

Enhancing your recovery after cardiac surgery

Steps you can take to help yourself recover sooner

Patient's name:
Consultant's name:
Admission date:
Planned discharge date:
Type of operation:
Date of operation:

Introduction

We want you to get better as soon as possible after your heart operation.

Research has shown that this can be achieved by:

- Getting you as fit as possible for your operation
- Reducing the stress of surgery on your body
- Getting you up and about soon after your operation

This booklet will help you prepare for your cardiac surgery, and help ensure you are in the best health you can be prior to your surgery. It will also give you an idea about what to expect before, during and after your surgery.

Please bring this booklet into hospital with you when you come in for your operation.

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My role in my recovery

1. Live well

Good nutrition is always important but it becomes even more vital before and after surgery. A healthy balanced diet will provide your body with all the nutrients it needs to fight infection and repair tissues. Studies have shown clearly that people who are underweight, malnourished or overweight have more complications after surgery.

Prior to surgery your nutritional state will be assessed. If you are identified as malnourished or at risk of malnutrition (this means you are eating and drinking too little or have unintentionally lost weight) you will be provided with some written dietary information to help you to improve your nutrition before surgery. You may also be prescribed supplement drinks and referred to a dietitian for further advice.

For most people a healthy balanced diet includes:

- Fruit and vegetables aim to eat at least five portions per day. Ensure you have a variety and choose from fresh, frozen, tinned, dried or juice.
- Starchy foods at each mealtime, e.g. rice, bread, pasta and potatoes. Choose wholegrain varieties when you can.

- Protein-rich foods such as lean meat, fish, eggs, beans, lentils or nuts. These should be eaten at least twice a day.
- Milk and dairy foods each day try lowerfat versions if you need to lose weight.
- Limit foods high in fat, sugar and salt.

If you are found to be overweight, you should try to take steps to lose weight before surgery as this will reduce your risk of complications (particularly breathing and wound problems). You should do this sensibly by continuing to eat a healthy balanced diet.

It is important that you continue to eat regular meals but you could cut down on food and drinks high in fat and sugar and reduce your portion sizes. If you need to snack between meals, choose healthy snacks such as fruit and low-calorie yoghurts.

Before surgery	After surgery
Nutritionally balanced diet + a healthy weight	 Quicker recovery and fewer complications



Your weight in stones

2. Stay active

While waiting for your heart surgery it is important to remain physically active. The stronger and fitter you are before the operation, the quicker you are likely to go home afterwards.

Physically active means any activity not sitting still or lying down. Try to keep doing the activities you would do in your normal daily life, as much as your symptoms allow. If your symptoms include chest pain, tightness or shortness of breath it is important to discuss your level of activity with the doctor or nurse you see in clinic.

Walking is an important way to remain active, whether you can walk a few steps or a few miles.

Here is some simple advice to help you remain safe when walking:

- Dress in loose fitting clothes.
- Wear comfortable shoes.
- Walk at a pace that enables you to maintain your breathing comfortably - an example of this is that you should be able to 'walk and talk' at the same time. If you become too breathless or develop chest pain, you should STOP and rest. Always ensure that you carry your GTN spray if you have been prescribed one.
- Start with a time/distance you can comfortably manage.
- Avoid extreme weather conditions for example, too windy, wet, cold or hot, as they may make you feel more tired or breathless.
- Ensure that you remain hydrated when you exercise by drinking plenty of fluids.

Included in this booklet are some exercises to help flexibility and strength prior to your operation. If done regularly, they will increase muscle strength, improve circulation, help with shortness of breath and prepare you for your surgery.

Here is some simple advice to help you exercise safely:

- Find a comfortable position and relax the muscles not involved in the exercise.
- Avoid holding your breath while exercising.
- Give yourself time to recover your breath after each exercise - rushing to finish the exercise can make you feel more breathless. Your breathing should sound quiet. Breathe in and out at a comfortable pace. Continue until your breathing feels settled.
- You do not have to do all the exercises in one session - it may be better for you to do several short sessions of exercise each day, rather than one long session.
- If you feel unwell you may need to stop exercising or reduce the amount you are doing - gradually build it up again as you start feeling better.
- Try to find a regular pattern for exercise that fits into your daily routine.
- Avoid exercising for an hour after a meal.
- You may find that some of the exercises become too easy for you - read the 'progression' comment to see how to make your muscles work harder.

Flexibility exercises

These exercises will help to keep your body and shoulders flexible; do them slowly, five times in each direction. Start these exercises by sitting on an upright chair.





Warm-up exercise: sitting on a bed or chair, pump your feet up and down. This helps the movement in your ankles and the blood flow in your legs. Aim: to strengthen your thigh muscles.

up towel under knee, pull your foot up Lying or sitting on a bed, place a rolled towards you. Inner range

five. Relax down. Repeat using other leg. Lift foot to straighten knee. Count to

repetitions. Add a weight to the ankle Progression - Increase number of (reduce repetitions at first)



Lying or sitting on a bed - pull your foot up towards you. Straight leg raise

inches. Count to five. Relax down. Repeat Keeping your knee straight, lift leg six using other leg.

repetitions. Add a weight at the ankle Progression - Increase number of (reduce repetitions at first)



Sitting on a chair or over edge of the bed, to five. Relax gently down. Repeat using lift your foot to straighten knee. Count Middle and inner range other leg.

number of repetitions. Add a weight at the ankle (reduce Progression - Increase repetitions at first).



Lower limb exercises Aim: to strengthen your leg muscles. Sit to stand Sitting on a chair with hands on your knees (or on arms of chair).

Stand up, then sit down slowly. Do not use your arms.

Progression - Increase number of repetitions first, then use lower chair or stool.



Squats Hold onto the back of a chair, standing up with feet hip width apart. Slowly bend your knees a small way, hold, then stand up straight. Progression - To make this exercise harder, increase the depth of squat by bending your knees more.



Step ups Standing in front of a step or bottom stair. Hold onto a hand rail. Slowly step up onto the stair with both feet, then step down again. Alternate the leg you lead with.

Progression - To make this exercise harder, increase the height of the step.



Heel raiser Hold onto the back of a chair, standing up. Rise up onto toes and back down to floor. Progression - Increase number of repetitions. Then progress onto one foot (reduce repetitions at



3. Exercise Diary You might find it useful to complete this exercise diary, to help you monitor your exercises and show what progress you have made.

Date	Time	Activity	Duration/ repetitions	Comment
DD/MM	10:00am	Leg exercises	5 of each	
	3:00pm	Flexibility exercises	3 of each	

4. Get practising

After heart surgery most patients have a wound down the centre of their chest over the breast bone (sternum). An important part of wound and bone healing is limiting the activities you do with your arms after the operation. This is because certain activities put a lot of stress on the bone that is trying to heal.

The main restriction is **NO lifting, pushing or pulling** with your arms for the first 6-12 weeks after the operation to allow the wound to heal successfully. As a guide you should not lift any object that is greater than 10lbs/5kg in weight.

This will affect how you get out of bed, stand up and sit down in a chair, carry shopping bags and general everyday living activities within the home.

• Getting in and out of bed

It's a good idea to practice the best technique beforehand. We advise you to roll onto one side and gently lower your legs off the edge of the bed, then push down through the elbow you are leaning on and come up into a sitting position on the edge of the bed. For lying down the same process is followed in reverse.

• Getting in and out of a chair

Sit on the edge of the chair with your arms crossed on your chest. Then with your feet firmly flat on the floor, rock gently backwards and forwards three times with your nose coming forward over your toes. On the third rock forward push up strongly through your legs and come up into the standing position.

5. Be prepared

Start to make plans for going into hospital and coming home after your surgery.

- Think about how you will travel to the hospital. It might involve an early start so try to get some rest the day before.
- Think about what you will take into hospital. Make sure you have a pair of well fitting, flat, comfortable slippers or shoes. If you normally use a walking aid or have glasses, dentures or hearing aids, then make sure you bring these with you.
- Think about how you will get home from hospital. You will be given the date that we expect you to be discharged. Make sure your friends and family know when this will be so they can pick you up. Hospital transport home is not readily available.
- Check that you have enough support in place for when you get home, as you might need extra help. If you live alone you may want a family member or friend to stay with you for a short period.
- Before going into hospital, think about stocking up your freezer so you don't have to worry about shopping immediately after you are discharged.
- If you are finding it difficult to manage at home prior to your operation, or you cannot get up out of a chair easily without using your arms, do mention this to the nurse at pre-admission clinic. You will be given an 'All About Me' booklet to fill in and bring with you. This includes measuring heights of furniture around your home. You may also be referred to the occupational therapist team at pre-admission clinic to avoid delaying your discharge home.
- If you are the carer for someone else, think about how this person will be looked after while you recover from your operation.

6. Steps to improve your recovery while in hospital

Nutrition

Make sure that you start to eat and drink well so that your body has the fuel it needs to heal. After surgery your normal appetite may be reduced, but it is important that you try to eat and drink, as this will help stimulate your appetite. If your appetite and food intake remain poor when you go home, you should try to eat six small meals or snacks each day. If your appetite does not return to normal within a few weeks and your weight reduces unintentionally, you should contact your GP for further advice and support.

Becoming active

Be active as guided by the physiotherapist as this helps your body get strong and fit again. After your surgery you will be encouraged to be active as soon as possible.

Here is a typical programme for after your operation:

Day 1

Your breathing will be checked to ensure that you can take a deep breath and cough comfortably. You will be taught how to support your wound to ensure you can cough strongly. The aim will be for you to sit out of bed in the morning and again in the afternoon on the first day. You will have information about protecting the healing of your wound and how to move without putting pressure through your arms. You will be taught some simple exercises to help maintain your strength. You may also do some walking on the spot.

Day 2 and 3

Over the next 2 days you will be encouraged to walk more, continue to take deep breaths and cough either by a physiotherapist or the nurse looking after you. Our aim is to get you as independent as possible, as soon as possible. By day 3 you should be able to walk around the ward or walk short distances on your own. You will be encouraged to do this frequently throughout the day. You will also be encouraged to be do things for yourself such as washing and dressing. If possible, you should get dressed in your own clothes.

Day 4 and 5

Your walking will be progressed under the supervision of the physiotherapy team until you are able to walk a distance that is functionally acceptable for going home. Our standard is 100 metres but do not worry if you can't do this, as everyone is different. You will also be assessed on the stairs, if this is felt essential for a safe discharge home.

If your stay in hospital is longer than expected then the physiotherapy team may continue to see you. However, if you are independently mobile, can climb a flight of stairs and have no breathing problems, you may be discharged from regular review by the team.

Be positive about your recovery - remember little steps go a long way!

7. Chest wound healing

As you get back to normal over the first two to three months after your surgery, build some regular physical activity into your lifestyle. Try to be active on most days of the week for around 20 minutes. This will help strengthen your heart and improve your overall fitness.

Following cardiac surgery it is natural to experience new aches, pains and stiffness in your chest, back and neck areas as bruising appears and your bone heals. This should feel very different to your pre-operative symptoms. It is therefore important that before starting any exercise programme you realise that although your skin may have healed your breastbone will take 12 weeks to heal fully.

To protect your breast bone during this time, **AVOID** heavy lifting, pulling or pushing - for example, lifting children, vacuuming, mowing the lawn, digging, pushing supermarket trolleys, carrying heavy shopping bags, etc.

The muscles in your chest will also take time to settle down, so it is important not to do any heavy arm activity in the first 12 weeks to avoid any delay in the healing process or until directed by your cardiac rehabilitation team.

At first you may find it easier to sleep lying on your back. You can lie on your side when you can do so comfortably. Remember not to use your arms to move into side lying.

All female patients are strongly advised to bring in at least two soft, well fitted, ideally front fastening bras for use post-surgery to wear for a minimum of 12 weeks, including when sleeping, to support the healing chest wound. The bra stops the breasts pulling on the newly formed incision and patients are advised to wear them as soon as possible post-operatively. 8. Increasing activity on discharge home After your operation, your heart should be working more efficiently and so your ability to exercise will also improve. However, because of your heart problem you may have been unable to exercise for months or even years, so your increase in activity needs to be done gradually.

One of the best ways to increase your fitness after your operation is by walking. You can start this as soon as you get home. When you begin, take two short walks a day starting with the distance you have been walking in the hospital (with your physiotherapist). Start with five minutes and see how that feels.

Gradually increase the time you walk for. As the distance increases, you will be able to take one longer walk instead of two. You should walk at a pace where you notice a change in your breathing but still be able to walk and talk. If you get excessively short of breath as you walk (unable to walk and hold a conversation) you are probably overdoing the distance or the pace a little.

Try to build up your walking time to 20-30 minutes. This only a guide as everyone's rate of progress varies dependant on the operation performed, the severity of your heart disease and your pre-operative functional status. Your physiotherapist will discuss this with you prior to your discharge. If you have access to a stationary bike, you can use this to improve your fitness by increasing the length of time on the bike rather than the resistance.

If at any time you are worried by your level of breathlessness or your exercise progress in general, do ask your GP or call the Cardiac Support telephone line at Royal Papworth.

Flexibility exercises (post-operation)

As well as improving your overall fitness, you will find that you benefit from doing a few simple stretches each day to increase your flexibility. These exercises target your chest and shoulder region that can be stiff and uncomfortable after your operation.



eft hand down towards your left knee, hands by your sides, slowly slide your so that you bend from the waist, (try Standing up, feet slightly apart and not to twist your body as this in sitting instead. vou do this exercise). exercise you can do Repeat slowly four to stand to do this no more than this. If you are unable to the right knee. stretch down the right hand down Repeat with the side of the chest, You should feel a gentle and comfortable or five times. These stretches should not be painful. Stretch to a point of comfort and hold this for a few seconds, do not bounce. Continue to do these exercises two or three times a day for as long as you feel your chest is limited in movement.

9. Exercise Diary You might find it useful to complete this exercise diary, to help you monitor your exercises and show what progress you have made after your operation.

Date	Time	Activity	Duration/ repetitions	Comment
DD/MM	10:00am	Leg exercises	5 of each	
	3:00pm	Flexibility exercises	3 of each	

It will be useful for you to fill in the following diary each	Some nausea is normal on day 1
day after your recovery to write down your reelings and show the progress you are making each day.	I haven't managed to eat because:
Diary	
Day 1 - post surgery	
How am I feeling?	How active have I been?
	Sat out of bed with assistance for hours.
How well controlled is my pain?	Walked on the spot with assistance
Well controlled	Practised supported cough and exercises times today
I'm still sore and would like some more painkillers	
What are my goals?	
 Start eating and drinking. 	
 Try to eat something at each meal 	
 Drink at least 6 cups of fluid. 	What am I proud of achieving?
 Sit out of bed with assistance from staff. 	
What have I eaten today?	
Breaktast.	
Lunch	
Dinner	
How many cups of drink have I managed today?	
1 2 3 4 5 6 7 8	

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Day 2 - post surgery	How active have I been?
How am I feeling?	Sat out of bed
How well controlled is my pain?	Walked around my bed Walked steps
wen controlled I'm still sore and would like some more painkillers	Practised supported cough and exercises times today
What are my goals?	l haven't been able to because:
 Eat 3 meals and drink at least 6 cups of fluid 	
 Follow guidance about walking, exercises and coughing 	
 Get out of bed (without using arms) 	What and of achiminal
 Walk a few steps with guidance 	vvnat am i proug oi acmeving?
Sit out of bed for up to 6 hours	
What have I eaten today?	
Breakfast	
Lunch	
Dinner.	
How many drinks have I managed today?	
1 2 3 4 5 6 7 8	
I haven't managed to eat because:	

Day 3 - post surgery	How active have I been?
How am I feeling?	Walked steps or distance 1 2 3 4 times today
How well controlled is my pain?	Have done my exercises times today
Well controlled	
l'm still sore and would like some more painkillers	What am I proud of achieving?
What are my goals?	
 Eat 3 meals and drink at least 6 cups of fluid 	
 Walk around the ward with help as needed 	
 To get dressed in my own clothes 	
What have I eaten today?	
Breakfast.	
Lunch.	
Dinner	Are there any changes to my support arrangements at home after
How many cups of drink have I managed today?	discharge? (If yes, talk to your nurse) Yes No
1 2 3 4 5 6 7 8	

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Day 4 - post surgery	How active have I been?
How am I feeling?	
How well controlled is my pain?	
Well controlled	
l'm still sore and would like some more painkillers	What am I proud of achieving?
What are my goals?	
 Walk independently around the ward within my limits 	
 Get dressed on own as able 	
Open my bowels	
 Eat 3 meals and drink at least 6 cups of fluid 	
What have I eaten today?	
Breakfast	
Lunch	
Dinner	Are there any changes to my support arrangements at home after
How many cups of drink have I managed today?	discharge? (If yes, talk to your nurse) Yes No
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How well controlled is my pain?

Well controlled

I'm still sore and would like some more painkillers

What are my goals?

- Walk up and down 1 flight of stairs (if appropriate)
- Walk around the ward on my own with confidence
- Understand my medication
- Prepare for going home

What have I eaten today?
Breakfast
Lunch
Dinner.
How many drinks have I managed today?

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How active have I been?

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:	÷ .		:	What am I proud of achieving?		:	:	:		÷ .			:

10. Discharge advice after cardiac surgery

The below advice will take you from discharge to 12 weeks post procedure and provides milestones and advice to aid your recovery at home. Remember - action makes the heart grow stronger!

Discharge to TWO WEEKS post-discharge

- 1. Breathlessness can occur in 50% of patients.
- 2. Report signs of wound infection to GP i.e wound redness, oozing/discharge or temperature.
- 3. Swelling generally occurs in the affected leg if so, elevate leg when sitting.
- 4. Palpitations (atrial fibrillation) can occur, sometimes associated with anaemia and/or breathlessness.
- 5. You may still feel nauseated.
- 6. Slight disturbances of vision may occur temporarily.
- 7. You will still experience pains in upper chest, shoulders and back, and may get numbress and/or pins and needles in arms and hand.
- 8. Regular painkillers will still be needed, as well as laxatives until bowels are regular.
- 9. Patients on WARFARIN please see anticoagulant booklet.
- 10. You should be able to attend to own hygiene (you may bath or shower).
- 11. Walking is encouraged everyday, gradually increasing the distance.
- 12. Gentle arm and upper body exercises to be continued.
- 13. Wounds:
 - Daily shower recommended if wounds have oozed.
 - Use unperfumed moisturising lotion if dry and flaking skin develops.
 - Breast bone (sternum) will still be sore so you may hear bone clicking. Consult GP or Cardiac Support Team if this is painful.
 - DLeg wound can take up to a month to heal. Numbness can occur in affected leg.
 - Arm wound (radial) fingers may still be swollen but this should be improving. Area at base of thumb is often numb may be permanent.
 - Wounds can take a month to heal.
- 14. Mood swings and sleeplessness can be expected.
- 15. Nightmares may occur but talking about them helps.
- 16. Strenuous activities involving the upper body should not be attempted until 12 weeks post-surgery.
- 17. Follow a healthy diet.
- 18. A daily 1 to 2 units allowance of alcohol is permissible if on WARFARIN see anticoagulation booklet.
- 19. Cardiac support nurses will ring one week after discharge.
- 20. You may ring the cardiac support nurses for advice on 01480 364100 between the hours of 08:30-16:30 (answer machine available).
- 21. You can telephone Medicines Help Line on 01480 364739 (answer machine).

TWO to SIX WEEKS post-discharge

- 1. You should feel less breathless.
- 2. Leg may still be swollen if so, elevate when sitting.
- 3. Painkillers may be reduced in quantity & strength.

Guide to reducing pain killers:

- Continue to take painkillers regularly.
- If pain controlled, may stop strongest middle of day tablets (strength of painkillers is on the Patient Medication Card).
- If after 5 days pain still controlled, stop strongest teatime tablets.
- If after further 5 days pain still controlled, stop strongest morning tablets.
- If after further 5 days pain still controlled, stop strongest bedtime tablets.
- Continue the procedure by then stopping the weaker tablets in the same way but if pain controlled, reduce after 3 days.
- Please note most patients will need to stay on painkillers for at least 4 to 6 weeks, and many will stop tablets only to have to increase again as pain is not being kept under control with the reduced tablets.
- Patients should be able to deep breathe, cough, move and sleep with minimal pain. If not, stronger painkillers may be needed. Contact GP.
- 4. Increase walking distance, up to 1 to 2 miles a day if possible.
- 5. Gentle arm and upper body exercises should be continued.
- 6. May commence light activities.
- 7. Continue wearing anti-embolic stockings until achieved normal mobility.
- 8. Driving at 4 to 6 weeks from date of discharge after checking with GP or surgeon.
- 9. You may feel emotional and vulnerable.

10. Strenuous activities involving the upper body should not be attempted until 12 weeks post-surgery.

11. Follow a healthy diet.

- 12. Outpatient appointment to see surgeon will be received.
- 13. You can contact the Cardiac Support team 01480 364100.
- 14. You can telephone Medicines Help Line on 01480 364739.

SIX to TWELVE WEEKS post-discharge

- 1. Patients who are breathless before their surgery may still be breathless.
- 2. Leg may still be swollen if so, elevate when sitting.
- 3. It is not unusual to get the occasional twinge of pain, but should no longer require painkillers on a regular basis.
- 4. Patients on WARFARIN will continue to have regular blood tests.
- 5. Continue to increase activities and consider returning to work.
- 6. Receive an appointment for Cardiac Rehabilitation if applicable.
- 7. Patients who have had valve surgery, unless all teeth and roots have been removed, must visit a dentist every 6 months and maintain good oral hygiene.
- 8. You should be feeling more confident and happy continue with health education advice.
- 9. Activities involving the upper body e.g. digging, playing golf, racquet sports and cycling, must not be attempted until 12 weeks after operation.
- 10. Gentle swimming is allowed after 12 weeks providing the wounds have healed.
- 11. Follow a healthy diet.
- 12. Outpatient appointment to see cardiologist approximately 3 months post-surgery.

11. Cardiac Rehabilitation

What is it?

Cardiac rehabilitation is designed to help you get back to enjoying life after your heart procedure or surgery. It usually includes exercise sessions and advice on lifestyle including healthy eating and relaxation techniques. It aims to restore you to as full a life as possible. It will also help rebuild your confidence and is good fun to do.

Why is it important?

Clinical guidelines recommend taking part in a cardiac rehabilitation programme after a heart attack or heart procedure. Research studies have shown that people who attend cardiac rehabilitation are able to do more, feel more confident and lead a healthier lifestyle than those who do not attend. It is possible to improve how well your heart works and to reduce your risk of having another cardiac event.

What programmes are available?

1. Royal Papworth Hospital in-house

programme: This rehabilitation programme is based at Royal Papworth Hospital. It lasts for 12 weeks but you only need to attend the hospital once a week for the first six weeks, and then carry on at home for the following six weeks. You will then have a final review during the twelfth week. Although during the first six weeks you will be attending rehabilitation sessions in the hospital, there will be a strong emphasis on establishing a home routine. A DVD of the exercises is available. The staff will offer you support and advice to help you achieve this.

2. Local hospital: Most local hospitals will offer an in-house cardiac rehabilitation programme or a home-based option. Access to these programmes varies widely across the region. Where there is no local hospital or home based programme available, the Papworth Road to Recovery Outreach Service will be offered. 3. Road to recovery: Has been designed for people who live too far away to attend regularly as an outpatient or for those patients that are better suited to a home programme for domestic or work reasons. It is a home-based course with an exercise DVD, relaxation CD and a programme diary. It requires your commitment to do the exercises at least three times a week and to do the home study. The programme will last for 12 weeks, but you only need to attend the hospital once for an initial assessment. During this assessment your fitness and recovery will be assessed. You will be provided with the equipment you need and a clear explanation of the programme. The rehabilitation staff will telephone you each week to monitor and discuss your progress and to answer any questions that you may have. You will have a final telephone review at week 12.

Taking part

We strongly recommend that you attend a cardiac rehabilitation programme as an important part of your treatment. Your details will be forwarded to the nearest appropriate programme. Some programmes do not start for several weeks following your surgery, to allow you time to continue increasing your fitness. You will be contacted directly to make an appointment or start you on a homebased programme.

If you have any queries or concerns during the early weeks of your recovery or have not heard from a cardiac rehab team within two weeks of discharge, please contact the Papworth Cardiac Rehabilitation Team. Tel: 01480 364429

12. Contact details

Cardiac Rehabilitation	01480 364429
Cardiac Support Nurses	01480 364100
Physiotherapy Department	01480 364215

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Papworth Everard, Cambridge, CB23 3RE

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