

TMVr or TTVr with the MitraClip: What to Expect

Before and after your procedure at UWMC

This handout explains what to expect when you are scheduled for a transcatheter mitral valve repair (TMVr) or transcatheter tricuspid valve repair (TTVr) with the MitraClip at UW Medical Center.

Preparing at Home

- Follow any special medicine instructions you were given.
- Plan for a responsible adult to drive you home on the day of your discharge from the hospital. **You may not drive yourself, or take a bus or taxi by yourself.**
- Make plans to have someone stay with you for **at least 1 week** after you get home.
- **Do not eat or drink anything after midnight** the night before your procedure, unless your doctor or nurse told you otherwise.

Procedure Day

To Check In

- Use the **main hospital entrance** on Pacific Street. When you enter, you will be in the lobby on the 3rd floor of the hospital. You will see the Information Desk in the lobby.
- **Go to Admitting Reception window.** This office is down the hall to the right of the Information Desk. Tell them that you are checking in for your heart procedure. Their phone number is 206.598.4310.



Check in at the Admitting and Reception window.

After You Check In

Go to Cardiac Procedures on the 2nd floor:

- From Admitting, go out to the lobby and turn left. Go along the main hall to the Pacific elevators. Take an elevator to the 2nd floor.

- As you step off the elevator, you will see a phone on the wall to your right. Pick up the handset and press **Key 1, Cardiac Procedures Visitors**. The nurse who answers will tell you what to do next.

Preparing for the Procedure

- We will ask you to name one of the people who came with you as your contact person. We will give this person a special phone or pager. Your surgery team will call this person with updates on your care.
- A nurse will help you get ready for your procedure. The anesthesia team will greet you and bring you to the procedure room.
- When the surgery team is ready to begin, you will receive *general anesthesia*. This medicine will put you to sleep.
- We will then place a breathing tube in your airway. A breathing machine (*ventilator*) will breathe for you while you sleep.
- This procedure usually takes about 3 to 4 hours. When it is done, the surgery team will call your contact person and meet with them.

After Your Procedure

- After your Procedure, you will be moved to the Coronary Intensive Care Unit (ICU) on 5-Southeast.
- Your breathing tube will be removed as soon as you are able to breathe on your own. Most times, this occurs soon after you arrive in the ICU. If your vital signs are not yet stable, or if you have lung disease or are having a hard time holding your oxygen levels, the breathing tube may be removed later.
- If your breathing tube is removed the day of procedure, you may be able to sit up on the side of your bed and eat toward the end of the day.

Visitors

Family and friends may visit you after you are settled in to the ICU. Most times, this is about 1 to 2 hours after your procedure is done.

To find 5-Southeast, visitors take the Cascade elevator to the 5th floor. The phone number for the ICU is 206.598.6500.

Your Hospital Stay

After this procedure, most patients:

- Spend 1 night in the ICU.
- Move to 6-Northeast or another *telemetry* (heart monitoring) unit the next day. The phone number for 6-Northeast is 206.598.6800.
- Stay in the hospital 1 to 3 days.

A CareMap with daily goals for your hospital stay is included at the end of the handout “Preparing for Your TMVr or TTVr with the MitraClip.” Please ask your nurse for a copy of this handout if you do not have it.

When You Leave the Hospital

You will need a responsible adult to drive you home on the day of your discharge from the hospital. This person, or another responsible adult, must stay with you for at least 1 week after you get home.

Activity Precautions

- For **7 days** after your procedure:
 - Do **NOT** lift anything that weighs more than 10 pounds (4.54 kilograms). This includes pets, groceries, children, laundry, and trash. (A gallon of water weighs about 9 pounds.)
 - Do **NOT** garden, including lawn mowing and raking.
 - Do **NOT** hold your breath, bear down, or strain when having a bowel movement.
 - Do **NOT** allow the puncture site to be covered by water. This means do **not** take a bath, sit in a hot tub, or go swimming. It is OK to shower.
- Wait until your care team says it is OK for you to do more activities.
- If you were driving before the procedure, you should be able to drive within 2 to 3 days after discharge, unless you are told otherwise.
- For **2 weeks** after your procedure, your doctor and care team will check your progress. They will tell you if you need to follow any other restrictions.

Incision Care

After this procedure, you will have a small puncture wound on your groin. You may have some bruising. You should not have any drainage, bleeding, or pain at the incision.

A few patients have a small *suture* (stitch) in their groin at the puncture site. This suture is usually removed before you leave the hospital. If your suture is still in place when you are home, please call our office and make an appointment for us to remove it.

While your incision is healing:

- Leave the area open to the air for best healing.
- If your clothing rubs or irritates your incision, you can cover the area with dry gauze. Remove the gauze at night. You do not need to apply any special dressing.

- Do **not** apply lotions, creams, or powders to the area until the site has fully healed.

Showering and Bathing

- You may shower when you get home, unless your doctor tells you not to. When you shower:
 - You may gently wash your puncture site with mild, unscented soap and water.
 - Gently pat dry your puncture site. Do **not** rub it.
- Do **not** take very hot showers. Hot water may lower your blood pressure and make you weak or dizzy. This could cause you to faint. (Fainting may also occur from the medicines you are taking.)
- For 1 week after your procedure, do **not** take a bath, sit in hot tub, or go swimming. This precaution will help lower your risk of infection in your puncture site.

Follow-up Care

- For the first 6 months after your procedure, you must take antibiotics before having any dental work. This is needed to prevent infection of your heart.
- If you are on warfarin (Coumadin), you will have a Protime/INR test within 1 week after discharge.
- You must also have follow-up visits:
 - **30 days after discharge** with a cardiologist at UWMC. This visit will include an *echocardiogram* (ultrasound of the heart).
 - **Once a year** with a cardiologist at UWMC.

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.

Your Annual Follow-up Visits

At your annual follow-up visits at UWMC:

- You may have an *echocardiogram* to check how your heart valve is working.
- We will give you a walk test to check your symptoms and mobility.
- We will ask you to fill out a form, telling us about your current symptoms.