

**Your Heart's
in the Right Place**



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
Watsika, Illinois 60970
815-432-7665

riversidehealthcare.org

RIVERSIDE
CARDIOPULMONARY
REHABILITATION

**Coronary Artery Bypass
Grafting (CABG)**

**Cardiac Rehab
Phase 1**



Thank you for choosing Riverside Medical Center for your heart procedure. We are here to assist you in your recovery and address any questions you may have before going home.

Dear _____,

We want to give you the best care possible to improve your heart health. Like most people with heart disease, you probably have many questions. It is important for us to know what you are most interested in learning while you are in the hospital. To help us address what information you need, please check all the topics that interest you.

- | | |
|---|---|
| <input type="checkbox"/> Treatments and related equipment | <input type="checkbox"/> Eating for a healthy heart |
| <input type="checkbox"/> Heart and arteries, structure and function | <input type="checkbox"/> Sexual activity and your heart |
| <input type="checkbox"/> Activity progression during hospital stay | <input type="checkbox"/> Emotional changes after heart problems |
| <input type="checkbox"/> What to do for chest pain | <input type="checkbox"/> Development of heart disease |
| <input type="checkbox"/> Emergency planning for home | <input type="checkbox"/> Stress and your heart |
| <input type="checkbox"/> Heart attack and healing | <input type="checkbox"/> Smoking and your heart |
| <input type="checkbox"/> Your risk factors | <input type="checkbox"/> Alcohol and your heart |
| <input type="checkbox"/> How to take your pulse | <input type="checkbox"/> Guidelines for activity/exercise at home |
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Activity/exercise precautions |
| <input type="checkbox"/> High blood cholesterol | <input type="checkbox"/> Heart catheter procedure |
| <input type="checkbox"/> Your medications | <input type="checkbox"/> Bypass graft surgery |
| <input type="checkbox"/> Fitness and health | <input type="checkbox"/> Heart balloon procedure |
| | <input type="checkbox"/> Stent placement procedure |
| | <input type="checkbox"/> Valve repair/replacement procedure |
| | <input type="checkbox"/> Heart failure |
| | <input type="checkbox"/> Internal cardiac defibrillator |
| | <input type="checkbox"/> Cardiac Rehab Phase II program |
| | <input type="checkbox"/> Effects of heart problems on families |
| | <input type="checkbox"/> Return-to-work questions |
| | <input type="checkbox"/> Heart rhythms |
| | <input type="checkbox"/> Development of heart disease |

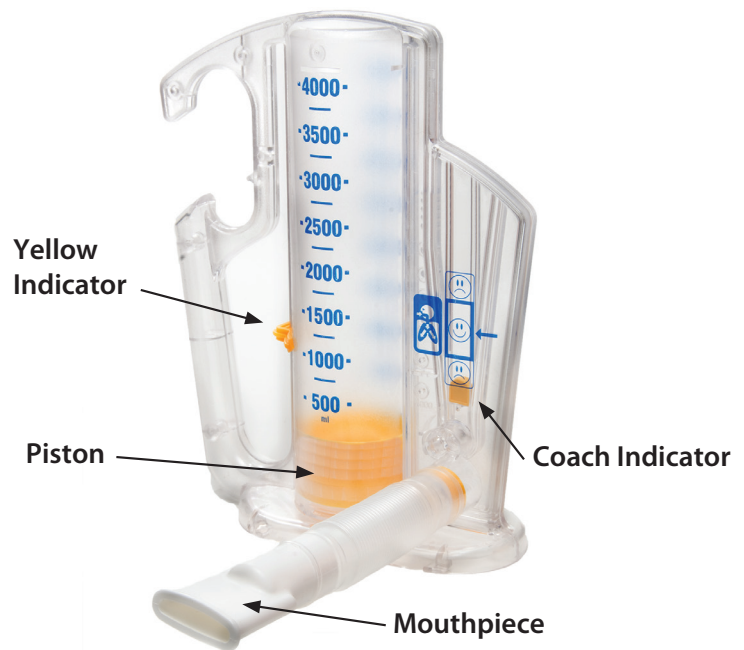
Day 1

Some key things to remember are:

- 1. Sternal Precautions.** To help the breast bone heal and keep your pain manageable don't use your arms to pull or push yourself. You may only pick up 5–10 lbs. (about the same as a gallon of milk). Only raise one arm over your head at a time and behind your back. Your nurse, physical therapist or the cardiac rehab staff will instruct you concerning getting in and out of bed and chairs without using your arms.
- After Discharge.** No heavy lifting (greater than 10lbs) for 6 weeks after your surgery. You may increase to 15lbs for the next 6 weeks. After that you may gradually increase the weight you lift. Restrict your driving the first 4-6 weeks, and ride in the back seat when possible. Avoid heavy one-armed activities for 3 months after surgery.
- 2. Elevate your legs.** To help promote drainage of fluids around the incisions whenever possible keep your legs elevated. Remember to do the post operative exercises whenever you do the breathing exercises which should be about once an hour until you are back to somewhat normal activity. See page 5 for exercises you can do on your own while in the hospital.
- 3. Support your incision.** Whenever you cough or deep breathe use a folded blanket or your heart pillow to support your incision and decrease your pain. Women can also wear a bra to help support the incision. If you do not have your pillow on hand, instead "bear hug" your chest for support. When able to shower, face away from water spray.
- 4. Complete learning assessment.** Please take time to complete the assessment for us to better assist you.

How to use an Incentive Spirometer

- 1.** Sit on the side of the bed or in an upright chair.
- 2.** Hold the spirometer level in front of you.
- 3.** Place the mouth piece in your mouth and seal your lips tightly around it.
- 4.** Breathe in slowly and deeply raising the yellow piston toward the top of the column. The yellow coach should be in the outlined area.
- 5.** Hold your breath for at least 5 seconds, exhale and allow the piston to fall to the bottom of the column.
- 6.** Rest for a few seconds and repeat steps at least 10 times an hour while your awake.
- 7.** You can also position the yellow indicator on the left side to show your best effort. Use this as a goal to work towards during each repetition.
- 8.** When you have finished, cough to clear your lungs, being careful to support your incision with a pillow or blanket.

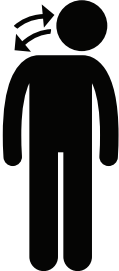

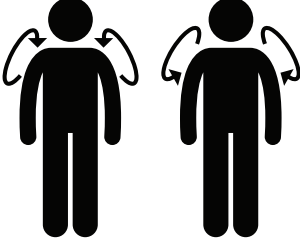

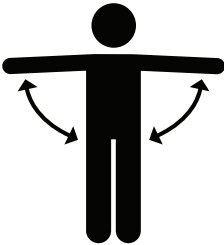
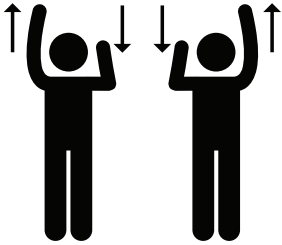


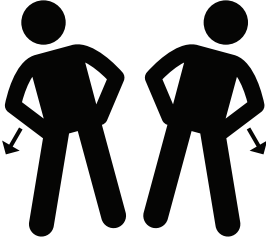

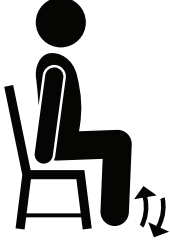



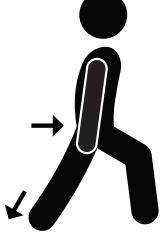
Post-Operative Exercises

These exercises promote good circulation and help to decrease complications after surgery. They are the most important thing you can do independently to help aid your recovery. Depending on your energy levels, you can choose one of the following exercise options:

- A.** You can pick 3 to do each time you use your incentive spirometer; alternating between upper and lower body
- B.** You can complete all exercises 4 times a day.

When doing the arm exercises please remember to use only one arm at a time and never over reach or strain. Sternal precautions may continue up to 8 weeks after surgery.

 <p>NECK STRETCH 10 times each way</p>	 <p>NECK STRETCH 10 times each way</p>
 <p>SHOULDER ROLL 10 times forward 10 times backward</p>	 <p>ARM CIRCLES 10 times forward 10 times backward</p>
 <p>SIDE ARM RAISE 10 times</p>	 <p>REACHING 10 times each way</p>

 <p>SIDE BENDS Hold 10 seconds each side</p>	 <p>FOOT CIRCLES 10 times each foot</p>
 <p>ANKLE STRETCH 10 times each foot</p>	 <p>KNEE BEND 10 times each leg</p>
 <p>MARCHING 10 times each leg</p>	 <p>SIDE KICKS 10 times each leg</p>
 <p>CALF STRETCH Hold 20 seconds each leg</p>	<p>SPECIAL INSTRUCTIONS...</p>

Day 2

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.

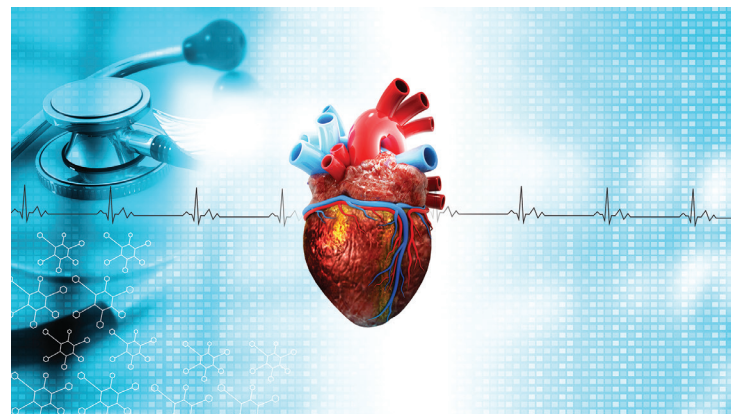
2. Abnormal Lipids. Cholesterol is a fat like substance (lipid) produced by your body. It travels in the blood and aids in digestion of food. Your cholesterol levels are affected by your genetics, the food you eat (proteins, fats), and the level of your physical activity. The doctor monitors your cholesterol 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



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 allotted 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 _____

