

心脏手术

手术后的护理

本讲义解释了在华盛顿大学医疗中心（UWMC）接受心脏手术后的护理情况。

心脏手术

患者姓名: _____

手术名称: _____

手术日期: _____

手术医生: _____

复诊信息

复诊日期: _____

日期

时间



用您的手机扫描此
二维码。即可获得
此讲义的电子版



如对心脏手术后的恢复情况有任何疑问或顾虑，请咨询您的心脏专科医生。

何种情况下需要与医生联系

如有以下任何症状，请致电 206.598.8060 联系心脏外科诊所护士。平时工作日：上午 8 点至下午 4:30

下班后以及周末和假日：如有**紧急问题或症状**，请致电 206. 598. 6190 并要求联系值班的心脏外科医生。

- 体温高于摄氏 38.5°C（华氏 101°F）
- 伤口周围发红、肿胀或疼痛加剧
- 伤口开裂或该部位流液
- 血压高于 140/90 或低于 90/60（或按照医务人员的嘱咐）
- 休息时心率低于每分钟 60 次，或每分钟超过 100 次（或按照医务人员的嘱咐）
- 呼吸发生变化或呼吸困难
- 新发的心悸（心律不齐）或心跳偷停
- 胸痛复发或手术前的其他症状复发
- 5 天内体重增加 3 磅或以上，或体重渐增
- 脚或脚踝肿胀加剧
- 胃部感到不适、恶心或呕吐
- 服药困难

自我护理

- 每天淋浴并用肥皂和水轻清洗伤口、拍干。
- 记录体重、体温、心率、血压及伤口的外观。将这些数字写在第 6 页和第 7 页的每日“日志”图表上。
- 每天步行 4 次。使用第 8 页和第 9 页的“锻炼日志”来记录日常活动。
- 感到胸部有“啪啪”或“咔哒”声，请致电心脏外科团队。

到来华大医疗中心（UWMC）心脏中心的复诊

心脏外科团队将在手术后的 30 天内监测患者心脏护理。该团队包括外科医生、高级医疗服务提供者（APP）和护士。

患者大约在手术后 1 到 2 周需要来看外科医生、或高级医疗服务提供者 APP。此次门诊订在华大医疗中心（UWMC）的心脏中心，地址为 1959 N.E. Pacific St., Seattle, WA 98195。在这次复诊中，外科医生或高级医疗服务提供者 APP 将检查愈合的情况和进展。这次复诊通常在患者出院之前即预先安排好。

如没有预约好复诊、或需要重新安排时间：请在工作日上午 8 点至下午 4:30 致电 206. 598. 8060 联系心脏外科诊所护士。

复诊时需要携带的物件

在复诊时请携带以下物件：

- 所有目前正在服用药物的药瓶。
- 此讲义中的“每日日志”及“锻炼日志”。
- 一份希望与心脏外科团队咨询的提问清单。

定期复诊

在第一次复诊后，可能就不需要再次来看心脏外科团队。但是，如在手术后的 30 天内有任何问题或疑虑、请与我们联系。

手术后约 30 天，心脏病专科医生（心脏医生）或初级医疗服务提供者（PCP）将开始管理患者的药物并接管长期的护理工作。

心脏手术后定期去看心脏病专科医生很重要，目的是：

- 术后监测
- 降低以后患心脏病的风险
- 持续护理高血压或心力衰竭等问题

如果目前没有一位心脏病专科医生： 可以请心脏外科护理团队、初级医疗服务提供者（PCP）或保险公司协助寻找一位居家附近的心脏病专科医生。

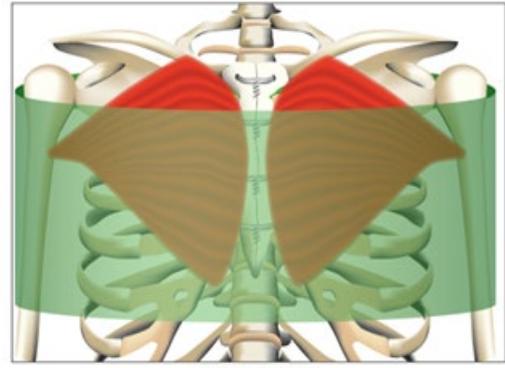
手术后的饮食

心脏手术后食欲不振是很常见的。但摄取有营养的食物来帮助身体愈合是很重要的。请遵循下列饮食建议以获得最佳恢复效果：

- **多吃蛋白质。** 蛋白质有助于伤口愈合。高蛋白食物包括鱼、鸡肉、豆类、豆类植物、奶酪、牛奶、酸奶和鸡蛋。还可以喝 Boost 或 Assure 等蛋白质饮料，或用水果、牛奶和蛋白粉制作蛋白质奶昔。
- **多吃纤维及饮水** 以防止便秘。含纤维的食物包括水果、蔬菜和全谷物。
- **摄取饱和脂肪、胆固醇和反式脂肪含量低的饮食。** 烹饪时采用橄榄油、菜籽油、蔬菜油或葡萄籽油。避免加工过的食品。
- **避免添加糖。** 避免汽水、糖果和糕点。限制面包、米饭和土豆。体内多余的糖份会转化为脂肪。这会导致体重增加，减慢愈合速度，并导致胆固醇增高的问题。
- 如采取其他特殊饮食调配膳食，请遵循医生的指示。

如有糖尿病或血糖高

- 按照美国糖尿病协会（ADA）建议的饮食规则进食，除非医生另有指示。
- 记录餐前和睡前的血糖水平。
- 尽可能保持血糖水平接近正常水平。



“圆筒”区域，是指围绕上臂、胸骨和附着肌肉周围的区域。

活动的指南

在手术后:

- **4周内切勿驾车。**
- 在12周内，请遵循下面的“将活动范围限于圆筒内”的指南。

“活动范围限于圆筒内”

在手术过程中，医生将胸骨从中间分开，然后用永久性不锈钢/钛丝或缆线重新连接在一起。胸骨大约需要3个月才能愈合。为了帮助恢复，请记住将日常的动作限制在“圆筒”内。

“将活动范围限于圆筒内”是一个比喻短语，为的是协助患者记住在手术后愈合期间如何使用手臂以减轻胸骨的受力。

其目的是做负重动作时**保持上臂紧贴身体**（比喻为“在圆筒内”）。做非负重动作时可将手臂伸出“圆筒”外。理疗师将帮助调整各种活动以适应个别的患者。

- 对于所有负重运动，例如举重物、推或拉，请保持上臂靠近胸部（保持在“圆筒”内）并同时使用双臂。
- 在执行不涉及提拿、推或拉的任务时，可以自由移动手臂。慢慢移动，倾听身体发出的信息。疼痛是停止或改变活动方式的信号。
- 提拿重量没有限制，但应该慢慢地进入各种活动。疼痛是停止或改变活动方式的信号。我们预计疼痛不会突然急剧增加。但酸痛是预期的。

性生活

当觉得可以时，就可以恢复性活动。请务必遵循本讲义中的所有说明。保持伤口清洁安全。

如果使用尼古丁产品

尼古丁会减少流向组织的血液。这会使伤口难以愈合。

如患者抽烟、吸电子烟或使用任何类型的烟草，**我们强烈建议戒烟**。如需要帮助，请咨询家庭医生或华大医疗中心 UWMC 的医疗团队中的某一位。

手术后疼痛的管理

控制疼痛在恢复期间非常重要。患者需要能四处走动、步行和深呼吸，以防止肺炎或血栓等问题。

回家时，我们会提供药物，以帮助在恢复期间缓解疼痛。处方可能包括止痛药（如泰诺 Tylenol）以及阿片类药物 opioids（如羟考酮 oxycodone）。

如果需要，我们还可能开药放松肌肉或帮助缓解神经疼痛的药物。我们将提供一份更新的药物清单，以便患者在家时遵循。

在服用任何其他药物（甚至是布洛芬 ibuprofen 或其他非处方药）之前，**请先咨询心脏外科团队**。医生会告诉患者服用这些药物是否安全。

除了服用止痛药之外，还有一些其他的方法可以缓解疼痛。尝试热疗、温和的伸展运动、散步、冥想和听平静的音乐。请索取我们的讲义“管理疼痛：非药物的选择（Managing Pain: Non-medicine options）”及“心脏手术之后的疼痛管理（Managing Pain After Heart Surgery）”。

阿片类止痛药物 Opioids

如果医生开了阿片类止痛药处方（如羟考酮 oxycodone），请**仅仅**在需要时服用。假如泰诺或热敷和冰敷等其他非药物方法有助于缓解疼痛，则无需服用阿片类药物。

我们将解释如何**逐渐减少**（慢慢停止）阿片类药物。患者可在手术后 1 到 2 周开始逐渐减量。大多数患者在 2 周后复诊来看外科医生时已经不再服用阿片类药物。阿片类药物的处方药在用完后通常不会补充。

如在手术后无法控制疼痛，请咨询心脏外科诊所的护士。



我们强烈建议戒烟、电子烟或使用任何含有尼古丁的产品。

您有疑问吗？

我们很重视您的提问。如您有任何疑问，或顾虑时请咨询您的医生或医疗服务提供者。

周间：上午 8 点至下午 4:30：请致电心脏手术科护士专线 206.598.8060。

如在周末、假日或下班后有**紧急情况**：请致电：206.598.6190 要求与当值的心脏手术医疗服务提供者联系。

非紧急情况的提问：请经由 **MyChart** 与您的医护团队联系。

Heart Surgery

Your follow-up care

This handout explains follow-up care after having heart surgery at University of Washington Medical Center (UWMC).



Scan with your phone camera for a digital copy of this handout.

Your Cardiac Surgery

Patient: _____

Surgery: _____

Surgery date: _____

Surgeon: _____

Your Follow-up Visit

Follow-up visit: _____

Day and Date

Time



Talk with your heart doctor if you have any questions or concerns about your recovery after heart surgery.

When to Call

For **urgent concerns or symptoms** after hours and on weekends and holidays, call 206.598.6190 and ask to page the Cardiac Surgery provider on call.

Weekdays from 8 a.m. to 4:30 p.m., call your Cardiac Surgery clinic nurse at 206.598.8060 if you have any of these symptoms:

- Fever higher than 101°F (38.5°C)
- More redness, swelling, or tenderness around your incision
- An opening in your incision or drainage from the site
- Blood pressure higher than 140/90, or lower than 90/60 (or as your provider has advised)
- Resting heart rate less than 60 beats a minute, or more than 100 beats a minute (or as your provider has advised)
- Breathing changes or problems breathing
- New *palpitations* (irregular heartbeat) or skipped beats
- Return of chest pain or other symptoms you had before surgery
- Weight gain of 3 pounds or more within 5 days, or steady weight gain
- Increased swelling in your feet or ankles
- Feeling sick to your stomach, feeling nauseated, or vomiting
- Trouble taking your medicine

Self-care

- Shower and gently wash your incision with soap and water every day. Pat dry.
- Keep track of your weight, temperature, heart rate, blood pressure, and how your incision looks. Write these numbers on the “Daily Record” chart on pages 6 and 7.
- Walk 4 times a day. Use the “Exercise Log” on pages 8 and 9 to track your daily activity.
- Call the Cardiac Surgery Team if you feel “popping” or “clicking” in your chest.

Follow-up Visits at the Heart Institute at UWMC

The Cardiac Surgery Team will monitor your heart care during the first 30 days after surgery. This team includes your surgeon, advanced practice providers (APPs), and nurses.

You will need to see your surgeon or APP about 1 to 2 weeks after surgery. This visit will be at the Heart Institute at UWMC, 1959 N.E. Pacific St., Seattle, WA 98195. At this visit, your surgeon or APP will check your healing and progress. This visit is usually scheduled before you leave the hospital.

If you do not have a follow-up appointment or need to reschedule: Call your Cardiac Surgery clinic nurse at 206.598.8060 weekdays from 8 a.m. to 4:30 p.m..

What to Bring

Bring these items to your follow-up visit:

- Bottles of all the medicines you are currently taking.
- Your “Daily Record” and “Exercise Log” from this handout.
- A list of questions you want to ask your Cardiac Surgery Team.

Regular Follow-up

After your follow-up visit, you may not need to see the Cardiac Surgery Team again. But please call us if you have any questions or concerns during the first 30 days after your surgery.

About 30 days after your surgery, your *cardiologist* (heart doctor) or primary care provider (PCP) will start to manage your medicines and take over your long-term care.

It is important to have regular visits with your cardiologist after heart surgery. You will need to see a cardiologist for:

- After-surgery checkup
- Reducing your risk of heart problems
- Continuing care for issues such as high blood pressure or heart failure

If you do not have a cardiologist: Ask your Cardiac Surgery Care Team, PCP, or insurance company to help you find a cardiologist in your area.

Your Diet After Heart Surgery

It is common to have a lower appetite after heart surgery. But it is important to eat nutritious foods to help your body heal. Follow this recovery diet for best healing:

- **Eat plenty of protein.** Protein helps with wound healing. Foods high in protein include fish, chicken, beans, legumes, cheese, milk, yogurt, and eggs. You can also drink a protein drink like Boost or Ensure, or make protein shakes with fruit, milk, and protein powder.
- **Eat lots of fiber and drink fluids** to prevent constipation. Foods with fiber include fruits, vegetables, and whole grains.
- **Eat a diet that is low in saturated fat, cholesterol, and trans fats.** Cook with olive, canola, vegetable, or *grapeseed* oil. Avoid processed foods.
- **Avoid added sugars.** Avoid soda, candy, and pastries. Limit breads, rice, and potatoes. Extra sugar in the body is turned into fat. This causes weight gain, slows healing, and causes problems with your cholesterol.
- If you are on a special diet, follow your doctor’s instructions.

If You Have Diabetes or High Blood Sugar

- Eat the diet that is advised by the American Diabetes Association (ADA), unless your doctor tells you otherwise.
- Record your blood sugar levels before meals and at bedtime.
- Keep your blood sugar levels as close to normal as you can.

Activity Guidelines

After your surgery:

- Do **not** drive for **4 weeks**.
- For 12 weeks, follow “Keep Your Move in the Tube” guidelines below.

“Keep Your Move in the Tube”

During surgery, your breastbone (sternum) is divided down the middle and then wired back together with permanent stainless steel/titanium wires or cables. It will take about 3 months for this bone to heal. To help your recovery, remember to keep your movements “in the tube.”

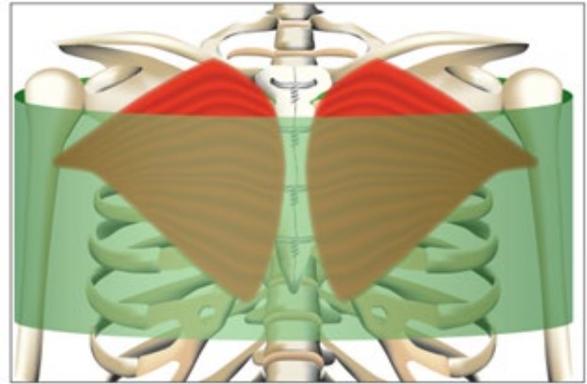
“Keep Your Move in the Tube” is a phrase to help you remember how to use your arms and reduce stress on your *sternum* (breastbone) while it heals after surgery.

The goal is to **keep your upper arms close to your body** with load-bearing movements. You can move your arms outside the tube with non-load-bearing movements. Your therapists will help you modify activities specific to you.

- For all load-bearing movements such as lifting, pushing, or pulling, keep your upper arms close to your chest (in the tube) and use both arms.
- When performing tasks that do not involve lifting, pushing, or pulling, you can move your arms freely. Move slowly and listen to your body. Pain is a signal to stop or change the activity.
- There are no weight restrictions, but you should ease slowly into activities. Pain is a signal to stop or change the activity. We do not expect a sudden, sharp increase in pain. We do expect soreness.

Sexual Activity

You may resume sexual activity when you feel ready. Make sure you follow all the instructions in this handout. Keep your incision clean and safe.



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The “tube” is the area around your upper arms, sternum, and the attached muscles.

If You Use Nicotine Products

Nicotine reduces blood flow to your tissues. This makes it hard for your wound to heal.

If you smoke, vape, or use tobacco of any kind, **we strongly advise you to quit**. If you need help, talk with your PCP or someone on your healthcare team at UWMC.

Managing Pain After Surgery

It is very important to manage your pain while you recover. You need to be able to move around, walk, and breathe deeply to prevent problems like pneumonia or blood clots.

When you go home, we will give you medicine to help with pain while you recover. Your prescriptions might include pain relievers such as Tylenol, as well as opioids such as oxycodone.

If needed, we may also prescribe medicines to relax your muscles or to help nerve pain. We will give you an updated medicine list to follow when you are home.

Talk with your cardiac surgery team **before** you take any other medicine, even ibuprofen or other over-the-counter medicines. Your provider will tell you if it is safe to take these.

There are other ways to help your pain besides taking medicine. Try heat therapy, gentle stretching, walking, meditation, and listening to calming music. Ask for our handouts “Managing Pain: Non-medicine options” and “Managing Pain After Heart Surgery.”

Opioids

If you get a prescription for opioid pain relievers (such as oxycodone), take them **only** as needed. You do not need to take opioids if other options such as Tylenol, heat, or ice help your pain.

We will explain how to *taper* (slowly stop) your opioids. You will start to taper 1 to 2 weeks after surgery. Most patients are no longer taking opioids by the time they see their surgeon at their 2-week follow-up visit. Opioid prescriptions are not usually refilled once you run out.

If you are having problems managing your pain after surgery, please talk with the Cardiac Surgery clinic nurse.



We strongly advise you to quit smoking, vaping, or using any products that contain nicotine.

Questions?

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

Weekdays 8 a.m. to 4:30 p.m.: Call your Cardiac Surgery Clinic nurse at 206.598.8060.

For urgent concerns on weekends, holidays, and after hours: Call 206.598.6190 and ask to page the Cardiac Surgery provider on call.

For non-urgent questions: Please contact your care team through MyChart.

Daily Record

Use this chart to record your weight, temperature, resting heart rate, blood pressure, and how your incision looks. Be sure to:

- Weigh yourself at the same time (first thing in the morning) and use the same scale every day.
- Check your blood pressure and heart rate **2 to 4 hours after** you take your heart and blood pressure medicine.

Date	Weight	Temperature	Heart Rate at Rest	Blood Pressure	How Your Incision Looks

