

Patient/Family Material

# Patient Guide to Heart Surgery



Winnipeg Regional Health Authority  
*Caring for Health*

Office régional de la santé de Winnipeg  
*À l'écoute de notre santé*

Prepared by WRHA Cardiac Sciences Program  
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Hôpital St-Boniface Hospital

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## INTRODUCTION

You are having heart surgery. This booklet will help you and your family learn more about what to expect before and after your heart surgery. It has facts about what your heart looks like, heart surgery and things that can cause disease in the blood vessels of your heart. It will tell you about what will happen to you in the hospital, medications you might take, exercises and foods to help you get better. This booklet has some ideas of what you and your family can do to help you get better after your surgery.

This booklet has information focused on the two most common kinds of heart surgery: coronary artery bypass graft (CABG) surgery and heart valve surgery. If you are going for a different kind of heart surgery, you may still find parts of this booklet helpful. If you or your family have any questions or need more information, please ask any member of your health care team.

This booklet is dedicated to all of our patients and their families. They have kindly allowed us to care for them at this point in their lives and from whom we have and continue to learn from each day.

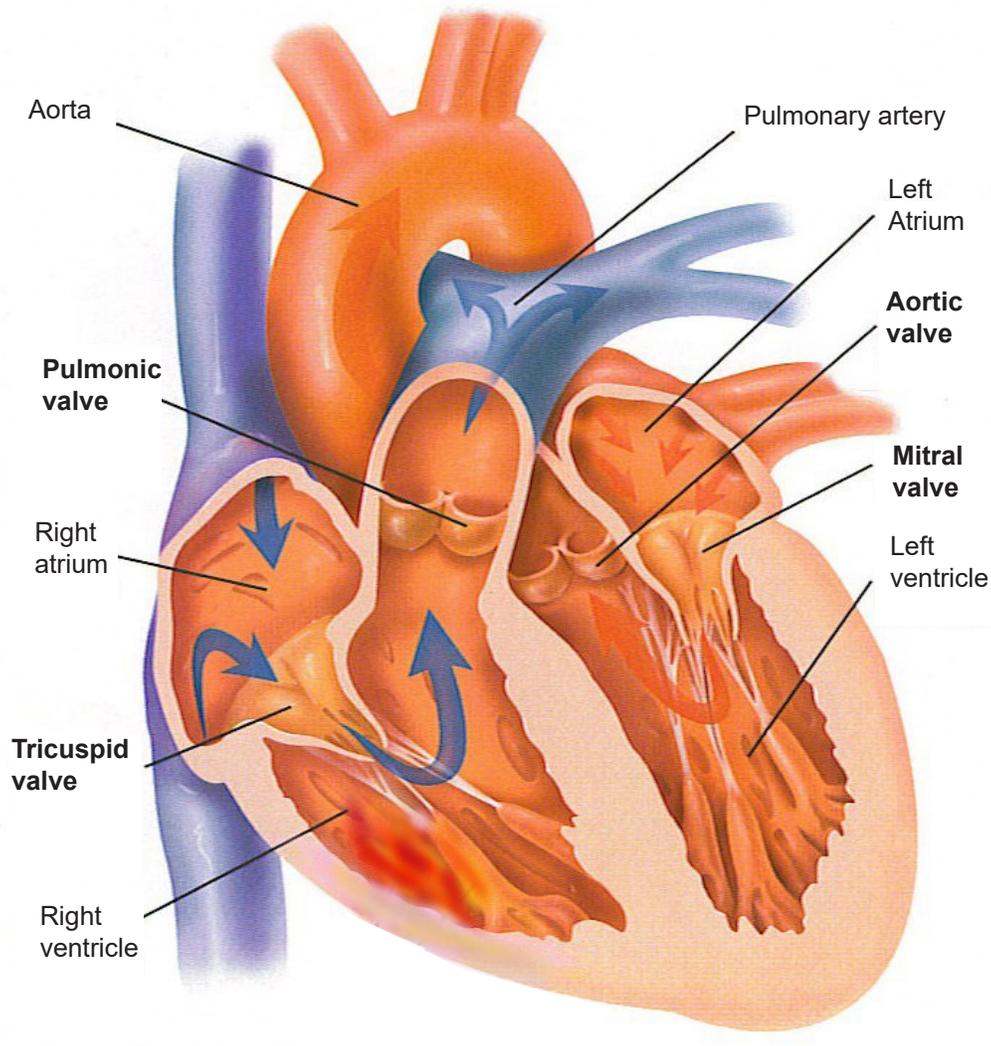
Many thanks to the staff of St. Boniface Hospital, Cardiac Sciences Program, the WRHA Cardiac Rehabilitation Program and the Heart and Stroke Foundation of Manitoba for their help with this teaching booklet.



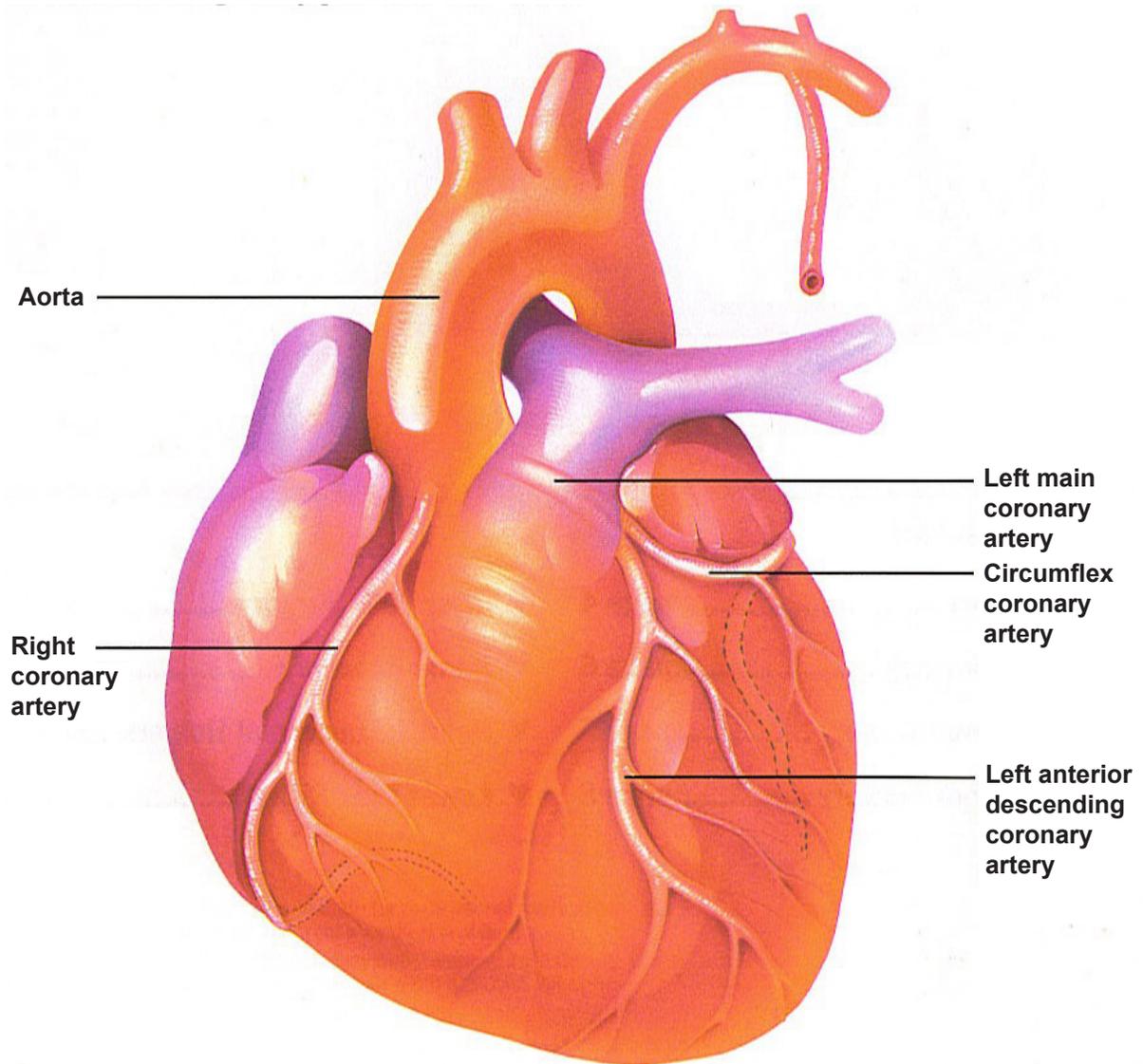
## YOUR HEART

Your heart is a muscle that pumps blood and oxygen to all parts of your body. Your heart beats between 60 and 100 beats per minute. It is about the size of your fist.

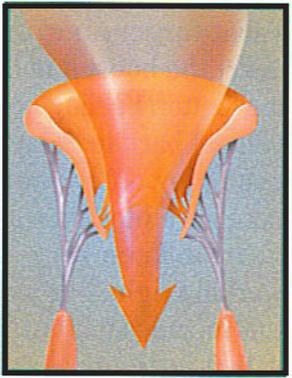
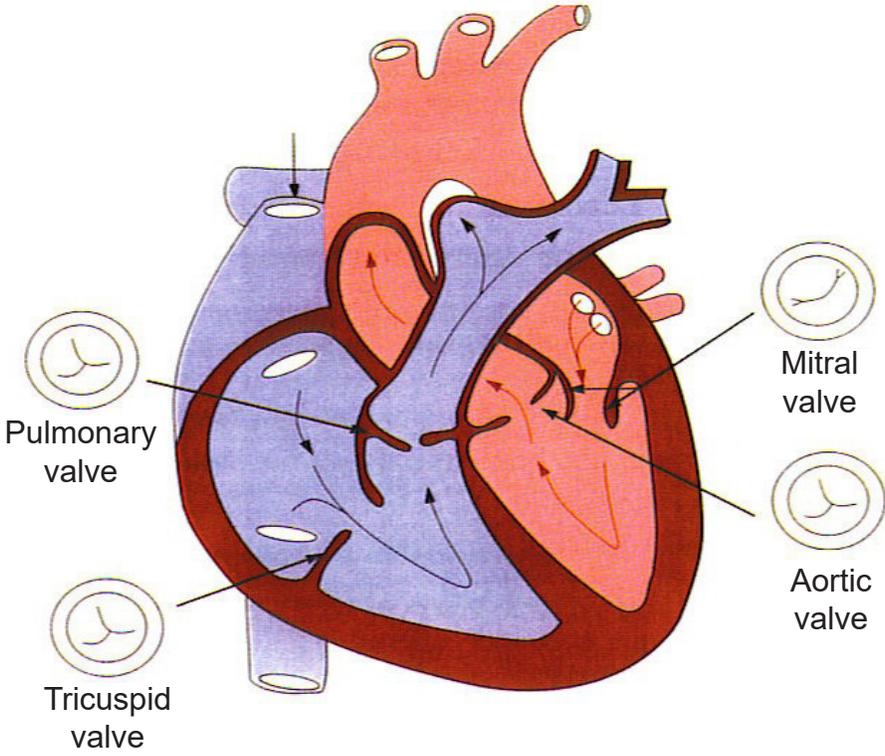
The heart is divided into two parts: the right side and the left side. Each side has 2 chambers (like rooms). The top chamber is called the atrium. The bottom chamber is called the ventricle. There are 4 valves in your heart that open and close when your heart beats.



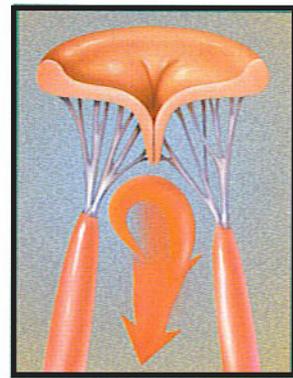
The main blood vessels of your heart are the right and left coronary arteries. These blood vessels bring blood and oxygen to your heart. This keeps your heart alive and helps it to pump blood through your body.



Your heart has 4 heart valves. They act like doors. They open and close with each heart beat. If one or more of your heart valves does not open or close right, it may need to be fixed or replaced.



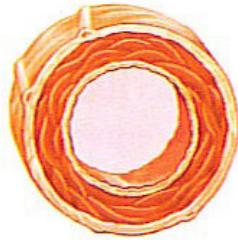
Open Valve



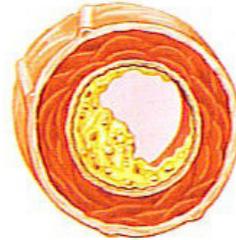
Closed Valve

## HEART DISEASE AND RISK FACTORS

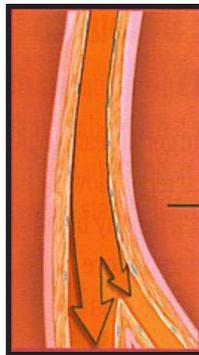
Heart Disease, also called coronary artery disease, happens when one or more blood vessels of your heart is narrowed or blocked. This is caused by a build up of fat and cholesterol in the heart arteries. It is known as atherosclerosis.



healthy artery



artery with atherosclerosis



**Blood flows smoothly** through a healthy coronary artery, bringing oxygen to your heart muscle.

— Healthy heart muscle



**Blood flow to the heart muscle stops** when a blood clot blocks a narrowed coronary artery.

— Permanently damaged heart muscle

### Risk Factors can lead to heart disease.

Risk factors you **can** change or control are:

- ♥ Smoking
- ♥ Exercise
- ♥ Eating Habits
- ♥ High Blood Pressure
- ♥ Stress
- ♥ Diabetes

Risk Factors you **cannot** change are your:

- ♥ Age
- ♥ Family history
- ♥ Gender

## **You can reduce your risk of heart disease if you:**

- **Stop Smoking**

Cigarette smoking is strongly linked with heart disease. The benefits of stopping begin right away. It is the **most powerful change** you can make. For help, talk with your Primary Health Care Provider (family doctor/nurse practitioner), Community Pharmacist or Smokers' Helpline.

- **Exercise Daily**

Daily exercise helps your heart. It can help control your weight, decrease your cholesterol level and make you feel better. Choose an exercise you enjoy. Talk to your family doctor/nurse practitioner or physiotherapist about joining a cardiac rehabilitation program.

- **Eat Healthy**

See Appendix C: Nutritional Guidelines (page 32) for more information.

- **Take your Medications** as ordered by your doctor.

- **Manage Your Stress**

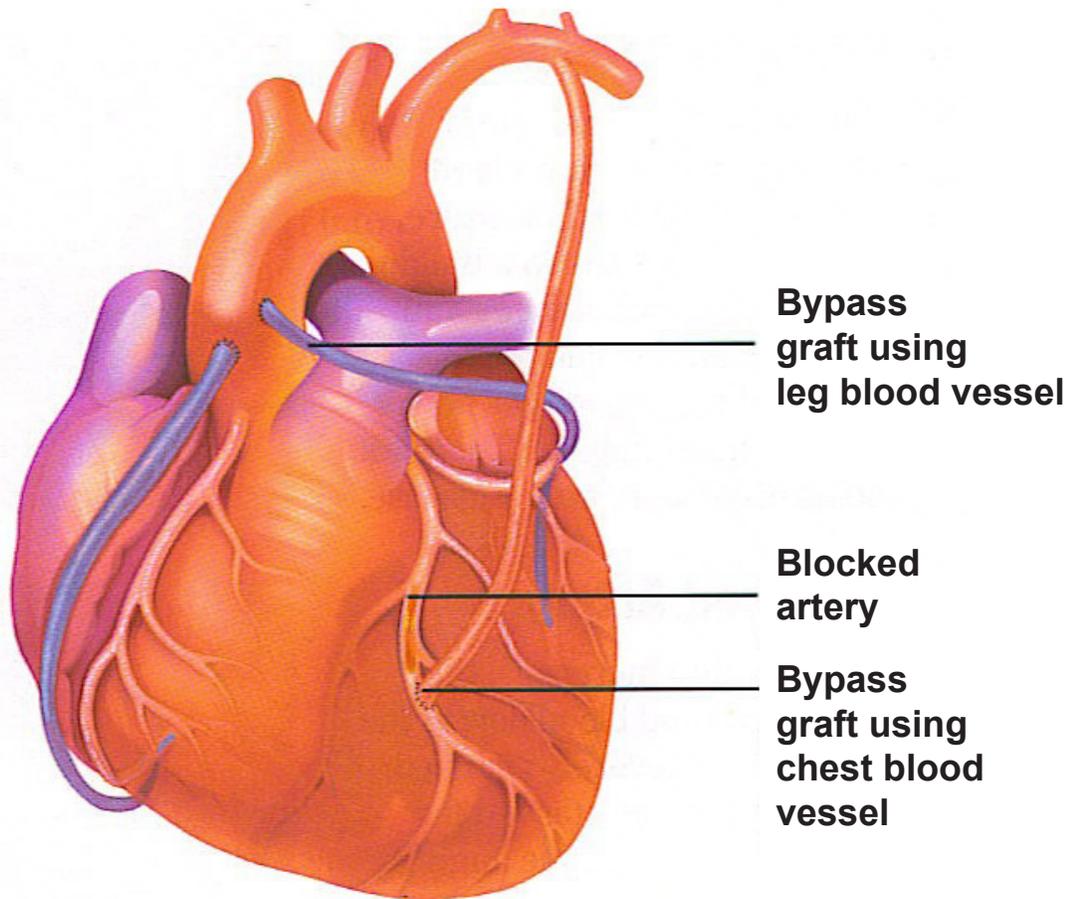
Understanding and dealing with stress can help keep your heart healthy. Take time to relax. Try relaxation exercises (page 15). Ask for support from your family and friends. Contact the Heart and Stroke Foundation to learn more about how to handle your stress better. Ask your Primary Health Care Provider for help if your stress is too much to handle.

- **Manage your Diabetes**

Adults who have diabetes are at a greater risk for heart disease. If you have diabetes, work with your Primary Health Care Provider to control your condition.

## CORONARY ARTERY BYPASS GRAFT (CABG)

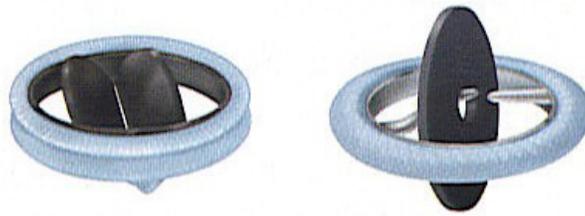
This surgery allows blood to flow to your heart where blood flow is decreased. A bridge is made for your blood to bypass a narrowed or blocked artery. A blood vessel from your leg, your chest or your arm is used to make this bridge. You may need more than one bypass.



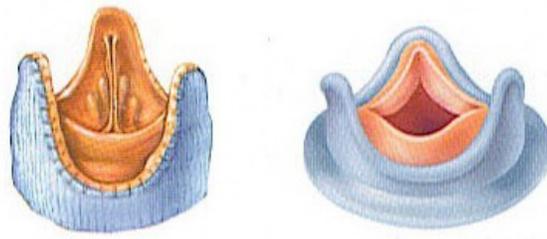
The heart - lung (bypass) machine may be used during your surgery. It is used to pump blood while your surgeon is working on your heart.

## VALVE SURGERY

The heart valves are like one-way doors. They open and close with each heart beat. If the valves are not working right they may need to be fixed or replaced. There are different types of valves used for a valve replacement (mechanical or tissue). You and your surgeon need to discuss what type of valve is right for you.



Mechanical Valve



Tissue (Biological) Valve

The heart - lung (bypass) machine may be used during your surgery. It is used to pump blood while your surgeon is working on your heart.

## WHAT TO EXPECT BEFORE YOUR SURGERY

### Waiting For Your Surgery

While you are waiting for your heart surgery, here are some ideas to help you get ready:

- **Eat Well**  
Eat a variety of healthy foods each day, even if you are not very hungry. Your body needs the vitamins and proteins to help you heal after your surgery.
- **Rest and Exercise**  
DO NOT let yourself get too tired before your surgery. Avoid exercises that cause pain or shortness of breath. Exercise helps you to relax and strengthens your muscles. Plan some quiet time 2 to 3 times each day.
- **Stop Smoking**  
Smoking raises your blood pressure. It makes the blood vessels of your heart smaller and makes your heart work harder. Please seek help to stop smoking from your Primary Health Care Provider, Community Pharmacist or Smokers' Helpline.
- **Emotions**  
Waiting for your surgery and recovering from it can be stressful. You may feel worried, frustrated or sad. Many people are nervous about having surgery. It is common to wonder whether you can handle all the changes you will be asked to make. These concerns are normal. Relaxation exercises (page 15) can help you deal with these emotions.

What you have to watch out for is if these concerns make it difficult for you to:

- do or enjoy your daily activities
- be around people
- get to or stay asleep
- concentrate **or**
- do not seem to get better over time

When this happens, talk to your family, friends or any member of your health care team. You can learn more on how people cope with heart surgery and heart disease from the Cardiac Psychology Service at St. Boniface Hospital.

## Preparing for Your Surgery

- You may have an appointment at the Cardiac Pre-Assessment Clinic before your surgery. Some of the people you may meet at the hospital are: nurses, nurse practitioners, and anaesthetist (sleep doctor).
- Tests will be done such as ECG (heart tracing), chest x-ray, blood and urine tests. Other tests may be done that your surgeon thinks are necessary. Please bring all your medications with you to the hospital. This includes vitamins, herbs and any other medications you are taking.
- You will watch a video called “Your Heart Your Health: A Patient’s Guide to Heart Surgery”. The video does NOT show the surgery, but lets you see what to expect before and after your surgery. You can also watch this video on the website: [www.umanitoba.ca/medicine/units/cardiac\\_sciences/](http://www.umanitoba.ca/medicine/units/cardiac_sciences/) under the ‘For the Public’ tab.
- You will be given soap sponges to clean your body before your surgery. Your nurse will instruct you how to use these soap sponges.
- You will be admitted to the hospital **either** the day before or the day of your surgery.
- A health care aide will use a clipper to remove hair from your chest and legs. **Do not** shave this hair yourself.
- **Do not** drink or eat anything after midnight the night before your surgery unless you are told differently when seen in the Cardiac Pre-Assessment Clinic or in hospital.
- Bring toothbrush, toothpaste, and denture care items (as needed).
- You will be told which pills you need to take before your surgery. Take these pills with a sip of water the morning of your surgery.
- Leave your jewellery and money with family or at home. Your other belongings will be locked up safely on the Cardiac Surgery In-patient Unit.
- Bring slippers with a non-slip sole for after your surgery.
- Your family can wait in the Waiting Room of the Operating Room (O.R.).

## Planning Ahead for Going Home

You can expect to stay in the hospital for about 4 to 5 days after a CABG. For valve surgery, your stay will be **about** 6 to 7 days.

- **Before you come to the hospital, you should make plans with your family and friends to have someone help you at home after your surgery**

You will need help to:

- prepare meals
- shop
- house clean
- do laundry
- shovel snow
- mow your lawn.

You can go home by car, plane, bus or train. Remember, you cannot drive for 4 to 6 weeks after your surgery. You will need someone to drive you on errands or for your appointments.

You should arrange to either stay with someone or have someone stay with you for your first few days at home.

You may want to get information about LIFELINE (a response service that lets you get help any time of the day or night). See page 26.

**If you have any questions or concerns about going home, let your health care team know as soon as possible.**



## WHAT TO EXPECT AFTER YOUR SURGERY

Your surgery will last 3 to 5 hours. You will be moved to the Intensive Care Cardiac Sciences (ICCS) Unit. You will be monitored at all times. When you wake up, you will hear noises from the machines around you. You may not be able to talk, because of a tube in your throat to help you breathe. When the tube is out, you can speak again. Other tubes and machines that may be used are:

- ♥ intravenous (IV) lines in your arms and neck
- ♥ a tube into your bladder to drain your urine
- ♥ tubes into your chest to drain fluid from around your heart and lungs
- ♥ pacemaker wires
- ♥ heart monitor

In ICCS, only family or close friends can visit you – two people at a time for short visits.

Your stay here is usually from 6 to 24 hours.

### Moving to the Ward

After your stay in ICCS, you will be moved to the Cardiac Surgery Inpatient Unit.

At this time, you will be kept on a heart monitor and have your remaining tubes removed.

### Pain

You will feel some pain around your incisions (cuts) on your chest, arm or leg. Your shoulders and back may be sore too. Your nurse will check with you to see how much pain you are having. Pain medication will be given to you as often as you need it. **Do not try to stand the pain.** Ask your nurse for pain medication when you feel your pain getting worse and before you walk. Tell your nurse if your pain medication **is not** working for you.

It is better to take your pain medicine regularly for 3 to 4 days. This will make it less painful for you to move around and do your exercises.

### Breathing Exercises

You will learn how to deep breathe and cough to keep your lungs clear. Squeeze your pillow over your chest when coughing. This helps to relieve your pain. You should do your breathing exercises at least every hour when you are awake.

## **Getting Out of and Into Bed**

You will be helped to learn how to get out of and into bed using the “log rolling” method.

### **Getting Out of Bed**

- ♥ Cross your arms over your chest. **DO NOT** pull on bedrails.
- ♥ Roll onto your side (facing the side you will get out on).
- ♥ Stay on your side – put both legs over the side of the bed.
- ♥ Steady yourself by putting your top hand onto the mattress in front of your chest.
- ♥ Push into the bed with your bottom elbow and top hand to sit up.

### **Getting Into Bed**

- ♥ Sit on the side of the bed.
- ♥ Lean down on your elbow and shoulder closest to the head of the bed. Put your opposite hand on the mattress to steady yourself.
- ♥ Stay on your side as you bring both legs up onto the bed and roll onto your back.
- ♥ While on your back, bend your knees. Dig your heels into the mattress to lift your bottom off the mattress. Now move yourself into a comfortable position.

## **Moving and Walking**

Starting the day after your surgery, you will sit up in a chair for your meals. You will be helped to walk at least 3 times each day. You may need help to walk until you are strong enough to do it on your own. Try to increase the distance you walk a little each time. Walking helps you heal faster by improving the blood flow to your heart, lungs, bowels and muscles.

Please wear shoes or slippers with non-slip soles when you are out of bed.

## **Arm and Leg Exercises**

Do your arm and leg exercises as shown in Appendix A: Home Exercise and Education (page 28). The physiotherapist will talk to you about exercises and activities that you can safely do.

## **Mouth Care**

Brushing your teeth or cleaning your dentures and mouth two times a day can cut down on your risk of infection. If you are on a blood thinner, use a soft toothbrush.

## **Diet**

When you can begin to eat and drink, you will be given ice chips, liquids and then a heart healthy diet.

## **Appetite**

At first, you may not feel like eating. This is normal. Your loss of appetite may last for 2 to 3 weeks.

## **Constipation**

This is a common problem after surgery. You should drink 6 to 8 glasses of fluids each day unless you are told not to.

Eat a high fiber diet, refer to Appendix C: Nutritional Guidelines (page 32). Walking helps keep your bowels regular.

You may be given a suppository a few days after surgery, if your bowels have not moved.

## **Leg Swelling**

Your ankle and/or leg may be swollen. If a vein was taken from your leg, the swelling may last for up to 12 weeks.

To help decrease your swelling:

- ♥ Do your exercises and keep walking
- ♥ Raise your legs on pillows or a foot stool when you are lying down or sitting
- ♥ Do not cross your legs
- ♥ Avoid wearing tight clothing

## **Energy and Sleeping**

It is normal to feel tired and weak. You may have trouble sleeping. It may take many weeks to feel like yourself again. Stay active but make time to rest. Walking is the best exercise to keep up your energy and strength.

## **Relaxation Exercises to Manage Stress**

Feeling anxious or scared before and after your surgery is common. Learning to relax your mind and body will help you get better.

Controlled breathing is one of the best relaxation exercises to do. By focusing on your breathing, you will stop focusing on other things. You need to practice this before your surgery. Once you have learned the exercise, you can use it all the time.

To practice controlled breathing:

- ♥ Find a quiet place where you will not be disturbed.
- ♥ Choose a comfortable position.
- ♥ Close your eyes and think of yourself in a place where you feel safe and secure.
- ♥ Breathe in slow and easy – through your nose to the count of 4. Hold for a few seconds and breathe out through your mouth to the count of 6.
- ♥ As you breathe out, let your muscles relax.
- ♥ Repeat 6 to 10 times.

## THE DAY YOU LEAVE THE HOSPITAL

Your surgeon will order your discharge. It is important that you let your family know of your discharge ahead of time. You can go home by car, plane, bus or train. Remember, **you cannot drive for 4 to 6 weeks.**

You will receive:

- ♥ A Cardiac Surgery Discharge form.
- ♥ Prescriptions for your medications.
- ♥ A Discharge Information Package for your family doctor/nurse practitioner.
- ♥ If you have diabetes, you will be given more information.
- ♥ If you go home on Warfarin, you will watch a video and be given more information.

When you see your Primary Health Care Provider or Cardiologist (heart doctor) after your surgery, take this printed information with you.

### **Please report to the Emergency Department if you have any of these problems:**

- ♥ A rapid pounding heart (palpitations).
- ♥ Chest pain (angina) just like the kind you had before your surgery.
- ♥ Breathing that becomes more difficult and painful even after taking your pain medication.
- ♥ Increased swelling and pain in your lower legs.

### **Please call your Primary Health Care Provider or the Cardiac Surgery Post-Operative Clinic if you have any of these problems:**

- ♥ Chills or fever (38°C or 100°F by mouth).
- ♥ Pain that is not helped by your pain pills.
- ♥ Redness, warmth, swelling of your incision(s).
- ♥ Yellow/green drainage from your incision(s).
- ♥ Swelling of your feet or ankles that gets worse over 2 days or remains the same after 8 weeks.
- ♥ Sudden weight gain or you gain more than 5 pounds (2.5 kg) in 5 days.
- ♥ Black or tarry looking stool or rectal bleeding, especially if you are on Warfarin®.
- ♥ Burning pain when you pass your water.

**If you have any of the above problems and cannot reach your family doctor/nurse practitioner, report to the Emergency Department.**

## SPECIAL INSTRUCTIONS AFTER VALVE SURGERY

Bacteria can enter your blood stream during procedures like dental work and examinations of your bladder or colon. These bacteria can then stick onto your new heart valve.

If you have a new heart valve, check your temperature if you:

- ♥ feel hot (feverish)
- ♥ feel not well
- ♥ have the shakes or chills
- ♥ have night sweats

Call your family doctor/nurse practitioner or the Cardiac Surgery Post-Operative Clinic if you think you have an infection such as, a cough or sore throat that lasts 2 to 3 days, wound infection, or if you have a fever.

When making **ANY** appointment with your health care provider (e.g. doctor, dentist, dental hygienist) you **MUST** tell the secretary that you have had valve surgery. **Tell the doctor or dental hygienist, before any procedure, that you have had a heart valve replaced.** You may be given an antibiotic pill before your procedure to prevent infection.

If you have a mechanical valve, you will need to take a pill to thin your blood for the **rest of your life**. This pill is called Warfarin (Coumadin®). Patients who have had tissue valves are sometimes put on Warfarin for 3 months. Your surgeon will decide if this is needed.

You will need frequent blood tests (INR) to help your family doctor/nurse practitioner prescribe the correct amount of Warfarin.

You should wear a MedicAlert bracelet or necklace. This will let people know you have had valve surgery and if you are taking Warfarin. You will be given a card to carry with you that has the information about your new valve.

## GOING HOME

### Rest and Sleep

Getting enough rest is important. For your first week or two at home, rest for about an hour in the morning and afternoon. As you get better, you will need less time to rest.

You should take your pain pills every 4 to 5 hours as needed. It is best to take your pain pills before rest periods or any physical activity. Everyone's pain is different. You may need to take your pain pills only for a few days up to a few weeks.

Sleep problems are common for 1 to 6 months after surgery. You may:

- ♥ have trouble getting to sleep
- ♥ have trouble staying asleep
- ♥ have nightmares
- ♥ sleep a lot

To help you sleep, try:

- ♥ Going to bed at the same time each night and getting up at the same time every morning.
- ♥ Rest only ½ to 1 hour once or twice a day.
- ♥ Do not sleep during the day.
- ♥ Walk/exercise every day in the morning and afternoon.
- ♥ Take something for pain before you go to bed for the first 1 to 2 weeks.
- ♥ If you cannot sleep, get out of bed and read a book or listen to music.
- ♥ Do not drink alcohol just before bed.
- ♥ Do not eat or drink things with caffeine (e.g. coffee, tea, cola, chocolate) later in the day.

### Hygiene and Incision(s) Care

You can shower every day with warm water and mild soap. **Do not** have a tub bath for 4 to 6 weeks if you have a full **leg** incision. Gently wash your incision(s) and rinse them well. **Do not** scrub them. Pat your incision(s) dry with a towel.

Your incision may be itchy. Put a cool wet facecloth on the incision to decrease any itchy feeling. You can use any unscented skin lotion, if you find your incision feeling tight and dry.

**Care of your incision(s) means:**

- ♥ Leave the incision(s) uncovered. If it is draining, cover it with a loose, clean dressing. Change it when it gets wet. A home care nurse may come to your home to do this.
- ♥ If steri-strip bandages (small tapes) were put on your incision(s) - these can be soaked off with warm water after 7 days. Sometimes they will fall off sooner. This is okay.
- ♥ Many women find that there is pulling on their chest incision. Wearing a loose-fitting or sports bra may help. You need to start wearing your bra 2 to 3 days after your surgery.
- ♥ An infection can happen days or weeks after your surgery. You should look at your incision(s) every day and check for signs of infection. Please call your family doctor/nurse practitioner or the Cardiac Surgery Post-Operative Clinic if you have any signs of:
  - ♥ Redness, warmth or swelling of your incision(s)
  - ♥ Yellow or green drainage from your incision(s)
  - ♥ Pain that is not helped by your pain pills
  - ♥ Chills or fever (38°C or 100°F by mouth)

**If you have any of the above problems and cannot reach your family doctor/nurse practitioner, report to the Emergency Department.**

## **Leg Swelling**

For the first few months after your surgery, your leg with the incision may be swollen. This is normal especially at your foot and ankle. Remember to:

- ♥ Keep your legs uncrossed.
- ♥ Keep your legs and feet up when you are sitting or lying. Raise your legs on pillows or use the arm rest on the couch when lying down.
- ♥ Do your leg and ankle exercises.
- ♥ Walk.
- ♥ Avoid wearing tight clothing.

## **Constipation**

Constipation may happen 1 to 2 weeks after surgery. Straining can be hard on your healing breastbone and on your heart. To relieve constipation:

- ♥ Be active - walk and do your exercises.
- ♥ Eat high fibre foods. Refer to Appendix C (page 34).
- ♥ Drink lots of fluids especially water unless you have been told not to.

## **Memory and Concentration**

You might find that you are forgetful and have trouble concentrating after your surgery. This is normal. It should get better over the next 6 months.

## **Sexual Activity**

Sexual activity will not hurt your heart. You may not feel like having sex soon after your surgery. Remember to:

- ♥ Make sure you are rested and relaxed.
- ♥ Give yourself the time you need.
- ♥ Wait at least 1 hour after a meal or exercise.
- ♥ DO NOT support your body weight on your arms for the first 8 weeks.
- ♥ You and your partner may need to try different positions.
- ♥ Check with your family doctor/nurse practitioner or pharmacist before restarting any medications related to your sexual activity.

## **Taking Your Pulse**

Learn to take your pulse (page 28). You should check it before and after you exercise, before taking your heart medication and/or if you feel your heart racing. If you had your blood vessel in your arm used for a bypass graft, you will not feel a pulse in that arm.

## **Tingling or Numb Fingers**

Your ring and little fingers may feel numb and tingle. This can happen if your arm nerves were stretched during surgery. Normal feeling should return in about 4 months.

## **Driving**

Do not drive for at least 4 to 6 weeks after your surgery. This is because:

- ♥ You are **not** insured to drive for this time frame.
- ♥ Your co-ordination, concentration and reaction time are slower. This means you are at greater risk of having an accident.
- ♥ As a driver, you may have to stop suddenly to avoid an accident. This means you could inflate the air bag or hit the steering wheel. This will hurt your healing breastbone.
- ♥ It is safer to have someone drive you until you are fully healed.

**Always** wear your seatbelt. Put a small pillow over your breastbone before doing up your seatbelt. This will be more comfortable for you.

## **Travelling**

Some points to remember about travelling.

- ♥ You can travel right away once you have been discharged from the hospital. Many patients from Manitoba travel home by commercial airlines.
- ♥ You should get up and walk around at least every hour on plane rides.
- ♥ You should stop the car and walk around at least each hour.

## **Returning to Work**

You can usually go back to work 2 to 3 months after your surgery. This will depend on:

- ♥ your doctor's/nurse practitioner's opinion
- ♥ the type of work you do
- ♥ how your recovery has been

You may think about retiring, quitting or getting a new job while you are recovering at home. It is best to make a decision like this when you are fully recovered. Talk it over with your family and family doctor/nurse practitioner. If your job is taking care of your family, your home or yard, the 2 to 3 month rule off work also applies.

## **Cardiac Rehabilitation (Cardiac Rehab)**

Cardiac rehab will help you heal after your surgery. The program is open to anyone with heart disease. It will help you to:

- ♥ reduce your risk of further heart disease and live longer
- ♥ heal faster with fewer symptoms
- ♥ resume activities important to you such as work or your hobbies
- ♥ give you more energy to spend with family and friends
- ♥ learn a safe level of activity for you
- ♥ increase your muscle strength and movement with exercise
- ♥ improve your diet, lifestyle and health
- ♥ increase your confidence and desire to be healthy
- ♥ deal with any feelings of sadness and fears you might have

The program has teaching and supervised exercise sessions. You will be involved with your health care team in making your own program that fits your needs. Your health care team may include nurses, doctors, physiotherapists, dieticians, social workers, psychologists and exercise consultants. A report on your progress will be sent to your Primary Health Care Provider. You can bring a family member or a friend with you to the sessions.

Cardiac rehab will help reduce your risk factors for heart disease by helping you to:

- ♥ become more active
- ♥ stop smoking
- ♥ lose weight
- ♥ lower your cholesterol
- ♥ control your blood pressure
- ♥ control your diabetes
- ♥ reduce your stress

For further information, please ask your health care team or call the cardiac rehab program at Wellness Institute (204-632-3907) or Reh-Fit Centre (204-488-8023).

## MEDICATIONS



Before going home, you will be given prescriptions for the medications your surgeon wants you to take. These **MAY NOT** be the same medications you took before your surgery. You will need to make an appointment to see your Primary Health Care Provider 5 to 10 days after your discharge. You will be given a Discharge Information Package to bring to your family doctor/nurse practitioner. Your Primary Health Care Provider is responsible for renewing any medications you need.

The pharmacist or nurse will explain the medications to you before you go home. Feel free to ask any questions you may have. It is important for you to know why you need to take these medications and which medications have been changed or stopped. After you go home, check with your community pharmacist or Primary Health Care Provider if you have any questions about your medications.

### Important Rules

- ♥ Keep a current list of **all** the medications you take with you at all times. The medication name, the dose, the time you take it and the reason for taking it should be on this list.
- ♥ Take your medications as told to you by your Primary Health Care Provider. Never increase, decrease, or stop taking your medications on your own.
- ♥ Pick a certain time of day to take each of your medications. Always try to take your medications at the same time each day.
- ♥ If you forget to take a medication, **DO NOT** take 2 doses at one time. Skip the pill you missed and get back to your normal routine. If you are unsure, check with your community pharmacist.
- ♥ If you have trouble remembering to take your medications or have a large number of medications, you may want to use a pill organizer or get your medication “bubble packed”. Talk to your pharmacist to find out more.
- ♥ Always check with your pharmacist before you begin any new medications, even medications you buy “over-the-counter” such as, cough and cold medications, antacids and herbal medicines. Certain medications can cause problems when given with other medications.

## Medications Often Prescribed

### **Blood Thinners - Enteric Coated ASA** (Aspirin®, Entrophen®)

This blood thinner medication helps keep clots from forming in your blood vessels. It is used to prevent heart attacks and strokes. It can upset the stomach, so you should take it with food. Most people who take ASA need to take it lifelong.

### **Heart Protection Medications - ‘Beta’ Blockers** (Metoprolol®, Atenolol®, Carvedilol®)

These medications slow your pulse and helps lessen the workload of your heart. These medications can lower blood pressure and protect you from an abnormal heart rhythm. They may make you feel tired at first but as you recover from your surgery, this should get better. Most people who take a beta blocker need to take it lifelong.

### **Blood Pressure Medications - ACE Inhibitors** (Enalapril®, Ramipril®, Perindopril®) and **ARBs** (Candesartan®, Irbestartan®, Valsartan®)

These medications lower your blood pressure and lessen the workload of your heart. It prevents stroke. Since these medications lower your blood pressure, you may feel dizzy if you stand up too quickly. If you are sitting or lying, stand up slowly. Most people who take an ACE Inhibitor or ARB, need to take it lifelong.

### **Cholesterol Lowering Medications – Statins** (Atorvastatin®, Rosuvastatin®, Simvastatin®)

These medications lower the amount of “bad” cholesterol in your blood. This prevents new blockages from forming in your blood vessels and keeps existing blockages from getting worse. Most of these medications work best if taken in the evening. These medications may be ordered after heart surgery even if your cholesterol is normal. Most people who take a statin need to take it lifelong.

### **Water Pills – Furosemide** (Lasix®)

This medication is a water pill to help get rid of extra fluid in your body. It will make you pass your water more often. Always take this pill in the morning. If prescribed twice daily, take the second dose in mid-afternoon.

### **Potassium Replacement** (Slow-K®)

This medication is used to keep your potassium level normal. People on water pills often have low potassium. Low potassium levels can be fixed by taking this medication. Eating foods high in potassium, such as bananas, oranges, kiwis, dried fruit (dates, prunes) can help. This medication can upset your stomach, so take it with food.

### **Stool Softener – Docusate** (Colace®)

This medication is a stool softener. It helps prevent constipation and makes it easier to pass stool without straining. You can buy stool softeners from a pharmacy without a prescription if needed.

**Pain Medications – Acetaminophen** (Tylenol®), Acetaminophen with Codeine (Tylenol #3®)

This pain medication will not interfere with your heart medications. You may be prescribed acetaminophen with or without codeine. If you have been prescribed a pain medication, take it only as directed and never take more than you are told.

Note: many “over the counter” medications such as cough and cold products may contain acetaminophen. Check the label or ask your pharmacist which products are safe for you.

**Warfarin** (Coumadin®)

This medication is also a blood thinner. It helps stop blood clots from forming and works differently than Aspirin. It is prescribed for you if you have a mechanical heart valve or an irregular heart beat. The main side effect is an increased chance of bleeding. You will bruise more easily than you did before.

Note: If Warfarin is prescribed, you will be given more information and will watch a video to teach you more.

## COMMUNITY RESOURCES

Canadian Diabetes Association  
Phone: 204-925-3800  
Website: [www.diabetes.ca](http://www.diabetes.ca)

Cardiac Psychology Service  
St. Boniface Hospital  
Phone: 204-237-2979

WRHA Cardiac Sciences Program  
St. Boniface Hospital  
Website: [www.umanitoba.ca/medicine/units/cardiac\\_sciences/](http://www.umanitoba.ca/medicine/units/cardiac_sciences/)

Cardiac Surgery Inpatient Unit  
St. Boniface Hospital  
Phone: 204-237-2801

Cardiac Pre-Assessment Clinic  
Cardiac Surgery Post-Operative Clinic  
St. Boniface Hospital  
Phone: 204-258-1258

Health Links  
Telephone service with nurses to answers questions any time of the day or night  
Phone: 204-788-8200  
Toll Free: 1-888-315-9257  
Website: [www.rha-central.mb.ca/healthlinks.php](http://www.rha-central.mb.ca/healthlinks.php)

Heart & Stroke Foundation of Manitoba  
Phone: 204-949-2000  
Toll Free: 1-888-473-4636  
Website: [www.heartandstroke.mb.ca](http://www.heartandstroke.mb.ca)

Lifeline (Victoria General Hospital)  
Response service that lets you get help any time of the day or night.  
Phone: 204-477-3447  
Website: [www.vgh.mb.ca/lifeline/](http://www.vgh.mb.ca/lifeline/)

Manitoba Lung Association  
Phone: 204-774-5501  
Toll Free: 1-888-566-5864  
Website: [www.mb.lung.ca](http://www.mb.lung.ca)

Smokers' Helpline (Manitoba)  
Toll Free: 1-877-513-5333  
Website: [www.smokershelpline.ca](http://www.smokershelpline.ca)

Reh-Fit Centre  
Phone: 204-488-8023  
Website: [www.reh-fit.com](http://www.reh-fit.com)

Wellness Institute  
Phone: 204-632-3907  
Website: [www.wellnessinstitute.ca](http://www.wellnessinstitute.ca)

Brandon Heart Program  
Phone: 204-578-4225 or 204-578-4204

Thunder Bay Cardiac Education and Rehabilitation Program  
Phone: 807-684-6780  
Website: [www.tbh.net](http://www.tbh.net)

Mayo Clinic Heart Oasis  
Website: [www.mayohealth.org](http://www.mayohealth.org)

Dieticians of Canada  
Website: [www.dieticians.ca](http://www.dieticians.ca)

## APPENDIX A

### HOME EXERCISES AND EDUCATION

These exercises will help you feel better. They are breathing exercises and gentle stretching exercises. Sit in a chair when you do these exercises.

Do each exercise 3 to 5 times in a row, once or twice daily for at least 3 weeks after you go home.

1. Take your pulse. (Is it regular or irregular?)

**If it is regular**, count the number of beats in 15 seconds and multiply by 4 to find your heart rate for 1 minute.

**If it is irregular**, count the number of beats for 1 minute.



2. Put your hands on your belly. Take a deep breath in then breathe out.



3. With your arms relaxed at your sides, move your shoulders up to your ears and slowly count OUT LOUD to 3. Then slowly lower your shoulders and relax for 3 to 5 seconds before repeating the exercise.



4. Put your fingertips on your shoulders, and then slowly circle your elbows back, up, forward and down.



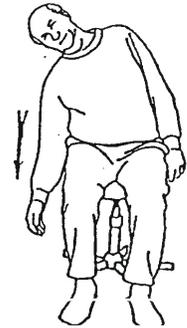
5. Cross arms in front of your chest. Face forward, breathe in. Turn your **head and shoulders** to the right and breathe out. Repeat this exercise while turning to the left side.



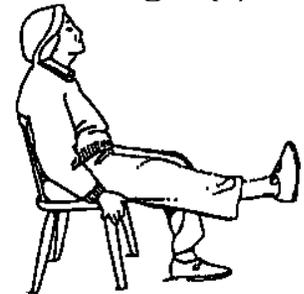
6. Breathe in as you lift one arm up, and breathe out as you lower your arm. Repeat with other arm.



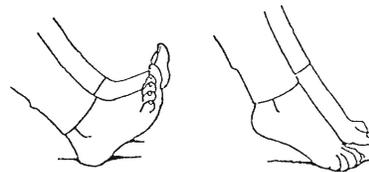
7. Sit straight, breathe in, then bend to the right and breathe out. Repeat this exercise bending to the left side.



8. Straighten one knee and hold for the count of 3 then lower it. Repeat with your other leg.



9. Bend your feet up and down at ankles.



10. Take your pulse again. (See exercise #1)

11. What is your rate of perceived exertion?



## Walking Program

- ♥ **Do your resting heart rate** when you have been sitting or lying for 5 minutes. You can walk 2 to 3 minutes longer every third day, as long as your heart rate stays within \_\_\_\_\_ beats from your resting heart rate and your rate of perceived exertion remains between 9 to 11.
- ♥ In about 5 weeks, you can go for a 30-minute walk each day.
- ♥ Discuss the use of a stationary bike or treadmill with a member of your health care team.

## Other Things to Know

- ♥ If you are a diabetic, have juice, cheese or crackers before you exercise.
- ♥ Avoid movements that cause **clicking** or movement in **your breastbone**. Tell your Primary Healthcare Provider if this happens.
- ♥ Also tell your Primary Healthcare Provider if you have oozing, swelling, tenderness at your incision.

## Guidelines for Getting More Active

After you leave the hospital, **GRADUALLY** get more active. When you do this, think about the following:

How do you feel? Listen to your body's signals. What is your rate of perceived exertion? Check your heart rate. Stop or do not start an activity if you have any of the following:

- dizziness
- feel tired
- pain – in your shoulder, elbow, wrist joints or jaw or muscles
- unusual sweating
- trouble breathing
- nausea
- feel your heart is beating fast
- angina – not enough oxygen to the heart
- rate of perceived exertion is more than 13 within the first 4 weeks

## APPENDIX B

### GUIDELINES FOR ACTIVITY INTENSITY

After you **LEAVE** the hospital, it is up to you to slowly increase your activity level prior to attending Cardiac Rehabilitation. Below is a **RATE OF PERCEIVED EXERTION (RPE) SCALE**, it is a way to measure how strenuous your exercise is.

**How to use the scale:** During exercise we want you to be aware of how much effort you are using and rate it on the scale below. This rating should show your total effort; it includes the strain and fatigue in your muscles, shortness of breath and physical effort. **You should pay attention to your overall feeling. Be as honest as possible and try not to over or under estimate your perception of exertion.**

	<b>Exercise Effort Required</b>	<b>The Way You Feel</b>	<b>Exercise Phase Guidelines</b>
6	No exertion at all	Breathing easily	Resting
7	Very, very light		
8			<b>Warm up and cool down</b> for 5 minutes each
9 10	Very light	Activity is easily done	Start walking in this range for the initial <b>6 weeks</b> of your recovery.
11	Fairly light	Can <b>talk</b> easily at a slow to comfortable pace. Will start to feel warmer & feel muscle effort. Breathing slightly faster.	
12 13	Somewhat hard	Brisk to fast walk. Feel warmer; feel muscle effort. Breathing a little heavier.	Start to exercise at this level after <b>6 weeks</b> . Should begin Cardiac Rehabilitation.
14 15 16	Hard (Heavy)		For some people your exercise may progress to this level. Seek guidance from <b>Cardiac Rehabilitation</b> .
17 18	Very hard	Vigorous Exercise. Difficulty talking, breathing hard. Feeling tired.	Few people may achieve this level safely. <b>Check with your physician</b> .
19	Very, very hard	Very short of breath. Unable to maintain for very long	Slow down, you have <b>gone over the recommended level</b> of activity.
20	Maximal exertion	All out. Exhausted.	

Based on the Borg Scale for Rating Perceived Exertion (1985)

## APPENDIX C

### NUTRITIONAL GUIDELINES

Nutritional Guidelines Section from *Heart Attack...and Back* provided courtesy of the Heart and Stroke Foundation of Manitoba

#### Heart Healthy Eating

Healthy eating is good for everyone. It can make you feel better and help reduce your risk of another heart attack. How much food you eat depends on your size, weight, age and how active you are. What you eat is as important as how much you eat. Eating Well with Canada's Food Guide is an easy-to-follow resource that explains the different food groups and the recommended daily servings.

To receive your copy of 'Eating Well with Canada's Food Guide', you can:

- Call the Heart and Stroke Foundation of Manitoba (949-2000 or 1-888-473-4636).
- Visit Health Canada's website at [www.healthcanada.gc.ca/foodguide](http://www.healthcanada.gc.ca/foodguide) or call Health Canada at 1-800-622-6232.

#### Choose Low Fat Foods

Choosing foods that are low in fat, particularly those that are lower in saturated fat, trans fat and dietary cholesterol will help to reduce cholesterol levels and help to maintain a healthy heart.

**Note:** Low Fat means no more than 3 grams of fat per serving

There are different types of fat:

- **Saturated fats** raise blood cholesterol levels. They are usually solid at room temperature and are found mainly in animal-based foods, such as fatty meat and full-fat dairy products, as well as in tropical oils, such as coconut and palm oil.
- **Trans fat/trans fatty acids** raise "bad" (LDL) cholesterol levels as well as lower "good" (HDL) cholesterol. Trans fat is created when unsaturated fats (healthier choices) go through a process called hydrogenation to turn them into a more saturated fat (not as healthy). Trans fat is found in partially hydrogenated margarines, deep-fried foods, convenience foods and many packaged crackers, cookies and store-bought baked products.
- **Dietary cholesterol** also increases your blood cholesterol, but not as much as saturated fat and trans fat. It is found only in animal products such as meats, poultry, fish, eggs and dairy products.
- **Unsaturated fats** are typically liquid at room temperature and are found mainly in plant foods. There are two types of unsaturated fats:

- o **Monounsaturated fats** help to lower “bad” (LDL) cholesterol levels and are found mainly in olive and canola oil, nuts and seeds.
- o **Polyunsaturated fats** can lower “bad” (LDL) cholesterol. These types of fats are found mainly in vegetable oils such as safflower, sunflower, corn and soybean.
  - Heart-healthy omega-3 fats, which can help prevent clotting of blood and also help lower triglycerides, are one type of polyunsaturated fat. Sources of omega-3 fat are fatty fish such as salmon, mackerel, herring, sardines, and rainbow trout, as well as canola and soybean oil, flaxseed and walnuts. Check with your family physician/nurse practitioner first before taking omega-3 (fish oil) capsules.

**Tip:** Although unsaturated fats are a good replacement for saturated fats, remember it’s important to reduce your total fat intake.

### **Choose Low Sodium/Salt Foods**

Sodium is found in large amounts in salt and is added to many processed foods. Sodium is essential for maintaining the water balance of all tissues and fluids in our bodies. Sodium causes the body to retain water. Usually, excess sodium is excreted in the urine so that water balance stays normal. However, too much sodium on a regular basis can lead to water retention in the blood and tissues. Some of this excess water ends up in the blood stream, and increases the volume of blood that must be carried through the blood vessels. When blood volume gets so big that our vessels can’t expand enough to compensate, blood pressure rises.

Tips to cut back on sodium:

- Do not use salt in cooking and take the salt shaker off the table.
- Limit packaged, instant and convenience foods.
- Choose foods labeled 'salt-free', 'no added salt', or 'low in sodium' (140 mg or less per serving). Beware, 'sodium-reduced' (at least 25% less salt than regular) does not mean salt-free.
- Choose fresh or frozen vegetables. Avoid canned or pickled vegetables.
- When using canned legumes (beans, lentils, chickpeas, etc.) rinse under cold water to reduce the sodium.
- Choose roasted chicken or beef in sandwiches instead of high-fat deli meats.
- Limit/avoid salted, processed, or canned foods.
- Avoid foods that contain large amounts of baking soda, baking powder, brine, MSG (monosodium glutamate). These ingredients are all high in sodium.
- Use seasonings such as herbs, spices, lemon juice or garlic instead of salt.
- Limit restaurant foods, as many are high in sodium.

**Note:**

- 1 teaspoon of salt = 2300 mg of sodium
- Sea salt does contain sodium and needs to be limited.

## Choose High Fibre Foods

A healthy diet should include 21 to 38 grams of fibre a day. “High fibre” foods have more than four grams of fibre per serving.

There are two types of fibre:

- **Soluble fibre** is a soft fibre that may help lower cholesterol and control blood sugar. The best sources are oatmeal and oat bran, legumes such as dried beans, peas and lentils, and fruit such as apples, strawberries and citrus fruit.
- **Insoluble fibre** (roughage) is bulky. It helps you feel fuller and promotes bowel regularity. It's found in wheat bran, whole-grain foods, and the skins, leaves and seeds of vegetables and fruit.

Increase the fibre in your diet slowly to prevent gas, bloating and diarrhea. Include fibre-containing foods throughout the day. You will also need to drink 6 to 8 cups (1.5 to 2L) of fluid each day to prevent side effects.

Tips to increase your fibre intake:

- Eat more vegetables and fruit (eat the peels whenever possible for added fibre).
- Eat fruit instead of drinking juice.
- Choose whole grain bread for toast and sandwiches.
- Choose whole wheat flour instead of white flour for baking.
- Choose whole grain pasta and brown or wild rice.
- Add 1 to 2 tablespoons of bran, very high fibre cereal or ground flaxseed to your favorite cereal.
- Add barley, beans, peas or lentils to soups and casseroles.

## Nutrition Tips for a Healthy Heart

Choose more often...	Use less...
<p><b>Vegetables and Fruit</b></p> <ul style="list-style-type: none"> <li>citrus fruits, dark green, red and orange vegetables and fruit (these are high in antioxidants*)</li> <li>fresh or frozen vegetables and fruit</li> </ul> <p>* A diet rich in antioxidants has been linked to a decreased risk of heart disease.</p>	<p><b>Vegetables and Fruit</b></p> <ul style="list-style-type: none"> <li>canned or bottled vegetables and vegetable juices</li> <li>cheese sauces on vegetables</li> <li>french fries</li> </ul>
<p><b>Grain Products</b></p> <ul style="list-style-type: none"> <li>bran, whole-grain, high fibre breads, cereals, pasta and rice</li> <li>low fat crackers like soda, melba toast, graham and low fat animal crackers</li> </ul>	<p><b>Grain Products</b></p> <ul style="list-style-type: none"> <li>white breads, rice and pasta</li> <li>butter, oils, margarine, high fat cream sauces on grain products</li> <li>pre-packaged pasta and rice with sauces</li> </ul>
<p><b>Milk and Alternatives</b></p> <ul style="list-style-type: none"> <li>skim or 1% milk, low fat yogurt (1% MF/BF or less)</li> <li>light/low fat cheeses (less than 20% MF)</li> <li>no fat, low fat or dry curd cottage cheese</li> </ul>	<p><b>Milk and Alternatives</b></p> <ul style="list-style-type: none"> <li>whole or 2% milk (fluid, evaporated or condensed)</li> <li>cream, whipping cream, non dairy creamer, half and half</li> <li>regular cheese products or regular cream cheese</li> </ul>
<p><b>Meat and Alternatives</b></p> <ul style="list-style-type: none"> <li>fish (especially fatty fish*) at least two times per week</li> <li>baked, broiled, poached, roasted or barbeque meats, poultry, fish and shellfish</li> <li>skinless poultry and well trimmed meat</li> <li>beans, peas, lentils to replace meat at meals</li> <li>light or non-hydrogenated peanut butter</li> <li>tofu</li> </ul> <p>* Examples of fatty fish include salmon, mackerel, herring, sardines and rainbow trout.</p>	<p><b>Meat and Alternatives</b></p> <ul style="list-style-type: none"> <li>gravies or cream sauces on meats</li> <li>processed meats like salami, sausages, bacon, bologna, wieners</li> <li>pan fried or deep fried meats, poultry, fish or shellfish</li> <li>regular ground meats, spare ribs and organ meats</li> <li>store-bought breaded meat and poultry products</li> </ul>

## Nutrition Tips for a Healthy Heart

Choose more often...	Use less...
<p><b>Soups</b></p> <ul style="list-style-type: none"> <li>• low fat and reduced sodium varieties</li> <li>• those made with skim or 1% milk</li> </ul>	<p><b>Soups</b></p> <ul style="list-style-type: none"> <li>• cream soup made with whole milk, cream, meat fat, poultry fat or poultry skin</li> <li>• packaged soups</li> </ul>
<p><b>Fats, oils and spreads</b></p> <ul style="list-style-type: none"> <li>• non-hydrogenated margarine</li> <li>• olive, canola, peanut, safflower, or sunflower oils in small amounts</li> <li>• low fat salad dressings and low fat mayonnaise</li> <li>• jams, jellies and honey</li> </ul>	<p><b>Fats, oils and spreads</b></p> <ul style="list-style-type: none"> <li>• coconut, palm kernel, palm oil, butter, lard shortening, bacon fat, block or stick margarine</li> </ul>
<p><b>Snack foods</b></p> <ul style="list-style-type: none"> <li>• angel food cake, low fat frozen yogurt, plain low fat cookies, low fat muffins, popsicles or sherbet</li> <li>• homemade loaves and muffins using no more than 1/4 cup of oil or margarine per loaf or dozen muffins</li> <li>• unbuttered popcorn, low salt pretzels</li> </ul>	<p><b>Snack foods</b></p> <ul style="list-style-type: none"> <li>• candy made with milk chocolate, chocolate, coconut oil, palm kernel oil or palm oil</li> <li>• commercially baked pies, cakes, doughnuts, croissants, high fat cookies, cream pies, regular ice cream</li> <li>• potato chips, cheezies</li> <li>• alcohol</li> </ul>

## Healthy Tips for Dining Out

Look for phrases that signal low fat (such as steamed, au jus or in its own juice, broiled, roasted, poached).

Be aware of foods that might be higher in salt (such as pickled, smoked, in cocktail sauce, broth or soya sauce).

Avoid menu items that say:

- buttery, buttered, in butter cream sauce
- creamed, in cream sauce, creamy, hollandaise sauce, béarnaise sauce, alfredo
- in its own gravy
- sautéed, fried, crispy, pan fried, scaloppini, battered, breaded
- au gratin, parmesan, in cheese sauce
- in a casserole

When ordering ask for:

- dressings, gravies and sauces served on the side
- skim or 1% milk instead of whole milk or cream
- meat, fish or poultry that is broiled, baked, steamed or poached (not sautéed or deep fried)
- fresh fruit, fruit packed in its own juice, or sherbet for dessert

## Food Labeling

The ingredient list and the Nutrition Facts table on a food package can help you make healthy food choices. When making heart healthy food choices, some of the important things to look for on the Nutrition Facts table are:

- the serving size (is this the same amount of food that you are eating? If not, you will need to adjust the calories and nutrient levels according to how much you are eating)
- the amount of fat AND the amount of saturated and trans fat
- the amount of dietary cholesterol
- the amount of sodium
- the amount of fibre (foods that are a “source” of fibre will have at least two grams of fibre per serving)

The % Daily Value for each nutrient tells you if the food has a little or a lot of a certain nutrient.

- look for a lower (10% or less) % Daily Value for fat, saturated and trans fat, cholesterol and sodium
- look for a higher (25% or more) % Daily Value for nutrients such as fibre

### Read the Label

- Compare the Nutrition Facts table on food labels to choose products that contain less fat, saturated fat, trans fat, sugar and sodium.
- Keep in mind that the calories and nutrients listed are for the amount of food found at the top of the Nutrition Facts table.

### Limit trans fat

When a Nutrition Facts table is not available, ask for nutrition information to choose foods lower in trans and saturated fats.

## Nutrition Facts

Per 0 ml (0g)

Amount

**Calories 0**

**Fat 0 g** **0%**

Saturates 0 g **0%**

+ trans 0 g

**Cholesterol 0 mg**

**Sodium 0 mg** **0%**

**Carbohydrate** **0%**

Fibre 0 g **0%**

Sugars 0 g

**Protein 0 g**

Vitamin A 0% Vitamin C 0%

Calcium 0% Iron 0%

Health claims, such as “a healthy diet low in saturated and trans fat may reduce the risk of heart disease” may also appear. It is important not to choose foods based only on these claims, but to look at the overall picture of how a food fits into healthy eating.

An ingredient list is present on all food labels to allow you to see exactly what is in a food product.



**Look for the Health Check™ logo:** The logo on the package means that the product's nutrition information has been reviewed by the Heart and Stroke Foundation of Canada and that it meets specific nutrient criteria based on Canada's Food Guide. Visit [www.healthcheck.org](http://www.healthcheck.org)

If you have any other questions or concerns, please contact a dietitian in your area or the Heart and Stroke Foundation of Manitoba at **204-949-2000** or [www.heartandstroke.mb.ca](http://www.heartandstroke.mb.ca)