

Acute Coronary Syndrome (ACS): Discharge Guidelines

(Heart Attack, Myocardial Infarction, Unstable Angina)

The following provides helpful information to assist you as you recover from:

If you have any questions or concerns, please ask your doctor or nurse.

- A **heart attack or myocardial infarction**, a type of heart damage.
- **Unstable angina**, a type of chest pain that can be a warning for a heart attack.

Both of these conditions are also known as ACS.

A heart attack or unstable angina occurs when a blood vessel in the heart becomes partly or completely blocked. The blockage is caused by a clot that forms in an already narrowed heart vessel. The amount of damage to the heart varies from person to person.

You have already started on some treatments to improve blood flow in the heart and to lessen its work. Your recovery depends on the degree of injury to your heart and your own rate of healing.

Before you leave the hospital:

- Take time to watch some of the Cardiac Patient Education *Videos-On-Demand*. (See page 5).
- Make sure you know when to follow up with your doctor(s).

When you go home, follow these guidelines to aid your recovery and help prevent further heart injury.

Activity

Unless you are told otherwise,

- Avoid **lifting**, pulling or pushing any heavy objects – more than **10 lbs.** for the first 3 days after discharge.
- Avoid **straining** or any activity in which you hold your breath and exert yourself or “bear down” (i.e., when having a bowel movement or lifting yourself up). Ask your doctor about a laxative or stool softener if you become constipated.

- Do not **drive** for the first 3 days after discharge.
- **Stair climbing** is fine – do it at a slow, steady pace.
- **Bathing:** You may take a warm tub bath or shower – avoid the use of very hot water.
- If you feel well and are rested, **sexual activity** may be resumed. If you have any concerns, talk with your doctor.
- Talk with your doctor before returning to **work**. This varies with each patient and depends on your work and its demands.

Note: Be sure to follow any added guidelines provided by your doctor or nurse. **If you had a cardiac catheterization during this hospital stay, review the NMH handout, *Cardiac Catheterization Lab Discharge Instructions*.**

Diet: Heart Healthy Eating

Eat a heart healthy diet. This is one that is low in fat and cholesterol (the ‘TLC’ or ‘Therapeutic Lifestyle Changes’ diet). Key points include:

- Eat less fat – read food labels and limit your fat intake to less than 1/3 of your total daily calories.
- Choose foods low in saturated or animal fat (keep to less than 7% of your total calorie intake).
- Limit the use of high-cholesterol foods like eggs, meat, and dairy products (less than 200 mg cholesterol per day).
- Eat more fiber – like oats, beans and fruit.
- Eat more complex carbohydrates (starches) – such as whole grains, beans, and root vegetables.
- Eat less white flour and processed foods.

For more information, refer to the NMH handout, *Heart Healthy Nutrition*.

Heart-Protecting Medicines

Your doctor will prescribe all or most of these medicines for you. They are important for your recovery and may help to prevent future injury and extend your life.

- **Aspirin/aspirin-like medicine:** Aspirin lessens the chance of heart attack and stroke. It helps prevent platelets from forming clots in the blood, allowing blood to flow more easily. This is important if you had an angioplasty or coronary stent procedure. ***Be sure to take the correct type of aspirin prescribed: “non-enteric coated/soluble” aspirin OR “enteric coated” aspirin.***

Like aspirin, **clopidogrel (Plavix™)** also prevents platelets from forming into clots. It may be prescribed with aspirin or in place of it.

- **Beta blocker:** This medicine blocks certain nerve impulses to slow the heart rate and help the heart pump more easily. It may also be given to treat high blood pressure, heart failure, or an abnormal heart rhythm.
- **Angiotensin-converting enzyme inhibitor (ACEI):** This medicine blocks a substance that causes blood vessels to narrow, making the heart work harder. The ACEI relaxes blood vessels so that the heart pumps more effectively. In some cases, an **ARB (angiotensin receptor blocker)** is given to provide this effect.
- **Statin:** A statin slows the progression of heart disease by lowering cholesterol levels in the bloodstream, especially the total cholesterol and the LDL or “bad” cholesterol.

It is important to take your medicines each day as directed. Do not skip doses or stop taking any medicine without talking with your doctor or nurse.

Emotions

At first, you may feel sad, depressed, and/or angry. These feelings are normal and usually go away as time passes. During this time, it might be helpful to talk to someone about your feelings. If these feelings persist or get worse, call your doctor.

A Healthy Lifestyle

It is important that you keep a heart healthy lifestyle. This can improve your long-term health and decrease your risk for another cardiac event.

Do not smoke

- Not smoking is the most important thing you can do to protect your health.
- Smoking Cessation programs are available through the hospital.
Call 1-877-926-4NMH (4664) for group classes or 312-926-2069 for individual counseling.

Manage your blood cholesterol

- Follow a low fat, low cholesterol diet **and** take your lipid-lowering medicine as ordered.
- Know your own cholesterol blood levels and the goals your doctor has set for you. Most patients with ACS should try to achieve these cholesterol levels:
 - LDL (“bad”) cholesterol - less than 70.
 - HDL (“good”) cholesterol - above 40 for men; above 50 for women.

Keep your blood pressure within normal limits

- An ideal blood pressure (BP) is 120/80 or less. High blood pressure or hypertension is a BP consistently above 140/90 (or above 130/80 for persons with diabetes or kidney disease).

- Keep your BP under control:
 - Control your salt (sodium) intake (unless your doctors say otherwise).
 - Exercise on a regular basis (as approved by your doctor).
 - Maintain a healthy weight/lose weight as directed.
 - If you drink alcohol, do so in moderation. This usually means no more than 2 drinks/day for men and 1 for women.
 - Take your BP medicine as prescribed.
 - Follow up with your doctor to have your BP checked regularly as ordered.

Exercise regularly

- Regular exercise makes your heart and body stronger. With your doctor’s okay, increase up to at least 30 minutes of activity every day.
- Begin with a limited walking program, starting the day after discharge.
 - Begin slowly. Gradually increase distance and the length of time.
 - Follow the guidelines outlined by your doctor.
- Talk with your doctor about enrolling in a medically-supervised Cardiac Rehab program. Contact *Northwestern’s Cardiovascular Rehabilitation Program* at 312.926.7883 for more information. An exercise stress test is needed before starting most programs.

Maintain a healthy weight

- Body Mass Index (BMI) measures body fat based on height and weight. A normal BMI ranges from 18.5 to 24.9.

Height: _____ ft. _____ in. Weight: _____ lbs. Your BMI: _____
--

- If you need to lose weight, chose a program that offers a slow, steady weight loss (e.g., no more than 1–1½ lbs./week).
- Be sure to include regular exercise as part of your weight loss program.

Manage your diabetes

- If you have diabetes, check your blood sugar and take your medicine as ordered.
- Strive to modify the risk factors you can control, e.g., weight, BP and cholesterol.
- For more information about diet counseling call 312.926.3627.

Manage stress

- Try to avoid stressful situations. Know your limits.
- Consider relaxation exercises, such as yoga and meditation.

Follow-up Care

Be sure to keep all follow-up care appointments. Here are some questions to discuss at the first doctor's office visit:

- Which medicines should I continue taking?
- What added tests will I need?
- Should I enroll in a Cardiac Rehabilitation program?

When to Call for Help

- If you have chest, shoulder, arm, neck or jaw pain, or the pain that you know as your "heart pain":
 1. Stop what you are doing and rest.
 2. If your doctor has prescribed nitroglycerin (under the tongue), take one.
 3. If the pain does not improve or is worse 5 minutes later, call 9-1-1 or the Emergency Number in your area. (In Chicago, the Emergency Number is 911.) Seek medical attention right away.
 4. If your pain is better or gone after 5 minutes, you should still call your doctor.
- **Also, call your doctor or 9-1-1 if you have any of the following:**
 - Shortness of breath.
 - Feeling faint or dizzy.
 - Very slow or very fast or irregular heartbeat.
 - Excessive fatigue.
 - Nausea, vomiting.
 - A cold sweat.
- Both you and your family should know when to call for help.

Further Information and Resources

Cardiac Patient Education Videos-On-Demand

Video	Title Number
Angina Pectoris (chest pain)	155
Introduction to Heart Disease Risk Factors	158
Women Managing Heart Disease	159 (English)
	160 (Spanish)
Men Managing Heart Disease	161 (English)
	162 (Spanish)
High Blood Pressure: An Introduction to Treatment	163 (English)
	164 (Spanish)
Beginning a Cardiac Rehabilitation Program	169
Heart Disease Risk Factors: Secondary Prevention	180
Diabetes and Heart Disease	220
Nutrition: Healthy Eating for Life	337 (English)
	338 (Spanish)
Smoking: Getting Ready to Quit	339 (English)
	340 (Spanish)

To view a video, dial 6.2585 from your room, enter the title number and listen for the channel number that will show the video.

More information about heart disease and heart healthy living can be found at:

- The American Heart Association, www.americanheart.org, or call 1-800-AHA-USA1 or contact your nearest AHA office.
- Northwestern's Bluhm Cardiovascular Institute, www.heart.nmh.org.

Health Information Resources

For more information, visit one of Northwestern Memorial Hospital's Health Learning Centers. These state-of-the-art health libraries are located on the third floor of the Galter Pavilion and on the first floor of the Prentice Women's Hospital. Health information professionals are available to help you find the information you need and provide you with personalized support at no charge. You may contact the Health Learning Centers by calling 312-926-LINK (5465) or by sending an e-mail to hlc@nmh.org.

For additional information about Northwestern Memorial Hospital, please visit our Web site at www.nmh.org.

Para asistencia en español, por favor llamar a el departamento de representantes para pacientes al 312-926-3112.

Northwestern Memorial is an equal opportunity employer that welcomes, respects and serves with dignity all people and does not discriminate, including in hiring, or employment, or admission, or access to, or treatment in its programs or activities on the basis of race, color, gender, national origin, religion, disability, handicap, age, Vietnam or other veteran status, sexual orientation or any other status protected by relevant law. To arrange for TDD/TTY, auxiliary aids and foreign language interpretation services, call the Patient Representative department at 312-926-3112, TDD number 312-926-6363. Issues related to the Rehabilitation Act of 1973 should be directed to the director of Employee Relations or designee at 312-926-7297.

Developed by: Cardiac Nursing

© July 2010 Northwestern Memorial Hospital

For more information about Northwestern Memorial Hospital, please visit www.nmh.org.

1100-07

900910 (07/10)