Acute Coronary Syndrome: Discharge Guidelines
(Myocardial Infarction, Unstable Angina)

This handout will give you helpful information as you recover from acute coronary syndrome (ACS). ACS includes these conditions:

- **Myocardial infarction (heart attack)** — a type of heart damage.
- **Unstable angina** — a type of chest pain that can be a warning sign of a heart attack.

These happen 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 some treatments to improve blood flow in your heart and to lessen its work. Your recovery depends on how injured your heart is and your own rate of healing.

Before you leave the hospital:

- Watch some of the patient education videos. Your nurse can show you how to view them.
- Make sure you know when to follow up with your physician(s).

When you go home, follow these guidelines to help your recovery. This will lessen the risk of further heart injury.

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

**Activity**

Unless your physician tells you otherwise:

- Do not lift, pull or push heavy objects more than 10 pounds (about the weight of a gallon of milk) for the first 3 days after discharge.
- Do not strain or do any activity where you hold your breath and exert yourself or “bear down.” You might do this when you have a bowel movement or lift yourself up. Ask your physician about a laxative or stool softener if you become constipated.
- Do not drive for the first 3 days after discharge.
- Go up stairs at a slow, steady pace.
- You may take a warm bath or shower, but do not use very hot water.
If you feel well and are rested, you can have sexual activity. If you have any concerns, talk with your physician.

Talk with your physician before returning to work. This will be different for each patient. It depends on your work and its demands.

**Note:** Follow any other guidelines your care team gives you. If you had a cardiac catheterization during this hospital stay, review the Northwestern Memorial Hospital handout, *Cardiac Catheterization Lab Discharge Instructions*.

### Heart-healthy eating

The Therapeutic Lifestyle Changes (TLC) diet is a heart-healthy diet. This meal plan is low in fat and cholesterol. Follow these key points:

- 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 fats to less than 7% of your total calorie intake.
- Limit eating high-cholesterol foods like eggs, meat and dairy products. Try to eat less than 200 milligrams (mg) cholesterol per day.
- Eat more fiber, such as oats, beans and fruit.
- Eat more complex carbohydrates (starches), such as whole grains, beans and root vegetables.
- Eat less white flour and fewer processed foods.

For more information, refer to the Northwestern Memorial Hospital handout, *Heart-Healthy Nutrition*.

### Heart-protecting medications

Your physician will prescribe all or most of these medications for you. They are important for your recovery. They may help prevent future heart injury and problems.

- **Aspirin:** 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.

- **Other antiplatelet medications:** Medications such as clopidogrel (Plavix®) or ticagrelor (Brilinta®) keep platelets from forming into clots. Your physician may prescribe 1 of these with aspirin or instead of it.

- **Beta blocker:** This medication blocks certain nerve impulses to slow your heart rate and help your heart pump more easily. It may also be used to treat high blood pressure, heart failure or an abnormal heart rhythm.
- **Angiotensin-converting enzyme (ACE) inhibitor**: This medication blocks a substance that causes blood vessels to narrow, making the heart work harder. The ACE inhibitor relaxes blood vessels so your heart pumps better. In some cases, your physician may prescribe an angiotensin receptor blocker (ARB) medication which has the same effect.

- **Statin**: This is a very important medication to prevent future heart attacks and stroke. Statins lower cholesterol levels in the bloodstream, especially the total cholesterol and the LDL or “bad” cholesterol. This slows the progression of heart disease.

- **Other medications**: Your physician might prescribe medications for other situations, such as weakened heart muscle. These medications may include sacubitril/valsartan (Entresto ®), spironolactone and empagliflozin (Jardiance®). They help your heart recover. Entresto and spironolactone may also help manage blood pressure.

- **Furosemide (Lasix®)**: This is a diuretic (water pill). Physicians prescribe it for someone who has had a heart attack or fluid retention issues. It helps balance the amount of fluid in your body.

It is important to take your medications each day as directed. Do not skip doses or stop taking any medication without talking with your physician 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 with someone about your feelings. If these feelings last or get worse, call your physician.

**Healthy lifestyle**

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

**Do not smoke**

Not smoking is one of the most important things you can do to protect your health.

**Manage your blood cholesterol**

- Follow a low fat, low cholesterol diet.
- Take your lipid-lowering medication as ordered.
- Know your own cholesterol blood levels and the goals your physician has set for you.
  Most patients with ACS should try to keep 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. Hypertension (high blood pressure) is a BP above 140/90 on a regular basis (or above 130/80 for someone with diabetes or kidney disease).
To keep your BP under control, follow these guidelines:

- Manage how much sodium (salt) you eat and drink unless your physicians say otherwise.
- Exercise on a regular basis (as approved by your physician).
- Keep a healthy weight. Lose weight as directed.
- If you drink alcohol, do so in moderation. This usually means no more than 2 drinks per day for men and 1 drink per day for women.
- Take your BP medication as prescribed.
- Follow up with your physician to have your BP checked regularly.

**Exercise regularly**

Regular exercise makes your heart and body stronger. Follow these guidelines with your physician’s approval:

- Increase your activity up to at least 30 minutes every day.
- Begin with a limited walking program, starting the day after discharge.
  - Begin slowly. Gradually increase the distance and the length of time you walk.
  - Follow the guidelines outlined by your physician.
- Talk with your physician about joining a medically supervised cardiac rehabilitation program. Contact the Northwestern Medicine Cardiac Rehabilitation program at 312.926.7883 for more information. You will need an exercise stress test before starting most programs.

**Keep 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: _______ feet ______ inches | Weight: ______ pounds | Your BMI: ______ |

- If you need to lose weight, choose a program that offers a slow, steady weight loss of no more than 1 to 1 1/2 pounds per week.
- Be sure to include regular exercise as part of your weight loss program.

**Manage your diabetes**

- If you have diabetes, check your blood glucose (blood sugar) and take your medication as ordered.
- Try to modify the risk factors you can control, such as weight, BP and cholesterol.
- For more information about diet counseling, call the Center for Integrative Medicine at 312.926.3627.

**Manage stress**

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

It is important to keep all your follow-up care appointments. Here are some topics to talk about with your physician:

- Medications
- Tests
- 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 physician has prescribed nitroglycerin (under the tongue), take it.
3. If the pain does not improve or is worse 5 minutes later, call 911 or the emergency number in your area. Seek medical attention right away.
4. If your pain is better or gone after 5 minutes, you should still call your physician.

Call your physician or 911 if you have any of the following:

- Shortness of breath
- Feeling faint or dizzy
- Very slow, very fast or irregular heartbeat
- Extreme fatigue (feeling very tired)
- Nausea or vomiting
- A cold sweat

Both you and your family should know when to call for help.

More information and resources

For more information about heart disease and heart-healthy living go to:

- American Heart Association (AHA)
  - [americanheart.org](http://americanheart.org)
  - 800.AHA.USA1 (800.242.8721), or contact your nearest AHA office
- Northwestern Medicine Bluhm Cardiovascular Institute
  - [heart.nm.org](http://heart.nm.org)