

Florida Heart and Lung Institute Heart Surgery Discharge Instructions

Diet:

You may resume a regular healthy diet with a cardiac diet focus as below:

1. Sodium no more than 2400 mg/day, or about a teaspoon of salt
2. Eat foods low in saturated fat and low in trans-fat such as fruits and vegetables.
3. Avoid man-made fats used in foods such as artificial butter and prepared baked goods and all processed foods
4. Fluid- Do not drink more than 1.75 liters or 60 ounces of fluid per day

Activity:

Increase your activity level gradually

Walking is a good form of light exercise; go for a walk at 1-3 times per day

No strenuous exercise until cleared by MD

No swimming until wound is fully healed

No driving for 4 weeks

No sexual intercourse for 4 weeks

No driving or operating motorized vehicles while on prescription pain medications

Follow sternal precautions (no lifting, pulling, pushing anything greater than 10 lbs) for a full 8 weeks from day of surgery

Return to work when cleared by MD/PA/ARNP

Bathing:

Shower daily

Gently let soap and water run over your incision and pat dry

Do not scrub the incision/wound

Do not soak in a bath until your incision is healed and evaluated by your physician at follow-up

Chest tube suture sites can be left open to air with no dressing covering them during shower

Wound Care: General Instructions

If you have a dressing it can be removed a day after discharge

You may leave your incision open to air

Keep your incision clean and dry

No lotions, creams, ointments, or powders on incisions until they are well-healed

You have glue over the incision(s) that will fall off on its own; do not pick it off

Chest staples/sutures, if present, will be removed 2 to 4 weeks after surgery during your follow-up clinic visit

If drainage present, change dressing/bandage when soaked/soiled as needed]

Observe wound daily, checking for signs and symptoms of infection including: increased redness, increased pain at incision, drainage from incision, increased swelling at incision site

Pain Control: Expect post-operative pain for 1-4 weeks after surgery

You have been provided with a prescription medication for pain. Please take as directed, and be aware of side effects such as drowsiness, constipation and mild stomach discomfort. Pain pills on an empty stomach can cause nausea, so eat a small amount of food, such as crackers, when taking these pills.

Take over-the-counter stool softeners (Colace or Senna) with your prescribed pain medication.

Acetaminophen (650mg every 6 hours) or Ibuprofen (600mg every 6 hours) may be used in conjunction with narcotics to relieve pain. Do not take more than 4 grams of Tylenol in one day, as this can be very toxic. Do not take ibuprofen if you have an allergy to non-steroidal anti-inflammatory medications, taking Coumadin or have a history of gastrointestinal bleeding or ulcers.

Bowel regimen for constipation:

People who undergo surgery are likely to develop post-operative constipation. Exposure to narcotics and changes in diet, fluid intake, and physical activity are known contributors to this constipation. We recommend routine stool softeners and laxatives after surgery for most patients. These medications are over-the-counter and do not require a prescription:

Colace is a stool softener. We recommend starting at 100mg orally twice per day as needed for soft stools and increase to a maximum of 200mg twice daily as needed.

Senna is a laxative that works by keeping water in the intestine to help stool move along the intestinal tract. Take 1 tablet daily as needed for soft stool and increase to a maximum of 2 tablets twice daily as needed. Take Senna with two full glasses of water each time.

Miralax, Dicolax and Milk of Magnesia are other over-the-counter laxatives that may be used as needed for post-operative constipation.

Drink 6-8 glasses of water per day

Consume 15-30g of fiber per day (Metamucil powder, 1-2 tablespoons 1-2 times/day **or** Benefiber powder, 2 tablespoons 4 times/day)

Avoid straining

Call **352-333-5610** immediately if you have any of the following:

Pain that gets worse or is not relieved by medication

Warmth, redness, or swelling in the skin around the wound

Foul drainage from incision

Extensive bruising or discoloration

Wound that opens up or pulls apart

Fever above 101.5° F or shaking chills

Nausea or vomiting

Severe diarrhea or severe constipation

Dizziness or fainting

Chest pain, shortness of breath, or increased work of breathing

Weight gain >5 lbs over 3-4 days

Inability to urinate for more than 6 hours

Cloudy or smelly urine

Sternal clicking, popping or shifting