GOING HOME AFTER YOUR TAVR PROCEDURE

CENTER FOR STRUCTURAL HEART DISEASE
GOING HOME

- After your TAVR procedure, you will need help when you go home. It is hard to predict how much help you will need and for how long so it is best to plan ahead so you are sure to have the assistance you need. Most people who undergo TAVR say it takes one to three months to fully recover.

- If you live alone, arrange for someone to stay with you or stay with family or friends for at least the first week to assist in your recovery.

- If you are from outside the Detroit area, it’s best that you stay one night close to the hospital before your trip home. The Guest Housing on the hospital campus is available. Arrangements can be made by contacting the apartments directly at (313) 916-3299.

MEDICATIONS

- Your discharge medications will be reviewed with you by your nurse prior to discharge. If you were given new prescriptions, they may be filled through our discharge medication service or may be sent to the pharmacy of your preference at the time of discharge. Pick them up prior to returning home.

- Your primary provider of health care should review your medications during your first follow-up appointment so bring your hospital discharge papers with you.

- There are some medications that help prevent complications after your heart valve procedure. For example: clopidogrel (Plavix) helps prevent blood clots from attaching to your new heart valve.
SITE CARE

- You likely will have small openings in both groins from catheters used during the procedure. If you had a transfemoral procedure, one groin will have a larger opening and may be bruised or tender.

- If you had a chest procedure, you will have either a small incision in your upper sternum (breast-bone) or between your ribs on your left side.
  - Chest wall site: The surgical incision should be kept dry (no lotions / oils / powders) and open to air. If you experience irritation from clothing rubbing on the incision, a light gauze dressing may be applied.
  - Inspect your incision daily; notify your physician if there is increased redness, swelling or drainage from the incision.
  - If the incision is located on your breast-bone you must avoid lifting objects heavier than a gallon of milk (eight pounds) and stretching / twisting / pulling with your arms for at least three months to ensure strong bone healing.
    - Notify your physician if you feel a “popping” of the breast-bone with movement.

- Check your sites daily. Contact our office if you have any of the following problems:
  - Redness and warmth that does not go away
  - Yellow or green drainage from the wound
  - Fever and chills
  - Increasing numbness in your legs
  - Worsening pain at the site

- If you had a leg/groin procedure, it is normal to have bruising or a soft lump at the site. **It is not normal if the lump suddenly becomes larger or more firm.** This may mean you are bleeding. If this happens:
  - Lie down
  - Have someone press down hard, just above the hole in your skin where the procedure was performed for 15 minutes. If after holding on the site, the lump does not become larger or harder, they are performing this correctly.
  - If the bleeding has stopped after 15 minutes, rest and **stay laying down for at least two hours**.
  - If the bleeding continues, call 911 for an ambulance. Do NOT drive yourself or have someone else drive you.
DRESSING
• Groin site: you may leave the clear dressing over the site for up to one week or until it falls off.

HYGIENE
• If you had a femoral (leg) procedure, you may take a shower when you return home. After the shower, pat the site dry. Do NOT use powder, oils or lotions in your groin area until the site has completely healed.

• If you had a chest procedure, you may shower when you return home unless specifically instructed not to by your discharging practitioner.
  - DO NOT scrub incision; pat dry with a towel
  - DO NOT apply any lotions, oils, powders to the incision
  - No tub baths / swimming for at least six weeks.

FOLLOW-UP APPOINTMENTS
• With your primary care provider within one to two weeks following discharge.

• With your Center for Structural Heart Disease (CSHD) Cardiologist in one month and one year. An appointment will be made for you prior to discharge. If it is not noted on your discharge papers, please call (313) 916-1861.

• At your follow-up appointments, in addition to your clinic visit you will have an Echocardiogram, blood work and functional assessment.
If you have dental work or any other medical procedures:
- Show them your wallet card.
- Tell them you have a prosthetic heart valve.
- Dental work performed after receiving a new heart valve may result in the valve becoming infected. Tell your dentist that you need antibiotic therapy for dental procedures.

NUTRITION AND FLUIDS
- Healthy eating is important for your healing and recovery. During cardiac rehabilitation you will attend classes regarding heart-healthy eating.
- Some people find they have a poor appetite for two to four weeks after TAVR. Try to keep your food choices healthy while your appetite returns.
- If you limited the amount of fluid you could drink before your procedure, discuss with your heart doctor if you need to continue fluid limitation after the procedure.
- Visit henryford.com/heartsmart for heart-healthy recipes, cookbooks and lifestyle tips.

REPORTING YOUR HISTORY
- In the future when you need health care always report that you have had a heart valve implantation. You will receive a “heart valve” identification card either at the time of your procedure or in the mail after you return home.
- We recommend you keep the card in your wallet at all times and make a copy for your files in the event of loss.
- If you go to the Emergency Department or are admitted to the hospital in the first month after your procedure. Ask the providers to call the Center for Structural Heart Disease.

CENTER FOR STRUCTURAL HEART DISEASE
(313) 916-1878
**ACTIVITY PROGRESSION AT HOME**

- Follow these guidelines until you begin cardiac rehabilitation.

- Move through Step 1 to 4 at your own pace. Take two to seven days to complete each step.

- Pay attention to how you feel whenever you increase your activity or add new activities.

- If you have any symptoms (unusual tiredness, shortness of breath, chest pain or dizziness), stop the activity and go back to the step where you had no symptoms.

<table>
<thead>
<tr>
<th></th>
<th>AT HOME</th>
<th>WALKING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step 1</strong></td>
<td>Get dressed in the morning. Take care of your personal needs (personal washing, making meals). Keep activities 'easy' for short amounts of time and with rest periods.</td>
<td>Walk around the house.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Take stairs slowly, with rests.</td>
</tr>
<tr>
<td><strong>Step 2</strong></td>
<td>Slowly return to activities around the house that don’t involve a long time standing or using your arms (this causes more strain on your body).</td>
<td>Walks should feel 'light and easy'.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Walk for five to 10 minutes at a time once or twice a day (such as a morning and afternoon walk).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Stay close to home; avoid hills.</td>
</tr>
<tr>
<td><strong>Step 3</strong></td>
<td>Do a few more activities around the house (making your bed, simple meals or watering plants).</td>
<td>These walks should feel 'easy'.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Continue to walk once or twice a day.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Over several days, lengthen your walks. For example, add five minutes every day or two.</td>
</tr>
<tr>
<td><strong>Step 4</strong></td>
<td>Slowly start returning to your usual activities again (like shopping, light gardening, going out with friends).</td>
<td>When a 15-minute walk feels 'easy', you may increase your walking speed to a level that feels 'moderate'.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Begin cardiac rehabilitation.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Continue to lengthen your walks until you are walking a total of 30 or more minutes five to six days per week.</td>
</tr>
</tbody>
</table>
ACTIVITY AND EXERCISE

- Daily activity and exercise are an important part of your recovery. People recover at different rates depending on their general health and type of valve procedure.

- Most people require six to 10 weeks to feel recovered.

- No lifting, pushing, pulling more than 10 pounds (examples to avoid: groceries, vacuuming, gardening, golfing):
  - For one week with a procedure through the groin.
  - For six weeks for procedures through the chest wall.
  - For three months for procedures through the breast-bone.

- After the initial healing process of the access site, we recommend cardiac rehabilitation for all TAVR patients. Cardiac rehabilitation will help you:
  - Rebuild stamina, strength and balance.
  - Learn how to participate in activities safely, as well as help you regain confidence to do so.
  - Return to activities of daily living and leisure.

- Discuss attending cardiac rehabilitation at your follow-up appointment with your family doctor and at your Structural Heart follow-up appointment. Call (313) 972-4030 for a Henry Ford program nearest to you.

DRIVING

- Do not drive for four weeks after the date of your procedure.

- If you have been told by your doctor in the past that you may not drive, you must talk with him/her before you begin driving again.

- When you resume driving, you must have someone with you.