

HENRY FORD HOSPITAL

Going Home After Transcatheter Valve Replacement

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. Many people feel better immediately after their procedure, but it may take a few weeks 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 after you are discharged.
- 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.*



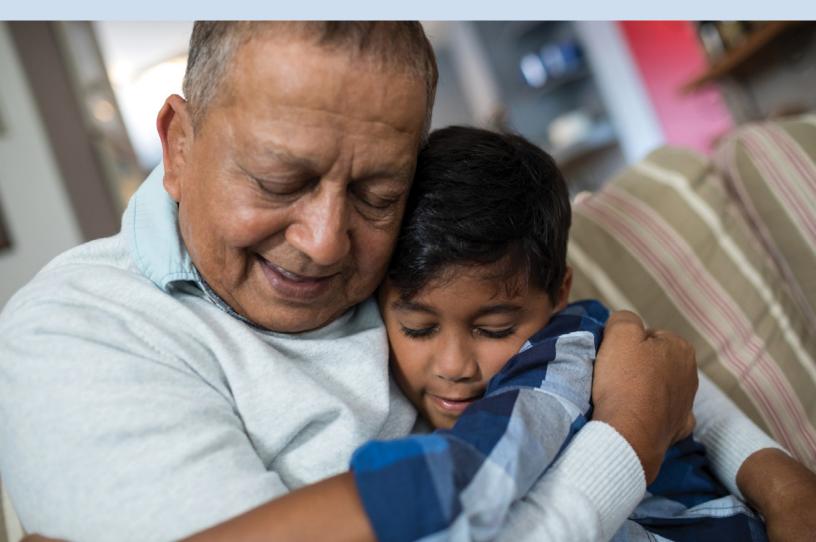
MEDICATIONS

- Antibiotic therapy is recommended lifelong to prevent heart valve infections when you have any dental procedures. Notify your health and dental care providers when you see them that you need antibiotic therapy to prevent "Endocarditis".
- 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), or anticoagulants, help prevent blood clots from attaching to your new heart valve.

SITE CARE

- You likely will have small openings in your groin area from catheters used during the procedure. You may find one groin has a larger opening and may be more bruised or tender than the other.
- With a leg/groin procedure, it is normal to have bruising or a soft lump at the site. <u>It is not normal if the lump</u> <u>suddenly becomes larger or more firm</u>. 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.

- If you had a neck or just outside the arm pit (subclavian) site procedure, you will have a small incision.
 - For Neck or subclavian site procedures: Keep site clean and dry, no lotions, oils or powders.
 You may apply a light bandage to protect the site from clothing rubbing.
 - Inspect the site daily; notify your physician if there is increased redness, swelling or drainage from the incision.
- 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



DRESSING

- Groin site: you may leave the clear dressing over the site for up to one week or until it falls off.
- Neck or subclavian site: You may apply a light bandage to protect the site from clothing rubbing.

HYGIENE

- If you had a 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 neck or subclavian site procedure, you may shower when you return home unless specifically instructed not to by your discharging practitioner.
 - DO NOT scrub site; 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 at 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.



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

- 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 valve replacement. 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.





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 procedure.
- Many people begin feeling better immediately after their procedure, however it may take weeks before feeling fully recovered. Participating in Cardiac Rehabilitation will help improve your recovery and help you:
 - Rebuild stamina, strength and balance
 - Learn how to participate in activities safely, and help you re-gain confidence
 - Return to activities of daily living
- Cardiac Rehabilitation may be scheduled while you are in the hospital or may receive a scheduling call after discharge. You may call 313-972-4030 for a Henry Ford program nearest to you.
- Initially after the procedure: no lifting, pushing, pulling more than 10 pounds (examples to avoid: groceries, vacuuming, gardening, golfing:
 - For one week for procedures through the groin
 - For six weeks for procedures through the chest wall
 - For three months for procedures through the breast-bone

DRIVING

- Do not drive for two 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.

ACTIVITY PROGRESSION AT HOME

- Follow these guidelines until you begin Cardiac Rehabilitation.
- Move through Step 1 and 4 at your own pace. Begin where you feel comfortable and progress forward. There is no "correct" time line.
- Pay attention to how you feel when you increase your activity or add new activities.
- If you have any symptoms (usually tiredness, shortness of breath, chest pain or dizziness), stop the activity and go back to the step where you had no symptoms.

	АТ НОМЕ	WALKING
Step 1	Dress in the morning. Take care of your personal needs (washing, making meals, etc.). Keep activities 'easy', for short amounts of time and with rest periods. Contact Cardiac Rehabilitation to verify your start date, call 313-972-4030.	Walk around the house. Take stairs slowly, with rests.
Step 2	Return to activities around the house that don't involve long periods of time standing or using your arms (this causes more strain on the body).	Walks should feel 'light and easy'. Walk 5-10 minutes at a time once or twice a day (a morning or afternoon walk). Stay close to home; avoid hills.
Step 3	Do a few more activities around the house (making your bed, simple meals or watering plants).	These walks should feel 'easy'. Continue to walk once or twice a day. Over several days, lengthen your walks. For example, add five minutes every day or two.
Step 4	Slowly start retuning to your usual activities again (like shopping, light gardening, going out with friends)	When a 15-minute walk feels 'easy', you may increase your walking speed to a level that feels 'moderate'. Continue to lengthen your walks until you are walking a total of 30 or more minutes 5-4 days per week.



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