# Caring for Yourself After Your Mitral and Tricuspid Interventions (MATRIx) Procedure



# What will my hospital stay be like?

After your procedure you will spend time in the recovery area of the Hybrid Operating Room on CVC-2A. Once you are stable, you will be admitted to the intermediate care unit or intensive care unit. Your doctors will decide where you will be admitted based on your medical needs. Your hospital stay will be an average of 3 days, depending on your condition and procedure.

# What happens when I first arrive to the unit?

- When you arrive to the unit, your nurse and patient care technician will meet you. They will orient you and your family to the unit.
- You may feel sleepy from the sedative you received, but this should wear off in time.
- You will have to lay flat in bed for 2-4 hours, keeping your leg straight to prevent bleeding or bruising at your procedure site.

#### What type of monitoring will I need while I'm here?

When you arrive on the unit a portable heart monitor called a telemetry unit, will be attached to your chest. The unit will send your heart rate and rhythm to monitors located at your bedside and at the nursing station. This portable monitor allows you to walk in the halls freely. Other care you may receive includes:

- The nurses and techs will regularly check your blood pressure, heart rate and temperature.
- You will have the following tests:
  - Chest x-ray An x-ray is a type of high-energy radiation that can go through the body and onto film, making pictures of areas inside the chest.
  - Electrocardiogram (EKG) a graph that looks at the electrical activity ofyou heart.

- **Repeat surface echocardiogram** (before your discharge)- an ultrasound that looks at the size, shape, and position of your heart.
- Your blood will be drawn for lab tests daily.
- Your procedure site will be checked frequently.
- We will measure how much you drink and urinate. We will provide a
  container for you to urinate into for measurement. We will also ask that you
  keep track of the amount of fluid that you drink and report it to your nurse
  or tech.
- You will be weighed daily.
- A staff member (either a nurse or tech) will enter your room to assess your needs hourly.

# Pain and discomfort after your procedure

What kind of pain or discomfort will I feel after my procedure?

You may feel slight pain at your procedure site.

#### What can I do to help keep my pain under control?

You doctor will order effective medication for you to take. Your nurse will ask you about your pain regularly throughout your recovery. You shouldn't hesitate to ask for pain medication if you need it.

Throughout your hospital stay, the nurses will monitor your need for pain medication. You can use the numeric pain rating scale below to measure your pain. This is a helpful tool you can use to describe how much pain you are feeling and to measure how well treatments are relieving your pain. You will be asked to rate your pain using a 0-to-10 pain scale. 0 means "no pain." 10 means the "worse pain possible."

#### **Numeric Pain Rating Scale** O 2 3 4 5 6 7 8 9 Worst Moderate No **Possible** Pain Pain

Pain

#### Why is it so important to control pain after my procedure?

Having good pain control not only helps you feel more comfortable, but also helps you recover faster and may reduce your risk of developing certain complications, such as pneumonia and blood clots. If your pain is well managed, tasks such as sitting, walking, coughing, deep breathing, and eating will be easier.

# What exercises will I do after my procedure?

Exercise is an important part of the recovery process after your procedure. Below are activities you will be expected to perform during your hospital stay:

# • Deep breathing and Coughing

Use your breathing machine (Incentive Spirometer) 10 times every hour while you are awake. For example, if you like watching TV, you should be using your Incentive Spirometer 2-3 times during each commercial break.



How to Use an Incentive Spirometer

By BruceBlaus - Own work, CC BY-SA 4.0

#### Tips when using the incentive spirometer:

- Do not get discouraged if you do not reach the number marked for you.
   You will improve with practice as your body heals.
- If you start to feel dizzy or light-headed, remove the mouthpiece from your mouth and take some normal breaths. Once you feel better, continue using the incentive spirometer.

## Walking

Walking after your procedure is one of the most important things you can do. Beginning the day of your procedure, you will have exercise goals once you are off bedrest:

- Walk the halls
- Up to the chair for meals

## Repositioning

To prevent pressure injuries during your hospital, stay, you need to change your body position. The following recommendations will help you reposition yourself:

#### When in bed:

- o Turn your body at least every 2 hours from side to side.
- Keep the head of your bed at a 30-degree angle or lower to prevent too much pressure on your bones.
- o Place a pillow between your ankles and knees when lying on your side.
- Place a pillow under your lower legs to elevate the heels when lying on your back.

#### When sitting:

- Change your position every 15 minutes by tilting your body forward or to the side so that your bottom lifts off the seat.
- o Stand up or do "pushups" by using arms to raise off the seat every hour.

# What will my diet be after my procedure?

Your food in the hospital will be low in fat and cholesterol and will not have any added salt or sugar. It may taste different than what you are used to eating at home. It is very important for you to eat to improve the healing process.

If you are diabetic or insulin dependent, your nurse will ask you to call them before you eat so they can check your blood sugar.

Many people experience constipation after their procedure due to inactivity and pain medication. Eating a diet rich in fiber, drinking enough fluids, walking the halls, and taking a stool softener will help your bowels move. Sometimes a suppository or laxative is needed to help aid this process along.

When you get home follow these diet instructions:

- Low-fat diet
- Restrict your fluid intake to 2 liters or less per day
- Restrict your sodium to 2 grams or less per day

Healthy food choices are important for the healing process. Eating a balanced diet of the following food groups are good guidelines to follow:

- Carbohydrate-rich foods high in fiber such as oats, bananas, and sweet potatoes
- A variety of fruits and vegetables
- Low-fat dairy products
- Lean meats (such as skinless chicken and turkey). Eating protein-rich foods is very important for wound healing. Good sources of protein include fish, eggs, dairy, beans, and nuts

Our Registered Dietitian Nutritionists (RDNs) are food and nutrition experts who are available to discuss heart healthy choices and salt alternatives or reduction. They providesound, easy-to-follow nutrition advice. If you are interested in speaking to an RDN, ask your nurse to arrange a visit.

# How will I care for myself while in the hospital?

- Wash your hands frequently or use hand sanitizer or sanitizer wipes that we
  provide to you. Hand hygiene is very important to decrease your risk of
  infection.
- Bathe daily with the assistance of a staff or family member.

# Discharge to home

You will be discharged from the hospital approximately 2–3 days after your procedure. Do not plan on driving yourself home or going home alone in a cab or bus. When you're ready to go home, you'll need to have a family member or friend drive you.

#### What can I expect on the day of discharge?

- Discharge time from the hospital may be as early as 9:30am. Please check with your nurse to determine the anticipated time of your discharge.
- Ask a family member or friend to be with you for the final review of your discharge instructions. Please make plans for them to be there at 9:30am themorning you are leaving.
- Your case manager nurse will be in contact with you to explain your final discharge plans.
- Your nurse will review all discharge instructions with you. During this time, ask any questions that you may have about your care after discharge.
- Be sure to understand:
  - Your medications and prescriptions
  - Incision care
  - Activity and restrictions
  - Diet
  - Reasons to call your doctor
  - Follow up appointment information
- At home you will need to monitor your temperature until your next appointment. Please make sure that you have a thermometer before you are discharged.

# What are my medication instructions?

When you are discharged from the hospital, you will receive a complete list of the medications you should take at home.

- Your medication list will include the following information:
  - Medication name(s)
  - Dose of the medication
  - o Number of times to take the medication each day
  - o The last time you took each medication
  - The next time that you should take each medication

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- You will receive any new prescriptions for your recovery before you leave the hospital. It is common to be prescribed a higher dose of your water pill (diuretic) during your recovery period.
- Take your medicine exactly as your doctor prescribes.
- Do not take other medication without telling your doctor.
- Follow up with your heart doctor and primary care provider within 2 weeks of discharge. They will need to make sure your medication list is complete and accurate. They may also need to adjust or change doses for the most effective treatment.
- Keep a current list of your medicines, dosages, and times to be taken in your wallet or purse.
- Since you have a had a heart valve procedure, you must be protected from
  infection for the rest of your life. In the future, you will need to take an
  antibiotic before any medical or dental procedure. Contact your doctor or
  dentist before any medical or dental procedures to get an antibiotic
  prescription.

# When do I need to seek emergency care?

## Call 9-1-1 immediately if:

You have any of the following sudden symptoms of a stroke:

- Confusion or trouble speaking or understanding others
- Trouble seeing in one or both eyes
- Numbness or weakness of the face, arm, or leg, usually on one side of your body
- Trouble walking, dizziness, or loss of balance or coordination
- Severe headache with no known cause

## You have **any** of the **symptoms listed below**:

- Sudden onset of chest pain
- Shortness of breath not relieved by rest
- Severe bleeding or swelling at your procedure site
- Your legs feel numb, tingly, cold or looks blue
- You believe you are experiencing a true emergency

# When do I need to call my doctor?

- Under the tongue temperature above 100.5° F
- Bleeding, redness, swelling, increased pain or foul-smelling drainage near your procedure site
- Bruising at your procedure site that increases in size quickly
- Procedure site that opens after you leave the hospital
- Increased swelling in your legs or ankles
- Weight gain of more than 3 pounds in one day or 5 pounds in a week
- Trouble or inability to urinate
- Nausea, vomiting or diarrhea
- Chills or excessive sweating
- A vague feeling that something is wrong

#### What is the number to call?

- Monday through Friday from 8:00am to 5:00pm: Call (888) 287-1082
  - o Ask to speak to the MATRIx Nurse Clinical Care Coordinator.
- After 5:00pm or on weekends or holidays: **Call** (**734**) **936-6267** 
  - Ask the hospital operator to page the Cardiac Surgery Resident on call. You will receive a call back from the Resident.

# What steps should I take to monitor my health at home?

You will need to perform and **record** the following self-checks daily:

- Check your procedure site daily for signs of infection including increased redness, tenderness, swelling, warmth, or drainage.
- Take your temperature anytime you think you may have a fever for the first week after your procedure.
- Weigh yourself at the same time each morning after you urinate, but before you eat breakfast. Use the same scale every day.

# How do I care for my procedure site?

You will have a procedure site in your right groin, left chest, or both. If you had a non-dissolving suture placed in your groin during the procedure, it will be removed at your 1-month follow-up visit or before discharge.

#### Follow these guidelines to care for your procedure site while bathing:

- Wash your procedure site daily with your usual bath soap and water. Pat dry and leave open to air. Use a freshly laundered wash cloth and towel each time you shower.
- Keep the site clean and dry when not showering.
- You may place dry gauze over your procedure site to protect from clothing rubbing or to dry sweat between skin folds.
- **Do not** put any creams, lotions, powders, or ointments on your surgical incision(s) until they heal.
- **Do not** use your pre-surgical scrub on your procedure site.
- **Do not** soak in a bathtub, hot tub, or get into a swimming pool until cleared by the MATRIx team.

# What are my activity instructions?

#### Restrictions if you have a right groin procedure site:

- **Do not** lift, push, or pull any objects over 10 pounds for 10 days after your procedure. For reference, a full gallon of milk weighs about 9 pounds.
- **Do not** engage in sexual activity for 10 days after your procedure.

#### • Driving:

- Your doctor will discuss with you when you can drive again. You will receive specific instructions at the time of discharge.
- o **Do not** drive if you are taking narcotic pain medication (opioids).
- You can ride as a passenger in a car at any time but as always, you should wear your seatbelt.
- Do not return to work until you have seen your doctor at the first follow up clinic visit.

#### Restrictions if you have a left chest procedure site:

- **Do not** lift, push, or pull any objects over 10 pounds for 30 days after your procedure. For reference, a full gallon of milk weighs about 9 pounds.
- **Do not** engage in sexual activity for 14 days after your procedure.

#### • Driving:

- Your doctor will discuss with you when you can drive again. You will receive specific instructions at the time of discharge.
- o **Do not** drive if you are taking narcotic pain medication (opioids).
- You can ride as a passenger in a car at any time but as always, you should wear your seatbelt.
- Do not return to work until you have seen your doctor at the first follow up clinic visit.

#### **Activities**

- Walk every day (find an indoor setting during bad weather).
- You may climb stairs but take them at a slow pace.
- Limit the number of times you take the stairs until you are feeling well.
- Divide your time and spread activities throughout the day. **Do not** try to do everything at once.
- Use your incentive spirometer at least four times a day (10 breaths each time) until you return for your follow-up appointment.

# How will I manage my discomfort at home?

Your goal at home is to control your discomfort so you can do the things you need to do to heal. It is important to know that discomfort is normal after this procedure. You may take acetaminophen (Tylenol®) or ibuprofen (Motrin®) for any discomfort at your procedure site.

Below are a few tips to help you relieve your discomfort:

- Remember to take acetaminophen (Tylenol®) or ibuprofen (Motrin®) before activity and at bedtime.
- Be sure to get enough rest. If you are having trouble sleeping, talk to your primary care doctor.
- Use pillows for support when you sleep and when you do your coughing and deep breathing exercises.
- Try using alternative methods: guided imagery, listening to soft music, or changing your position in bed.

# What type of follow up care will I receive?

After you leave the hospital, you will have the following post-operative visits with the MATRIX Team:

- A follow up phone call within 48-72 hours of your discharge
- 1-week post-operative phone call
- 1-month post-operative clinic visit
- 6-month post-operative clinic visit
- 1-year post-operative clinic visit

If you are part of a research trial, you may need to follow-up every year for clinic visits and protocol testing (for up to 5 years).

## If you have any questions or concerns before these appointments:

Call the MATRIx Team at **(888) 287-1082** between 8:00am to 5:00pm Monday through Friday.

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