Angina and/or Heart Attack

Patient and Family Clinical Path
Patient and family teaching will be done throughout your stay regarding diet, activity, medications and coping at home after discharge. The Dietitian, Social Worker, Care Management Leader, and Clinical Nurse Educator are available for support and information during your hospitalization.

This is only a guide. Timelines may vary according to your progress.

**Day of Admission**

- you have been admitted to the Cardiac Care Unit (CCU) either from emergency or another hospital ward
- your family doctor will be informed of your admission
- you are attached to a heart monitor
- you have an intravenous (IV) in your arm for fluid and medications
- you may receive oxygen through a mask or prongs in your nose
- you may have blood tests done every 6-8 hours
- you will have one or more electrocardiograms (ECG's)
- you will have a chest x-ray either in emergency or CCU
- you may be given medications (nitroglycerine, morphine) to treat chest pain - It is important to tell your nurse if you have any chest pain - an ECG may be done and you will be given pain medications
- you may be given heparin (blood thinner) by intravenous
- you will be on bedrest if you have ongoing chest pain
- you will be started on a low fat, low salt diet
- the nurse will measure your blood pressure and listen to your heart and lungs often

*Write any questions you or your family have here*

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CCU Day 1

Before starting any of the following activities, please ask your nurse.

- blood tests and an ECG will be done in the morning
  * It is at this time that the doctors and nurses will know if you have had a heart attack or if you have unstable angina. Ask for this information.
- you may be weighed in the morning
- you may be scheduled for a procedure or test
- your nurse or doctor will explain the tests or procedure planned for you
- if you are receiving heparin (blood thinner) you will have blood tests during the day
- you will remain attached to the heart monitor
- your blood pressure and heart rate will be measured regularly
- the nurse will listen to your lungs to make sure they remain clear
- you will be given pills during the day which may be changed from the ones you take at home
- every morning the cardiologist, resident doctors and nurses make rounds - please feel free to ask any questions at that time
- you will be offered a stool softener to help prevent constipation
- be sure to let your nurse know if you have any chest discomfort or difficulty breathing

Write any questions you or your family have here

CCU Day 2

Before starting any of the following activities, please ask your nurse.

- if you had a procedure called angiogram/angioplasty done, you may be discharged today
- you will be given written information on heart attack or angina
- you may bathe yourself and eat meals in the chair
- your oxygen may be discontinued
- you maybe started on a blood thinner pill
- you may walk around your room and in the hallway as much as you wish. It is important to increase your activity before discharge so that you can see how well you tolerate it.
- be sure to let your nurse know if you develop chest pain
- if you wish further information about your medications, please ask to see the pharmacist
- please ask your nurse if you need help at home

Write any questions you or your family have here
CCU Day 3/Day of Discharge

Before starting any of the following activities, please ask your nurse.

• if you have had a heart attack you may be discharged on Day 3 or 4
• if you have unstable angina your discharge may be sooner
• please clarify activity restrictions with the medical team (doctor)
• if you have not had a heart attack you may be up walking as much as you like
• be sure to let your nurse know if you develop chest pain
• you may be transferred to the cardiology unit (CP10); you will remain under the care of the same doctors
  • you will be placed on a portable heart monitor (telemetry) in CP10
  • teaching about heart disease and management of risk factors will continue
• you may be discharged in one to two days; you should think about arranging transportation home
• ask your doctor about cardiac rehabilitation programs in your community. Cardiac rehab referral will be completed if you live within the lower mainland
• your nurse will talk to you about recovery at home, diet, medications, symptom management, risk factors and community resources
• the saline lock will be removed if you are going home
• the doctor will give you prescriptions and a note to take to your family doctor
• if you have had angioplasty, you will also receive a booklet called Going Home After Angioplasty

Write any questions you or your family have here

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Discharged

If you have any questions please talk to your doctor or nurse.

This is intended as a guideline only. Each person is an individual and responses may vary.