest. This is because the muscle is not getting enough oxygen and there is actual damage to the muscle tissue.





Post-Operative Exercises

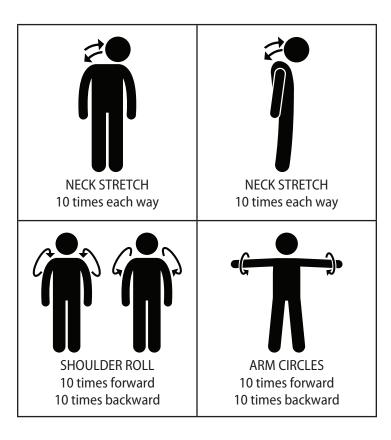
When you are ready, these exercises promote good circulation and help to decrease complications after the procedure. You can complete all exercises at least onetwo times per day.

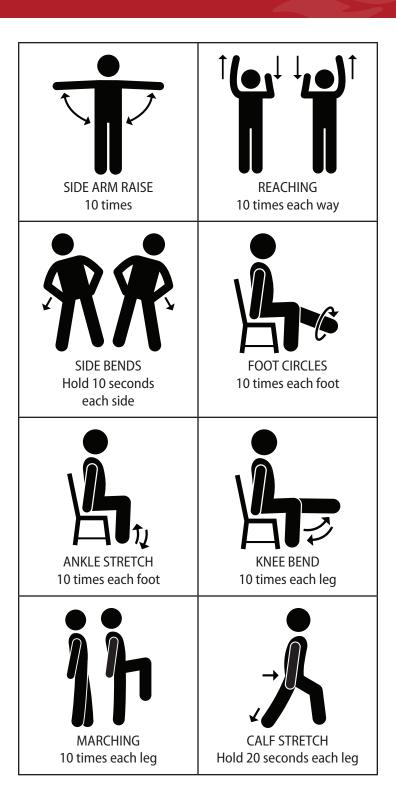
It is also beneficial to walk during this immediate post procedure time. Start slowly and for a short period of time; 5–10 minutes, and progress when tolerated.

Avoid long periods of sitting as you heal from this procedure, especially if the groin site was accessed.

For groin site: Do not lift more than 10 pounds for 1 week.

For wrist site: Do not lift more than 2 pounds. Do not push or pull items. Avoid activities that use your wrist such as tennis, bowling, golf, etc.





Coronary Artery Disease Risk Factors

Risk factors for coronary artery disease are divided into two categories.

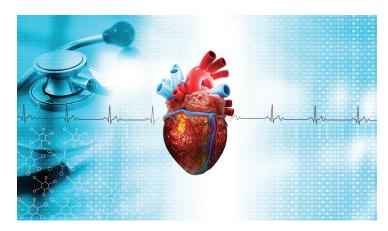
Unchangeable:

- **1.** Age
- 2. Gender
- 3. Heredity

Changeable:

- 1. Tobacco/Nicotine. Nicotine increases your heart rate and increases your hearts need for oxygen. It stiffens the artery wall, allowing less blood to flow. It increases your risk of abnormal heart beats. It decreases HDL cholesterol (good) and helps LDL cholesterol (bad) thrive. Inhaled byproducts of smoking damage the blood vessel wall and reduces the amount of oxygen your blood cells can carry. Within 2 years of stopping tobacco/nicotine use, the risk of having a heart attack decreases by 50%. Cardiac Rehab staff will work with you to create a quit plan.
- **2. Abnormal Lipids.** Cholesterol is a fat like substance (lipid) produced by your body. It travels in the blood and aids in digestion of food. Your cholesterol levels are affected by your genetics, the food you eat (proteins, fats), and the level of your physical activity. The doctor monitors your cholesterol levels and looks at the different lipids in your blood. When your cholesterol is "high" it means you have too many lipids in your blood that help form plaque. To protect your heart, you want your lipids to be controlled: LDL <70mg/dL, HDL>40mg/dL and total cholesterol (TC) < 200mg/dL. Talk to your provider on how you can improve your numbers. Triglycerides are a lipid with fatty acids and are found in fried and starchy foods. Some things you can do now are to take your cholesterol medication as prescribed, increase your physical activity levels, and start making heart healthy eating choices.
- **3. High blood pressure.** High blood pressure, also called hypertension, is considered anything greater than 130/80 at rest. Hypertension is more common in men, African Americans, and people with history of heart attack, stroke, or heart failure. Ways to control high blood pressure include weight loss, eating a lower sodium diet such as the DASH diet, limiting added salt to foods to less than 2,300mg or 1tsp a day, increasing physical activity, and moderation of alcohol consumption. Men should limit consumption to no more than two drinks per day and women no more than one.

- 4. Lack of Physical Activity. Set a goal for your daily physical activity. Lack of physical activity increases your risk for hypertension, obesity, high cholesterol and diabetes. It puts you at increased risk for musculoskeletal injury and surgery related complications. A recommended exercise regimen for every adult is at least 30 minutes of aerobic exercise most days of the week. Aim for 3-5 days a week. It is important to also remain flexible and strengthen your muscles. Use the exercises provided in this booklet every day. Aerobic exercise can be as basic as going for a walk. If you are limited in walking, your goal is to move more and sit less.
- **5. Obesity.** For adults, being overweight is defined as body mass index (BMI) of 25 to 29.9. Obesity is a BMI of 30 or greater. The higher your BMI the greater risk you have for heart disease. Patients with heart disease should follow a low fat diet with a goal of reduction in calorie intake balanced with increased physical activity. Duration of exercise with the goal of weight loss should gradually increase to 45-60 minutes 5-7 days a week. The Cardiac Rehab phase II program will help you establish a safe, independent exercise routine.
- **6. Stress, Anxiety, Depression.** Stress increases the risk of heart disease due to the effect it has on your personal habits. Patients who are under a lot of stress tend to cope with poor eating habits and substance use (i.e. tobacco, alcohol). Stress and anxiety elevate the heart rate and blood pressure. Depression is not uncommon in patients after being diagnosed with heart disease due to the increased doctor appointments and potential tests or procedures, financial burden, and required changes in lifestyle for a healthier heart. Some ways to reduce stress and anxiety are: breathing exercises, meditation, prayer, getting enough rest, and spending time with others. Exercise may help boost your mood and alleviate some



symptoms of depression. Talk to your nurse or doctor if you have any concerns on how to cope with stress or symptoms of depression.

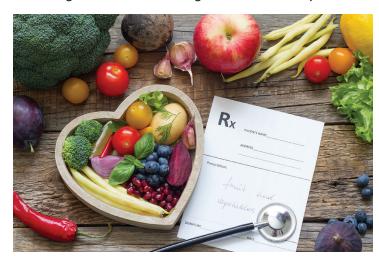
7. Diabetes. Diabetes is a complex metabolic disorder characterized by impaired glucose uptake and insufficient insulin production. There are two main types of diabetes: Type 1 and Type 2. Diabetes is an independent risk factor for heart disease. Diabetes when not controlled, hyperglycemia, is a contributor to blindness, kidney disease, nerve disease, poor wound healing, stroke, high blood pressure, and peripheral vascular disease. Precautions for patients with diabetes during exercise are management of low blood sugars. Always carry a 15–30g carbohydrate snack, avoid exercise at peak insulin times, hydrate adequately, and check blood sugars frequently when starting a new exercise program. Exercise helps to stabilize blood sugar and use up glucose stores in the body. Glucose control lasts up to 24-48 hours after a workout. Patients with diabetes should be doing daily foot care. They should be checking for blisters, cuts, and scratches. Wear proper fitting socks and shoes. Never walk barefoot especially on hot surfaces. A good goal for the diabetic patient is to have an A1C level of <7 in order to reduce further risk of vascular disease.

Use this space for any questions to discuss with your provider:			

Heart Healthy Eating Tips

Choose fat calories wisely. Limit total fat grams by serving a bare minimum of saturated fats and trans-fatty acids, the fats found in butter and salad dressings and sweets. When you do use fat use fats high in monounsaturated or polyunsaturated fat.

Serve a variety of protein foods. Commonly eaten protein foods (meat & dairy products) are among the foods highest in cholesterol. Reduce the nutritional risk by balancing animal, fish, and vegetable sources of protein.



Remember: All things in moderation, so limit your salt intake unless instructed otherwise by your doctor. Eat regular meals and exercise to strengthen the heart muscle and help burn off unwanted calories. See below for serving sizes.

1 cup cooked rice or pasta	2 starch	Tennis ball	
1 slice bread	1 starch	Compact disc case	
1 cup raw vegetables/fruit	1 fruit or vegetable	Baseball	
½ cup cooked vegetables/fruit	1 fruit or vegetable	Cupcake wrapper full or size of ice cream scoop	
1 ounce cheese	1 high fat protein	Pair of dice	
1 teaspoon olive oil	1 fat	Half dollar	
3 ounces cooked meat	1 protein	Deck of cards or cassette tape	
3 ounces tofu	1 protein	Deck of cards or cassette tape	

CARDIAC REHAB PHASE 1

Common Medications After a Heart Procedure

You may be prescribed some or all of these types of medications. These medications will help strengthen your heart and arteries as well as improve blood flow after surgery.

Beta-blocker – helps keep arteries of heart open, reduces angina, improves chances of survival, improves heart function, and lowers blood pressure

Calcium Channel Blocker – lowers blood pressure, reduces workload of the heart, and keeps arteries open

Anticoagulant – helps reduce the risk of forming a clot, reduces the risk of stroke with irregular heart rhythm

Antiplatelet – helps keep the arteries of the heart open, improves chances of survival, reduces risk of heart attack

ACE-Inhibitors/Angiotensin receptor blockers (ARBs)

 helps keep the arteries of the heart open, lowers blood pressure, improves heart function

Nitrates – Reduces angina symptoms, relaxes the artery walls

Statin -- lowers and helps correct cholesterol levels, keeps the arteries of the heart open

It is very important to take all your medications as prescribed. Even if you do not have any symptoms. If there is some reason you are unable to take your medications, call your doctor.

Cardiac Rehabilitation – Phase II who?

Riverside Medical Center's Outpatient Cardiac Rehabilitation program is a comprehensive program that specializes in the rehabilitation of adults recovering from heart conditions such as, coronary artery bypass surgery, valve replacement or repair, heart attack, angioplasty or stent placement, stable angina, and chronic heart failure.

The program is designed to not only increase the heart's efficiency and aerobic (oxygen) capacity but to also provide positive lifestyle changes through education and promotion of heart healthy habits that reduce the risk of decreased heart function and future cardiac events.

WHAT?

Individuals who attend cardiac rehabilitation receive an initial evaluation prior to starting the exercise program. The program consists of exercise sessions for approximately 1 hour 2–3 days a week. Additional time is alloted with each session for group and individual education on how to manage common medical conditions and lifestyle choices that promote heart disease progression.

STAFF:

The Cardiac Rehabilitation Department is staffed by specially trained cardiac nurses, clinical exercise physiologists and technicians. These clinicians focus on developing individualized care plans with you and your provider. The professional team keeps your cardiologist informed of your progress during the program.

HOW?

The program must be ordered by your cardiologist and is covered by Medicare and most insurance companies. Please contact your physician if you are interested in attending, or contact our department at **(815) 935-3271**. We look forward to serving you.

WHERE?

Cardiac rehabilitation is offered on site at three convenient locations. See back cover for location details.

Appointment Date	 	
Time		

POST ANGIOPLASTY/STENT CARDIAC REHAB PHASE 1

NOTES	NOTES