



CARDIAC REHABILITATION



Northeast Georgia Medical Center

Gainesville | 770-219-8290



Northeast Georgia Medical Center

Notes

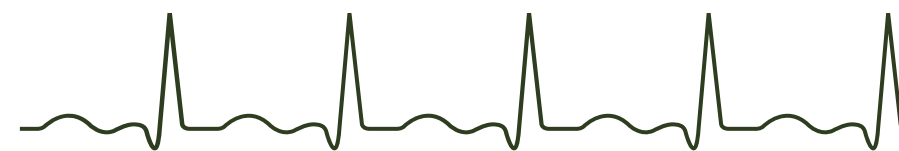
This booklet contains information that will be useful to you and your loved ones in understanding:

1. What has happened to your heart
2. What risk factors may have contributed to heart disease
3. What you can expect during your recovery

This material is designed to help you understand heart disease and learn what you can do to prevent future cardiac events.

Phase I Inpatient Educator
770-219-2939

Phase II & III Outpatient Cardiac Rehab
770-219-8290



Recovery After a Heart Attack

After being discharged from the hospital, it is generally **safe** to do the following:

- cook
- wash dishes
- laundry
- go to the store
- light office work
- shower
- short car rides
- walk

Activities to **avoid**:

- heavy cleaning
- vacuuming
- driving
- lifting over 10-15 lbs
- raking leaves
- washing the car
- mowing the grass
- pushing/pulling heavy objects

You will have a follow-up office visit scheduled with your cardiologist within 1-2 weeks after you are discharged. During this office visit, talk with your doctor about when you can increase your activity. **Your doctor may discuss the option of beginning a Phase II Cardiac Rehab program.**

When you are discharged from the hospital, it is recommended that you walk at a leisurely pace on a flat surface for 15-30 minutes once or twice per day, unless your doctor states otherwise. Suggested walking guidelines include:

- dress comfortably
- walk in the early morning or evening to avoid the hottest part of the day
- in extreme temperatures, use indoor facilities such as shopping malls or local gyms
- don't walk alone
- rest when you are tired
- walk before eating or wait one hour after eating before beginning your walk

It is important for you to pay attention to how you are progressing after your heart attack. **Call your doctor if you experience one or more of the following symptoms:**

- chest, arm, back or neck pain
- extreme fatigue or weakness
- weight gain of 3 lbs. in a 2-3 day period
- very slow, fast or irregular heart beat
- sudden shortness of breath
- dizziness
- increased swelling of feet/ankles

Nitroglycerin should be taken for chest, arm, back, neck or jaw pain that is not relieved by five minutes of rest. **Make sure you are lying down before placing this medicine under your tongue.** Place one pill under your tongue every five minutes until the pain is relieved. **DO NOT take more than three pills.** If your pain is not relieved within **15 minutes**, call 911 immediately.

Living After a Heart Attack

Depression:

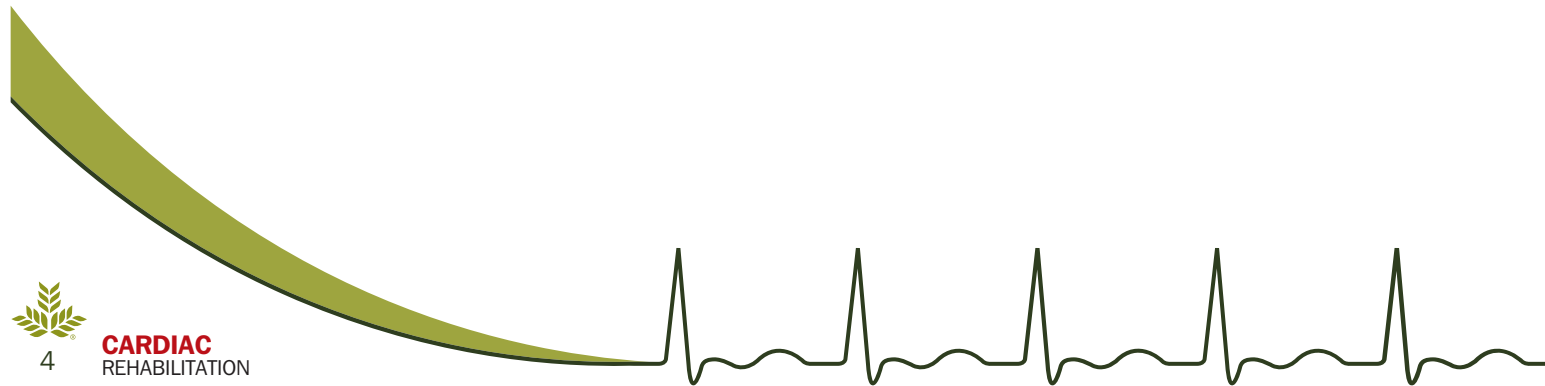
According to the American Heart Association, studies show that up to 33 percent of heart attack patients develop some degree of depression. Heart attack patients may feel a wide range of emotions, typically for about two to six months after the event. Depression is quite normal, along with fear and anger. For example, every time you feel a little pain, you may feel afraid it's going to happen again — afraid you're going to die. That's normal and should begin to pass as time goes by. You may be angry that this happened, and you're probably feeling irritated and may have a "short fuse" with others. Resentment is common after a heart attack. Try to understand that your family and friends are just as worried as you are. Although depression is normal after a heart attack, if it interferes with sleeping, eating, self-esteem, or if you have thoughts of suicide, you should talk to your doctor and those close to you about your feelings. Don't be afraid to ask for help. Recovery is much faster with a trusted support team of healthcare professionals, family and friends.

Resuming Sexual Activity:

You may be concerned about your ability to resume sexual activity. Stop worrying. There's great news—you can still enjoy sex! We hope this material will help to answer some of your questions regarding sexual activity.

In most cases, both men and women can resume sexual activity within 4-6 weeks following a heart attack. Many have sex as often as before, but some are less active. This can be a result of anxiety, depression or lack of desire. Medical care, time and counseling are all effective in resolving these issues.

Intercourse takes slightly more energy than other sexual activities. If you're not sure that you are ready for sex, your doctor can give you an exercise test to determine your physical ability. Your heart rate and blood pressure can help you and your doctor decide if you are ready. **If symptoms such as chest pain or dizziness occur during sex, you should stop and rest, then call your doctor.** For a more complete list of symptoms, see page 3.



CHOOSE TO LIVE TOBACCO-FREE

Quitting tobacco can lead to a healthier life. Live to enjoy more precious moments with loved ones.

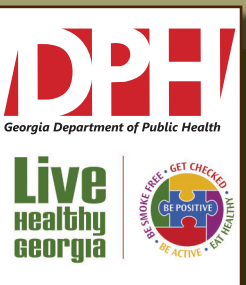


GEORGIA TOBACCO QUIT LINE

A Free and Effective Telephone Counseling Service That Helps Georgians Quit Smoking and Using Tobacco For Life

1-877-270-STOP (7867) | 1-877-2NO-FUME (Spanish)
Hearing Impaired: TTY services 1-877-777-6534
WWW.LIVEHEALTHYGEORGIA.ORG

Funding provided by the Centers for Disease Control and Prevention-Office of Smoking and Health





Northeast Georgia Mended Hearts

Chapter #302 | Gainesville, Georgia

Serving within the Ronnie Green Heart Center at Northeast Georgia Medical Center



What is Mended Hearts?

Mended Hearts is a support organization that offers help and encouragement to heart disease patients and their families. The organization is composed of heart disease patients and their spouses, health professionals and other persons who are interested in helping people deal with emotional recovery from heart disease. Mended Hearts is available in more than 260 cities across the U.S.

What would I do as a Mended Hearts member?

Mended Hearts members can serve in two ways. They can either become accredited members who visit other heart disease patients at Northeast Georgia Medical Center, via telephone or through the Internet, and/or they can become supporting members who attend monthly support/education meetings.

What if I would like to join Mended Hearts?

Anyone interested in participating in Mended Hearts is invited to attend one of the meetings, which are held monthly on the Northeast Georgia Medical Center campus and last approximately one hour.

For more information about Northeast Georgia Medical Center's Mended Hearts Program, call the Chapter at 770-219-8932.

Understanding CAD Risk Factors

What is CAD?

The build up of plaque in the arteries is called atherosclerosis. Coronary arteries are the vessels that carry blood to the heart. Atherosclerosis in these arteries is called coronary artery disease (CAD). If blood flow to the heart is blocked, a heart attack can occur.

What are CAD Risk Factors?

A risk factor is something that increases your chance of developing heart disease. Some factors cannot be changed, but most can. If you reduce the risk factors you CAN control, you may prevent a heart attack.

Controllable Risk Factors:

- Smoking
- High blood pressure
- Abnormal blood lipids
- Being overweight
- Physical Inactivity
- Stress
- Diabetes or high blood sugar levels

Uncontrollable Risk Factors:

- Age - greater than 45 years in men and greater than 55 years in women.
- Family history - father or brother diagnosed before age 55 years and mother or sister diagnosed before age 65 years.
- Gender - males are at a higher risk for CAD.

Smoking

Nicotine constricts your blood vessels, and carbon monoxide can damage their inner lining, making them more susceptible to atherosclerosis. The incidence of heart attack in women who smoke at least 20 cigarettes a day is six times that of women who've never smoked. For men who smoke, the incidence is triple that of nonsmokers. Smoking is the worst thing you can do to your heart. Find a way to quit. If you have trouble, ask your doctor for help. For information about Georgia's Tobacco Quit Line, please see page 13.

High blood pressure

Uncontrolled high blood pressure can result in hardening and thickening of your arteries, narrowing the passage through which blood can flow. High blood pressure can be controlled by losing weight, cutting back on sodium (less than 2000 mg per day), exercising regularly and managing stress. Medication may also be prescribed to help lower your blood pressure. Remember, taking medication is not a substitute for making lifestyle changes.

High blood cholesterol levels

High levels of cholesterol in your blood can increase the risk of plaque build-up and atherosclerosis. High cholesterol can be caused by a high level of low-density lipoprotein (LDL), known as “bad” cholesterol. A low level of high-density lipoprotein (HDL), known as “good” cholesterol, can also cause atherosclerosis. Triglycerides are another type of fat found in the blood. A high level of triglycerides relates to higher levels of LDL cholesterol. A diet that is rich in sugar, alcohol and fat may increase triglyceride levels. To control abnormal blood lipids, eat less total fat, saturated fat and cholesterol. It is also important to limit trans fats. Trans fats are produced in a process called hydrogenation, which hardens unsaturated oil. Products that list partially hydrogenated or hydrogenated vegetable oils in their ingredients contain trans fats.

Obesity

Being overweight makes your heart work harder. If you are overweight you are more likely to have high blood pressure and abnormal blood lipids. To lose weight, you need to burn more calories than your body needs. Regular exercise will help you burn more calories. You also can reduce the total number of calories you eat by taking smaller portions and cutting back on high-fat, high-calorie foods.

Physical Inactivity

Lack of exercise is associated with coronary artery disease and some of its risk factors. Exercise keeps the heart and arteries healthy, lowers blood pressure, relieves stress and helps people with diabetes control their blood sugar. The best exercises for the heart are aerobic exercises, such as walking, biking and swimming. It is suggested to exercise for at least 30 minutes six times per week. To prevent injuries, always warm up before and cool down after exercising. Always consult with your doctor before beginning any exercise routine.

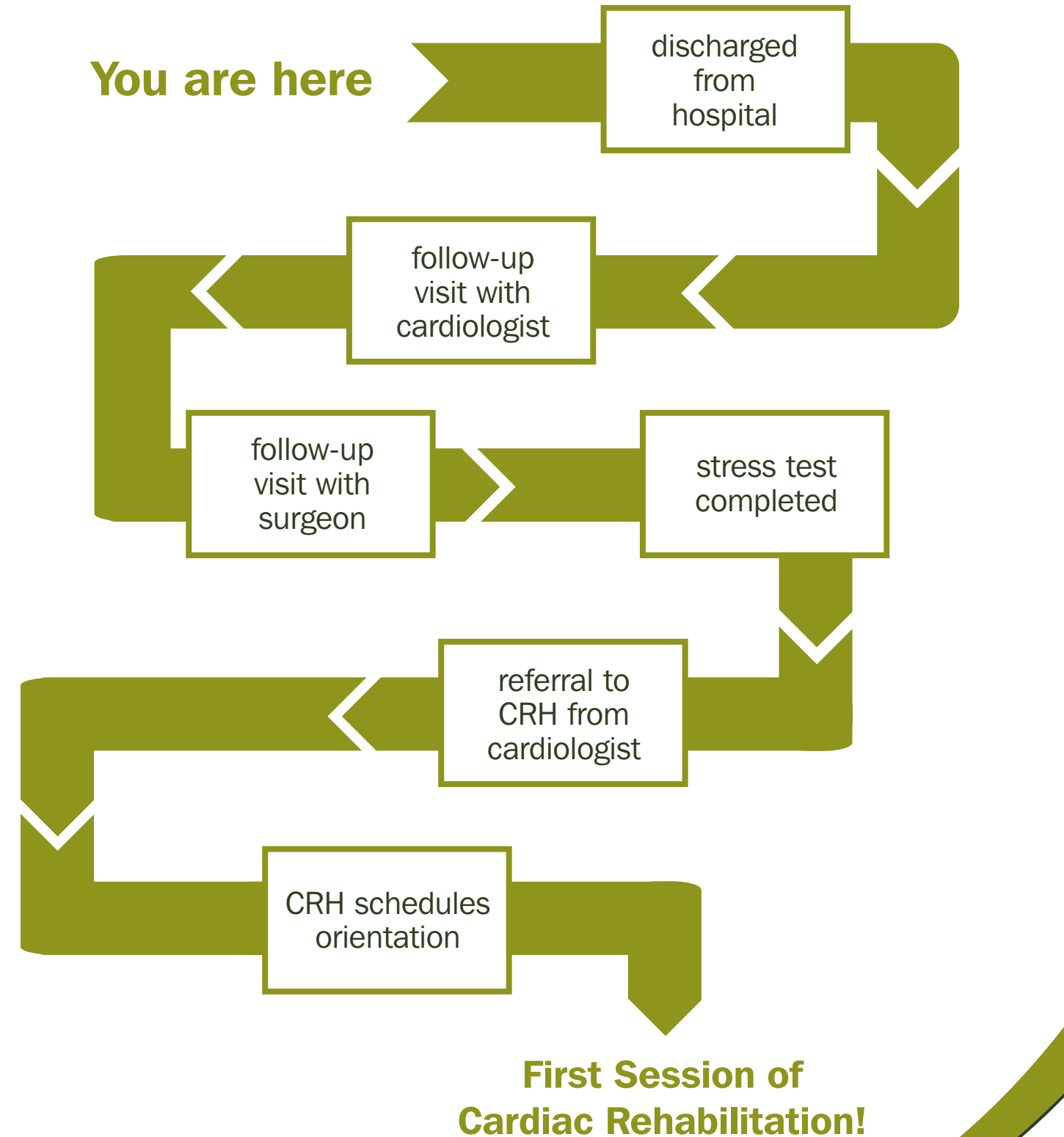
High stress

When you are under stress, your body produces chemicals that make your heart pump harder. Too much stress for a long time can raise blood pressure. There are many healthy ways to manage stress. Exercise. Meditate. Listen to relaxing tapes. Do what works for you!

Diabetes

Diabetes causes blood sugar to get too high. High blood sugar damages the arteries and increases your risk of developing cardiovascular disease. If you have diabetes, follow a meal plan, exercise regularly, maintain a healthy weight and take medication (if needed) to control your blood sugar.

What Happens Next?



Regional Options for Outpatient Cardiac Rehabilitation

Georgia

Gainesville —

- Northeast Georgia Medical Center
597 S. Enota Dr. NE
Gainesville, GA 30501
770-219-8290

Braselton —

- Braselton Cardiac Rehab
1400 River Place
Braselton, GA 30517
770.848.7190

Athens —

- Athens Regional Medical Center
706-475-5960
- St. Mary's Hospital
706-389-2915

Blairsville —

- Union General Hospital
706-439-6888

Blue Ridge —

- Fannin Regional Hospital
706-632-4253

Cumming —

- Northside-Forsyth Hospital
770-844-3639

Demorest —

- Habersham Medical Center
706-754-3113 ext:2455

Lawrenceville —

- Gwinnett Medical Center
678-312-3692

Toccoa —

- Stephens County Hospital,
706-282-4182

North Carolina

Asheville —

- Mission St. Joseph's Health System
828-213-7000

Franklin —

- Angel Medical Center
828-349-8290

Hickory —

- Catawba Valley Medical Center
828-326-2131

Highlands —

- Highlands-Cashiers Hospital
828-526-1469

Murphy —

- Murphy Medical Center
828-835-7615

South Carolina

Anderson —

- AnMed Health
864-512-1505

Rehabilitation After a Cardiac Event

The Cardiac Rehabilitation Program at Northeast Georgia Medical Center focuses on education, exercise and emotional support to improve a patient's quality of life after experiencing a cardiac event. During this program, the patient will receive a personalized treatment plan, including evaluation and instruction on physical activity, nutrition, stress management and other health related areas. Patients will learn about their own limits and how to minimize the risk of further cardiac damage.

Who is a Candidate for Cardiac Rehab?

Anyone with a history of heart disease is a prime candidate for the Cardiac Rehab program. Examples of people who could benefit are those who have had a heart attack, angioplasty, stent placement, chest pain, coronary bypass surgery, heart valve replacement, cardiomyopathy, congestive heart failure or a heart transplant.

Components of Cardiac Rehabilitation

Cardiac rehabilitation is tailored to meet the patient's individual needs and goals. The program will consist of the following:

1. **Physician prescribed exercise:** Exercise training and other therapeutic exercise including aerobic and strength training to improve the function of the heart and combat coronary artery disease.
2. **Cardiac risk factor modification:** Includes education, counseling, and behavioral intervention; related to the patient's care and tailored to his/her individual needs. It may include a combination of one or more of the following: physical activity, nutrition, lipid management, blood pressure management, smoking cessation, weight management, diabetes management and psychosocial management.
3. **Psychosocial Assessment:** Evaluation of the patient's mental and emotional functioning as it relates to his/her rehabilitation or cardiac condition.
4. **Outcomes Assessment:** Evaluation of the patient's progress from beginning to completion of the program. Our goal is to observe a drastic change in the patient's progress and overall health. This requires significant motivation and dedication from the patient.



Benefits you may experience after completing Cardiac Rehabilitation...

- Reduced risk of death from future heart problems and reduced risk of having another heart attack
- Improvement to your overall health by reducing or modifying your current risk factors for heart problems
- Improved adherence with preventive medications
- Increased exercise performance
- Improved lipid panel (total cholesterol, HDL [good cholesterol], LDL [bad cholesterol], and triglycerides)
- Increased knowledge about cardiac disease and its management
- Enhanced ability to perform activities of daily living
- Improved psychosocial symptoms (reversal of anxiety and depression, increased self-efficacy)
- Reduced hospitalizations and use of medical resources
- Enhanced quality of life, making it easier for you to resume normal activities such as returning to work, participating in social activities and exercising

Phases of Cardiac Rehabilitation

Phase I

Phase I occurs during a patient's hospital stay. During Phase I, a Cardiac Rehab staff member provides one-on-one education for the patient regarding his/her disease state. Education materials are also given to the patient. Phase I is provided free of charge.

Phase II

Phase II begins after the patient has been discharged from the hospital or upon a physician's referral. In Phase II, patients exercise three times per week following individualized programs during which the Cardiac Rehab staff continuously monitors patients' heart rates and rhythms. Additionally, Educational Seminars are offered weekly to help the patient better understand heart disease. This phase is 12 weeks based on individual needs and progress. For payment information, please see financial information section.

Phase III

Patients who have completed Phase II, or meet the entry criteria, may be referred to Phase III. This phase consists of a variety of exercises and strength training. Phase III participants exercise under the close supervision of cardiac rehab staff, who are available for advice, counseling and intervention.

Home Exercise Consultation

This will consist of a one-hour consult with an Exercise Physiologist. He/She will discuss the benefits of adhering to an exercise prescription and review the safety guidelines for your heart with you. This service is not covered by insurance. Please call for pricing.

Financial Information

Many health insurance plans will reimburse much of the cost of the Phase II program. The Cardiac Rehab staff and the Financial Counseling Department will work with the patient and the insurance company to determine the extent of coverage prior to patient participation. Please speak to the rehab staff about financial information for Phase III.

For questions, please call 770-219-8290.

