UW Medicine UNIVERSITY OF WASHINGTON MEDICAL CENTER

Preparing for Your TMVr or TTVr with the MitraClip

Planning ahead

This handout explains how to prepare for your transcatheter mitral valve repair (TMVr) or transcatheter tricuspid valve repair (TTVr) procedure with the MitraClip. It includes a checklist to keep track of everything you need to do before your procedure day, and a CareMap to let you know what to expect during your hospital stay.

Plan Ahead for Your Return Home

Planning ahead is the most important thing you and your family can do to help make your TMVr or TTVr a success. Start planning for your return home as soon as you know you will be having this procedure.

You will need help with activities of daily living when you first go home. Arrange for someone to help care for you for **at least** 1 week after you return home.

It is hard to know how much help you will need or how long you will need it. Coping with your condition may have affected your overall health. Your recovery time depends on your strength, mobility, and nutrition before the procedure. You may need 1 week to 1 month to recover after a successful procedure.



A responsible adult must stay with you for at least 1 week after you leave the hospital.

If you are not sure you will have the help you need at home, you may need home healthcare or to stay in a skilled nursing or rehabilitation facility after your procedure. Ask to talk with one of our social workers about this, if needed.

Getting Ready

7 to 14 Days Before

Your pre-surgery clinic visit is usually 7 to 14 days before your procedure. At this visit, you will:

Meet with a nurse practitioner or physician assistant, who will ask you
questions about your health history and give you a physical exam.

- Meet with staff from the Pre-Anesthesia Clinic to talk about having general anesthesia (medicine to make you sleep) for your procedure.
- Review the instructions you need to follow before your procedure, especially what medicines to keep taking or stop taking.
- Have an *electrocardiogram* (ECG or EKG), blood tests, and a chest X-ray.
 - If any of your test results show problems, your doctor may prescribe new medicines for you. Our clinic nurse will call you if you need any new prescriptions.

You must have a surgical consult before you have TMVr or TTVr with the MitraClip, since this procedure is done only for patients who have high risks with open heart surgery. If you have not yet had this consult, you may meet with a surgeon at this clinic visit.

2 to 4 Days Before

- Please call our clinic nurse if you have any new symptoms or concerns.
 These may include a cough, fever, chills, pain when you urinate (pee), or new rashes or wounds.
- If you are taking warfarin (Coumadin):
 - You will likely have a test called Protime/INR 4 days before your procedure. This test checks the thickness or thinness of your blood.
 - Based on your test result, our clinic nurse will tell you when to stop taking warfarin. For most people this is 3 to 4 days before the procedure, but your instructions may be different.
 - If you need a special medicine to keep your blood thin while you are not taking warfarin, our team will prescribe this for you.
- Most people who take a blood-thinning medicine such as Pradaxa (dabigatran), Xarelto (rivaroxaban), or Eliquis (apixaba) stop taking it 2 to 3 days before this procedure. If you are taking any of these medicines, ask your doctor when to stop taking it.
- Do NOT stop taking any medicines unless your nurse or healthcare provider has told you to do so.

The Evening Before

- Eat a normal meal.
- After midnight, do **not** eat any food, drink any fluids, or take anything else by mouth. This includes gum, mints, water, coffee, and tea.
- If you have diabetes and you:
 - Are on metformin (Glucophage), you may be told to stop taking it the evening before or morning of your procedure.

- Take long-acting insulin, you may be told to take only half your usual dose the evening before. Do **not** take any insulin the morning of your procedure.
- Do NOT stop taking any medicines unless your nurse or provider has told you to do so.

Procedure Day

- **Do not eat or drink anything.** This includes gum, mints, water, coffee, and tea.
- Do **not** take any of your medicines unless your nurse or healthcare provider told you to take them the morning of your TMVr or TTVr.
- Remove all makeup and nail polish before you come to the hospital.
- Leave all jewelry and other valuables at home. This includes wedding rings and watches.
- Wear comfortable clothes. You will change into a hospital gown before
 your procedure. Your clothes will be given to the person who comes
 with you to the hospital, or they will be held in a locker for you.
- Bring a photo identification (ID) with you to the hospital.
- If you use a CPAP machine for sleep apnea or breathing problems, bring it with you to the hospital.

Your Checklist

Make sure you have done all of the items on this list \boldsymbol{before} your TMVr or TTVr:	
	I have had ultrasounds to take pictures of my mitral valve. These include a <i>transthoracic echocardiogram</i> (TTE) and, if needed, a <i>transesophageal echocardiogram</i> (TEE).
	I have had testing to make sure I do not have any major heart artery blockages. This testing is usually a <i>cardiac catheterization</i> or a <i>cardiac stress test</i> .
	I have seen an interventional cardiologist who does TMVr or TTVr. This doctor feels that TMVr or TTVr is a good option for me.
	I have seen a cardiac surgeon who believes open heart surgery to treat my mitral valve problem is not a good option for me.
	I do not have any bleeding issues, swallowing problems, or dental concerns (such as an infection or broken teeth) that could cause a problem during the procedure or with the MitraClip.
	I have had an appointment in the Pre-Anesthesia Clinic to talk about the risks of having general anesthesia.

u	risks and benefits of the MitraClip. This visit usually includes an ECG, lab tests, and a chest X-ray.
	I signed a consent form giving my doctors permission to do my TMVr or TTVr procedure.
	I have received instructions on how to prepare for the procedure, including what medicines to stop or start, and where and when to check in.
	I know most patients stay 1 to 3 days in the hospital after TMVr or TTVr. I understand I may need a shorter or longer stay, depending on my condition.
	I have arranged for a responsible adult to stay with me for at least 1 week after the procedure.
	I know I will have follow-up clinic visits at UWMC. These are usually at 2 weeks and 4 weeks after this procedure.
	I know to call 206.598.VALV (206.598.8258) to reach members of the TMVr or TTVr team if I have any questions or concerns.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Regional Heart Center: Call **206.598.VALV** (8258) during clinic hours.

After clinic hours or on holidays or weekends: Call 206.598.6190 and ask to page the CARD I Structural Fellow on call.

Percutaneous Mitral Valve Replacement (MitraClip) Procedure CareMap

Your care plan may differ

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up visits, knowing who and when to call Patient and family education on follow-Able to move safely within precautions Shower and dress in own clothes Receive equipment, if needed Day 2: Day of Discharge Discharge from the hospital Follow-up visits scheduled after leaving the hospital Reach final goal weight Wound is clean and dry Activity Guidelines Goal Weight Move from CTICU to care unit when a diet, wound care, medicines Take usual home medicines Begin eating, progress diet, Occupational Therapy (OT) about mobility precautions, and Physical Therapy (PT) guidelines for moving and □ Work on discharge goals Receive anticoagulation (blood-thinning) plan for hall 3 times a day, going Shower training with OT ₽. Patient and family learn activities of daily living Move short distances Discharge date given Learn how to care for Day 1 Close to goal weight Pain under control Follow OT and PT farther each day bed is open evaluation discharge as able punow Move to Cardiothoracic Intensive Care Bed Rest Sit in Chai Unit (CTICU) after your procedure Off breathing machine (ventilator) Day 0: Day of Procedure Consume ice chips, if able with surgeon after your move in room if blood Family consultation Out of bed to chair, pressure stable procedure Bed rest

Care Milestones

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