



Preparing for Discharge Following Cardiac Surgery

Book 2 of 2



SOUTHLAKE
REGIONAL HEALTH CENTRE

Follow-up Appointments Reminder

Upon discharge, you will be given instructions for follow-up appointments.

Be sure to book these within the first few days of being home.

Your family doctor 1 week after discharge.

Date: _____

Time: _____

Your cardiologist 4-6 weeks after discharge.

Date: _____

Time: _____

Your surgeon 8-12 weeks after discharge.

Date: _____

Time: _____

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GOING HOME AFTER SURGERY

Full recovery from coronary artery bypass graft surgery can take up to 3 months or longer. A general rule to follow is to listen to your body and do everything in moderation. If you are feeling excessively fatigued or sore, you may need to slow down. Remember that fatigue is normal after an operation like heart surgery. You shouldn't be surprised to find that you feel strong one day and tired and weak the next. It is important to be patient with your pace of recovery as this varies from person to person.

Medication

Be sure to take all medications as directed by your physician. Do not change the dosage of your medications without your doctor's approval. If you are prescribed an iron pill, please remember that they may cause constipation and black stools. If you have had valve surgery and require blood thinners (anticoagulants), you will be given instructions regarding the dosing of your medication (coumadin), as well as the required regular blood testing.

Bathing and Incision Care

- You will shower prior to your discharge from the hospital. Your incisions may itch or feel sore, tight or numb for a few weeks. Some bruising around the incisions is also normal.
- Use warm (not hot) water.
- You may wash your incisions gently with soap and water; let the water flow over your incisions but do not scrub them.
- Pat your incisions dry.
- Do not take baths or use powders or lotions near your incisions. Avoid tub baths until your doctor gives you the green light, as they can affect your blood flow. You may take showers.
- You may have white pieces of tape on your chest. These are called "steri strips". If they have not fallen off in one week, gently wash your chest with soap and water and slowly peel them off.
- If you find it more comfortable, a thin layer of gauze may be placed over the incision(s). Women may wish to place cotton or soft material between their brassiere and chest wall.

Driving

You can resume driving approximately 6 weeks after surgery. Consult your physician if you have any questions or concerns. During this time, you may be a passenger as often as you like. Wearing a seat belt will not harm your incision. A small pillow may be used under your seat belt to prevent rubbing on your incision.

Weighing Yourself

Weigh yourself daily. Rapid weight gain can be a sign that your heart is not pumping efficiently. If you gain more than 2-3 lbs. (0.9 -1.3 kg) in one day or more than 3-5 lbs. (1.3-2.2 kg) in one week, call your cardiologist.

Pain Management

Once you are home, you may still require pain medication to relieve discomfort around your incisions. This is a normal part of recovery as you gradually increase your activities. As time passes, you will need less pain medication. Contact your family doctor if your pain becomes more severe, happens more often, or if the pain medication does not provide relief.

Sexual Activity

There are many myths that surround sex after heart disease and surgery. There is no reason why heart patients cannot resume normal sexual activity as soon as they feel ready to do so. Any exercise such as sexual activity increases heart rate and blood pressure; therefore, it is recommended that you gradually build up to this. It is normal to experience a decreased sex drive after surgery. This will resume as soon as your body heals and you begin to feel more like yourself. Sexual intercourse requires about the same amount of energy necessary to climb 2 flights of stairs. If you can manage this without any shortness of breath or chest discomfort, then you may be ready to resume sexual activity. Keep in mind the following suggestions:

- Choose a time when you are rested, relaxed, and free from stressful feelings.
- Wait 1-3 hours after eating a full meal.
- Stop and rest if you feel fatigued or experience chest pain.
- Select a familiar, peaceful setting that is free from interruptions.
- Until your breastbone has healed to its full strength (approximately 6 weeks), it is suggested that the patient be in the bottom position or side-lying position. This is recommended in order to avoid undue breastbone pressure or strain. Please check with your physician if you have any concerns or questions about resuming sexual activity after surgery.

Return to Work

Most people with less strenuous or sedentary jobs can go back to work 4-6 weeks after surgery; people with more physically-related jobs (such as construction workers or jobs requiring heavy lifting) may have to wait up to 12 weeks before returning to work. Your doctor will provide specific guidelines for your recovery and return to work, including specific instructions on how to care for your incision and general health after the surgery.

Listening to Your Body

You will be asked to do one or all of the following after your discharge from the hospital so that your recovery can be monitored. Please keep a record and bring it to your follow-up visit with your family doctor.

- Weigh yourself daily and write down your weight.
- Take your pulse daily. Keep track of your results.
- Take your temperature daily to check for fever.
- Watch for other signs of infection, such as an oozing or extremely tender incision.

What's normal after surgery?

- You may not have much appetite. It can take several weeks for your appetite to return to normal. Many patients notice that their sense of taste is diminished or almost absent. It will return. Eat 5-6 small meals per day instead of trying to eat 3 larger meals. Some patients even complain of nausea at the smell of food for a week or two after surgery. Choose bland foods that do not have a strong odour. Try eating cold foods, as they tend to have a milder odour than hot foods.
- It's normal to have swelling, especially if you have an incision in your leg. The swelling may persist for some time. Elevating your legs when sitting will help. Avoid crossing your legs as this interferes with blood flow.
- Difficulty sleeping at night. You may find it difficult to fall asleep, or you may find that you wake up at 2:00 or 3:00 a.m. and cannot fall back to sleep. This will improve. Taking a pain pill before bedtime may help.
- It's normal to experience problems with constipation. The medications (narcotics) that you may be taking for pain control can cause constipation. You may use a laxative of your choice. Add more high fibre foods, such as fresh fruits, vegetables, and whole grain breads and cereals. Drink plenty of fluids. Exercise will also improve bowel motility.
- You may experience mood swings and feel depressed. You may have good days and bad days. Do not be discouraged. Communicate your feelings openly with your family members. These feelings may occur for up to 6-8 weeks but they will get better. If they last longer, discuss this with your physician.
- You may have a lump at the top of your incision. This will disappear with time.
- You may notice an occasional "clicking noise" or sensation in your chest in the first days after surgery. This should occur less often with time and go away completely within the first couple of weeks. If it gets worse, call your surgeon. It takes 4-6 weeks for your breastbone to heal. Avoid any activities such as lifting for at least 6 weeks as this may put strain on the healing bone.
- Muscle pain or tightness in your shoulders and upper back between your shoulder blades. This will get better with time. Your pain medicine will also help relieve this discomfort.

- Numbness to the left or right of your incision. If an artery in your chest (internal thoracic artery) was used during your surgery, this is normal and will subside with time.
- You may experience a tingling or pulling sensation around your incision area if you are a large breasted woman. Wearing a comfortable, loose-fitting brassiere will help alleviate these sensations.
- Follow the exercise program given to you by your physiotherapist.
- Re-evaluate your health and make lifestyle changes that will benefit your heart and overall health in the future. The key to making long-lasting lifestyle changes is moderation. It is important that you take time to make gradual changes and set realistic goals for yourself. If you have any questions about making lifestyle changes after surgery, please contact the staff at Cardiac Rehabilitation.

Remember that each person recovers at his or her own pace - sometimes, it takes 4-6 weeks to start feeling better. Also remember to take all of the medication as prescribed by your doctor.

When to contact your Family Physician

- Fever greater than 38.5°C or 101°F.
- Angina-like chest pain similar to what you experienced before surgery
- Increased swelling of your ankles and weight gain of more than 2-3 lbs (0.9 – 1.3 kg) over two days.
- A change in incision drainage that is red or looks like pus.
- A change in the appearance of your incisions; increased redness, swelling or pain, gaping or open incision edges.
- A fast, irregular heartbeat and palpitations.
- Severe bruising for no apparent reason (especially with valve patients on blood thinner medication).
- Shortness of breath that continues once you stop an activity and/or while you are at rest.
- Persistent nausea and/or vomiting.
- Dizziness/Lightheadedness.
- Fainting or a severe headache.
- Blood in urine or stool (dark, tarry stool).
- Excessive sweating and/or excessive fatigue.
- Pain in your chest or shoulder that worsens with deep breathing or coughing.

ACTIVITY GUIDELINES

You have made great progress! Staying active is an essential component for your recovery. When you go home, it's very important to continue to perform all of the exercises you completed in the hospital EVERY DAY. As shown in the chart below, you should also make progress on your walking program EVERY DAY. Your exercises and walking program have been outlined on the **Exercise Prescription for Cardiac Patients (Exercise Card)** page. The exercise card can be detached from this booklet (see the following page) and placed on your fridge as a reminder to complete it daily. You will continue with this program for approximately 5 weeks before you start cardiac rehabilitation. Please remember to take the Exercise Card to Cardiac Rehabilitation for the staff to assess how you have been progressing.

Your Walking Program

When you are home after being discharged from the hospital, you will continue to increase your walking tolerance. As a general guideline, you should walk for a total of 30 minutes a day. If you are able to walk for 5 minutes at a time, this means you should complete your walk 6 times a day. As you increase the number of minutes you walk, you can decrease the frequency. Here is a chart outlining your walking program:

<i>Minutes Walked</i>	<i>Number of Walks (per day)</i>
5	6
6	5
7	4
8	4
9 – 12	3
13 – 22	2
23 – 30	1

Exercise Prescription for Cardiac Patients

Make sure you follow the **"Walk - Talk Rule"** as outlined in your booklet - and **don't** hold your breath!

Name _____
Surgery Date: _____ Therapist: _____

	Week 1					Week 2					Week 3				
Neck Rotation Slowly turn your head to the right, then middle, then to the left. Repeat 5 times.															
Shoulder Exercises 1) Shoulder Rolls - 10 forward; 10 back 2) Shoulder Flexion -lift arms forward and up until arm is next to ear. Do 5 times.															
Trunk Rotation Keep hips and buttocks still. Turn body to right and reach for side of chair. Do 5 times to right and left.															
Leg Exercises (sitting) 1) Marching on the spot. 10 times per leg. 2) Knee extension. Straighten one leg, keeping thighs parallel. Hold 5 seconds. Repeat 5 times each leg.															
Ankle Exercises 1) Point and flex your ankles 10 times. 2) Make circles with your ankles 10 times.															
Posture Stand against a wall. Keep your head, shoulder blades, and buttocks against the wall. Keep looking straight ahead. Hold for 20 seconds. Repeat.															
Walking program:															
Minutes															
Frequency															

Over...

	Week 4							Week 5						
Neck Rotation Slowly turn your head to the right, then middle, then to the left. Repeat 5 times.														
Shoulder Exercises 1) Shoulder Rolls - 10 forward; 10 back 2) Shoulder Flexion -lift arms forward and up until arm is next to ear. Do 5 times.														
Trunk Rotation Keep hips and buttocks still. Turn body to right and reach for side of chair. Do 5 times to right and left.														
Leg Exercises (sitting) 1) Marching on the spot. 10 times per leg. 2) Knee extension. Straighten one leg, keeping thighs parallel. Hold 5 seconds. Repeat 5 times each leg.														
Ankle Exercises 1) Point and flex your ankles 10 times. 2) Make circles with your ankles 10 times.														
Posture Stand against a wall. Keep your head, shoulder blades, and buttocks against the wall. Keep looking straight ahead. Hold for 20 seconds. Repeat.														

Walking program:														
Minutes														
Frequency														

How fast should you be walking?

Walking should be at a comfortable pace – not too fast and not too slow. Try to follow the Walk-Talk Rule: If you can carry on a conversation with someone while you are walking, you are not walking too fast. If you are too short of breath to carry on a conversation, you should slow down.

Remember your rating on the Perceived Exertion Scale. You should be working at 4 on this scale:

Rating of Perceived Exertion Scale (Borg Scale)

Rating	Perceived Exertion
0	Nothing
1	Very light
2	Light
3	Moderate
4	Somewhat hard
5	Hard
6	
7	Very Hard
8	
9	
10	Maximal

Activities Guidelines and Time Frames

We recommend that you DO NOT lift anything heavier than 10 pounds for 3 months after your surgery, unless approved by your cardiac surgeon.

10 pounds equals: 4 L of milk
 2 **light** bags of groceries (i.e., not potatoes or cans)
 A **small** pot filled with water

We also recommend that during this time you DO NOT push or pull a heavy door or a window that is difficult to open.

The following lists are guidelines indicating when you may resume some of your regular activities:

When you go home:

Housework: Light housework only – set/clear table, dusting, washing dishes
Social: Ride in a car (passenger)
Visit with friends and family
Handicrafts or play cards
Recreation: Walking
Climb stairs (maximum 2 flights of stairs)
Golf (putting only)
Stationary bike (no resistance)

After approximately 6 weeks:

Housework: Light vacuuming, light scrubbing, cleaning windows, laundry
Light home repairs, light carpentry
Yard work: Raking leaves, riding lawnmower, digging, hoeing, painting,
light carpentry
Recreation: Dancing, swimming, skating, jogging
Golf (with power cart)
Cycling (slowly)

*** You will also start Cardiac Rehabilitation at this time. ***

Wait at least 3 months and check with your doctor before starting the following activities:

House/Yard work: Heavy housework (vacuuming, scrubbing, cleaning floors)
Snow shoveling
Overhead painting
Heavy gardening
Chopping wood
Pushing lawn mower/snow blower
Recreation: Tennis
Golf (without power cart)
Riding motor cycle/snowmobiling
Cross country skiing/downhill skiing
SCUBA diving, rowing

Energy Conservation and Work Simplification

It is crucial for you to recognize that you may experience fatigue following surgery. This in no way suggests that you will be resting in bed, as you will be working closely with your physiotherapist who will establish a walking routine with you following your surgery.

The concept of energy conservation is to incorporate techniques and strategies to allow you to use your energy wisely. The goal is for you to do your necessary activities without exhausting yourself - planning is the key.

There are a number of steps that you can take to conserve your energy:

1. Alternate activities that are light and demanding in nature. For those demanding or “heavier” tasks ALWAYS CONSIDER WEIGHT RESTRICTIONS AS INDICATED BY YOUR SURGEON.
2. Determine the time of day when you have the most energy and plan your more tiring tasks during that time.
3. Schedule rest/recovery times. It is crucial that you not exhaust yourself, it will take you much longer to recover.
4. Sit when you can, standing requires much more energy.
5. Change your position frequently.
6. Assistive equipment can reduce the amount of energy needed to perform the activities of daily life. Your occupational therapist will help you to identify any equipment that may help you.
7. Proper body mechanics — the manner in which you approach a task/activity, affects the amount of stress and strain on your body. Your occupational therapist may review these concepts with you. Please remember the weight and activity restrictions outlined by your surgeon. When lifting or carrying anything, it is best to carry objects close to your body and try to equalize the load between both of your arms. Also, try to organize your work environment to minimize reaching for objects. This can be achieved by performing activities and storing supplies or objects accessed most frequently below the shoulder level.

These are just some of the simple steps that you can take to use your energy wisely! Don't hesitate to ask your occupational therapist if you have any questions or concerns, or you require further information.

HEART HEALTHY EATING GUIDELINES

Healthy eating habits are important for a good recovery. It is essential that you re-evaluate your diet and make changes that will benefit your heart and overall health. The following pages provide you with important heart healthy guidelines.

To control blood cholesterol levels, you need to:

- Lower your intake of foods high in saturated fat.
- Use healthier unsaturated fats in moderation.
- Limit your intake of high cholesterol foods.
- Refer to the **Heart Healthy/Lower Fat Guidelines** for details on how to make these changes.
- Increase your fibre intake by referring to the **High Fibre Guidelines**.
- Learn to control your energy intake and increase your level of activity to achieve and / or maintain a healthy body weight.

To control blood pressure, you need to:

- Reduce your salt (sodium) intake. Refer to the **Guidelines for Reducing Sodium on a No Added Salt Diet**.
- Achieve a healthy body weight.

Heart Healthy Eating topics covered at the Cardiac Rehabilitation Program:

- types of blood lipids
- low fat diet including types of dietary fat and their effect on blood lipids
- high fiber diet (soluble and insoluble)
- weight control
- alcohol
- soy foods
- antioxidants and other vitamins
- reading food labels
- heart healthy shopping
- adjusting recipes for heart healthy eating
- recommended cook books

Reliable Heart Health Nutrition Resources

Web sites:

The Internet is a convenient and growing resource for finding good nutrition information. The following is a list of some credible web sites that provide sections on nutrition for the general public.

Dietitians of Canada	www.dietitians.ca
Heart and Stroke Foundation	www.heartandstroke.ca
Flax Council of Canada	www.flaxcouncil.ca
Becel Heart Health Information Bureau	www.becelcanada.com
Canadian Diabetes Association	www.diabetes.ca
National Institute of Nutrition	www.nin.ca
Healthy Eating is in Store for You (Nutrition Label Reading Info.)	www.healthyeatingisinstore.ca

Recommended Books and Cookbooks:

The Heart Smart Shopper – Nutrition on the Run, Ramona Josephson. RDN, Douglas & McIntyre, Vancouver/Toronto. 1997.

The New Lighthearted Cookbook: Recipes for Healthy Heart Cooking, Anne Lindsay, 2003.

New Light Cooking, Anne Lindsay, 1998.

More HeartSmart Cooking, Bonnie Stern, 1997.

Simply Heart Smart Cooking, Bonnie Stern, 1994.

Heart & Soul Cuisine- From the Estates of Sunnybrook. David Adjey, Janice Holley. RD. 1997.

HeartSmart Chinese Cooking, Stephen Wong, 1996.

HeartSmart Flavours of India, Krishna Jamal, 2003.

Full of Beans, Violet Currie and Kay Spicer, 1994.

Rose Reisman Brings Home Light Cooking, 1995.

Healthy Heart/Lower Fat Guidelines

The following information is intended to help you make heart healthy food choices. The number of servings you require from each food group depends on your age, body size, activity level and gender. The number of servings suggested is based on Canada's Food Guide but has been modified to better meet your needs.

Low Fat Dairy Products/Alternatives

2 to 4 servings per day

Choose:	Avoid:
Milk: <ul style="list-style-type: none"> • Skim, 1% fat, soya milk fortified with vitamins and minerals. • 1 serving is equivalent to: <ul style="list-style-type: none"> - 1 cup fluid milk (250 mL) - 1/4 cup (60 mL) evaporated milk - 2 tablespoons (30 mL) powdered milk 	<ul style="list-style-type: none"> • Homogenized, 2% milk, sweetened condensed milk and buttermilk.
Yogurt: <ul style="list-style-type: none"> • No more than 1 % M.F. (milk fat) plain or flavoured with Nutrasweet. 1 serving is equivalent to 3/4 cup (175 mL)	<ul style="list-style-type: none"> • Whole milk yogurt • Sweetened yogurt
Cottage cheese: <ul style="list-style-type: none"> • No more than 1% M.F. 1 serving is equivalent to 1/2 cup (125 mL)	<ul style="list-style-type: none"> • Creamed cottage cheese
Low fat hard cheese: <ul style="list-style-type: none"> • Less than 15% to 20% M.F. 1 serving is equivalent to 1 ounce (30 g)	<ul style="list-style-type: none"> • Regular hard cheeses, processed cheeses, cream cheese
Low fat/nonfat frozen yogurt, ice cream or ice milk:* <ul style="list-style-type: none"> • 1 serving is equivalent to 1/2 cup (125 mL) * Avoid if diabetic or blood triglycerides are high.	<ul style="list-style-type: none"> • Regular ice cream • Cream, half and half, whipping cream, nondairy creamer and whipped topping.

Meat and Alternatives

5 to 6 ounces (150 to 180 grams) per day

Choose:	Avoid:
<p>Fish, Shellfish:</p> <ul style="list-style-type: none"> Any type of fish. Try to eat fatty fish more often, i.e. salmon, mackerel, sardines, tuna and herring. <i>2 to 3 times per week</i> 	<ul style="list-style-type: none"> Shrimp and squid.* Fried fish, fried shellfish
<p>Poultry:</p> <ul style="list-style-type: none"> Without skin. 	<ul style="list-style-type: none"> Poultry with skin, fried chicken, duck, goose
<p>Beef, pork, lamb:</p> <ul style="list-style-type: none"> Lean cuts, well trimmed before cooking. Beef cuts that contain less than 10% fat, such as sirloin tip, rump, top sirloin, eye of round, outside round, inside round, blade, tenderloin, extra lean ground beef. Pork-butterfly chops, tenderloin 	<ul style="list-style-type: none"> Regular ground beef, fatty cuts, spare ribs, organ meats* and sausage type meats. Shoulder chops
<p>Luncheon meat: Low fat variety (i.e. “Schneider’s Lifestyle” or meatless variety made with soya protein). <i>1 slice is equivalent to 1 ounce (30 g)</i></p>	<ul style="list-style-type: none"> Regular luncheon meat (i.e. bologna, salami, sausage, hotdogs, bacon, pepperoni)
<p>Soy Foods:</p> <ul style="list-style-type: none"> Tofu <i>1/2 cup (125 mL) is equivalent to 1 ounce (30 g)</i> Texturized vegetable protein (TVP) <i>1/4 cup (60 mL) is equivalent to 1 ounce (30 g)</i> Cheese 15 to 20% M.F. (Milk Fat) or less. The lower the better. <i>1 serving is equivalent to 1 ounce (30 g)</i> <p>Dry roasted soynuts without salt. <i>1/4 cup (60 mL) is equivalent to 1 ounce (30 g)</i></p>	
<p>Eggs:</p> <ul style="list-style-type: none"> No more than 2 to 3 egg yolks* per week (<i>includes omega-3 eggs & eggs used in cooking and baking</i>) Egg whites as often as you like. <i>2 whites is equivalent to 1 ounce (30 g)</i> <p>Egg substitute (“Egg Beaters”, “Break Free”, “Omega-Pro”) as often as you like. <i>1/4 cup (60 mL) is equivalent to 1 ounce (30 g)</i></p>	
<p>Legumes: Legumes such as kidney beans, romano beans, black beans, chick peas, lentils, white split peas. <i>1/2 cup (30 g) is equivalent to 1 serving</i></p>	

Note: Use low fat cooking methods such as grilling, broiling, poaching, baking and boiling.

* *These foods contain the highest amount of cholesterol. Limit intake to 2 to 3 servings per week. One serving equals: 2 (60 g) Cooked Liver, 3 (90 g) Cooked Shrimp or Squid or 1 Egg Yolk.*

Breads and Cereals (starchy foods)

5 to 8 servings per day

Choose:	Avoid:
<p>Breads:</p> <ul style="list-style-type: none"> • Whole grain, english muffins, bagels, buns, corn or flour tortillas, and pita bread. • Make high fibre choices whenever possible. Ideally more than 2 g of fibre per serving. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>1 slice of bread,</i> - <i>½ a small bagel,</i> - <i>½ an english muffin,</i> - <i>1 small tortilla,</i> - <i>½ a pita</i> 	<ul style="list-style-type: none"> • Bread in which butter, fat or eggs are a major ingredient (i.e. croissants, egg bread, cheese buns)
<p>Cereals:</p> <ul style="list-style-type: none"> • Oat, wheat, corn, rice, and multigrain types, i.e. Oatbran, Oatmeal, Cheerios, Shredded Wheat, Shreddies, Cream of Wheat, Bran Flakes, All Bran, Bran Buds, and Raisin Bran, Cornbran, and Cornflakes, Rice Krispies, Multigrain Cheerios. Better breakfast cereals contain at least 2 g of fibre per serving. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>½ cup (125 mL) of hot cereal,</i> - <i>*1 cup (250 mL) of cold cereal</i> <p><i>*All Bran and Bran Buds should be used in small quantities only. Start with 1 to 2 tablespoons per day added to another cereal.</i></p>	<ul style="list-style-type: none"> • Most granolas and sugar coated cereals, i.e. Fruit Loops, Frosted Flakes, Honeycomb, Alphabits, Corn Pops, instant flavoured oatmeal.
<p>Pasta:</p> <ul style="list-style-type: none"> • Any type, plain. Try whole wheat pasta! <i>1 serving is equivalent to ½ cup (125 mL) cooked</i> 	<ul style="list-style-type: none"> • Instant noodles and sauce mixes, i.e. Kraft Dinner
<p>Rice:</p> <ul style="list-style-type: none"> • Brown, white, wild, basmati, etc. <i>1 serving is equivalent to ½ cup (125 mL) cooked</i> 	<ul style="list-style-type: none"> • Packaged instant rice mixes

Continued next page

Breads and Cereals (starchy foods)

5 to 8 servings per day

Choose:	Avoid:
<p>Crackers:</p> <ul style="list-style-type: none"> • Low fat (less than 3 g per serving) i.e. unsalted soda crackers, bread sticks, melba toast, wasa bread, graham, animal type. <i>1 serving is equivalent to 2 to 8 (depending on size)</i> 	<ul style="list-style-type: none"> • Commercial baked pastries, muffins, biscuits
<p>Homemade baked goods:</p> <ul style="list-style-type: none"> • Use unsaturated oil, skim milk or 1% milk, and egg substitute ie. quick breads, biscuits, cornbread muffins, bran muffins, pancakes, waffles. Choose high fiber whenever possible. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>1 small muffin,</i> - <i>1 medium pancake or waffle,</i> - <i>1/2 an english muffin,</i> - <i>1 small biscuit</i> 	
<p>Soups:</p> <ul style="list-style-type: none"> • Reduced or low fat and reduced sodium varieties i.e. chicken or beef noodle, minestrone, tomato, vegetable, potato, reduced fat soups made with skim milk, i.e. Campbell's Healthy choice or President's choice. Too good to be true soups. <i>1 cup (250 mL) is equivalent to 1 serving.</i> 	<ul style="list-style-type: none"> • Soups containing whole milk, cream, meat fat, poultry fat or poultry skin

Vegetables and Fruit

3 to 5 Servings of Vegetables per day

2 to 4 Servings of Fruit per day

Choose:	Avoid:
<p>Vegetables:</p> <ul style="list-style-type: none"> • Fresh, frozen or canned without added fat or sauce. Choose dark green, orange, red, or yellow sources more often. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>½ cup (125 mL) vegetables</i> - <i>1 cup (250 mL) salad</i> - <i>1 cup (250 mL) low sodium vegetable juice</i> 	<ul style="list-style-type: none"> • Vegetables fried or prepared with butter, cheese, or cream sauce.
<p>Fruit:</p> <ul style="list-style-type: none"> • Fresh, frozen, canned or dried. All unsweetened. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>1 small piece fresh fruit</i> - <i>1/4 small cantaloupe</i> - <i>1/2 cup (125 mL) grapes</i> - <i>1 cup (250 mL) strawberries</i> - <i>2 tablespoons (30 mL) raisins</i> - <i>1 cup (250 mL) watermelon</i> 	<ul style="list-style-type: none"> • Fruit served in butter or cream sauce or canned fruit in syrup.
<p>Fruit juice:</p> <ul style="list-style-type: none"> • Fresh, frozen or canned. All unsweetened. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>1/2 cup (125 mL) orange, apple, pineapple</i> - <i>1/4 cup (60 mL) prune, grape</i> 	<ul style="list-style-type: none"> • Sweetened juice, fruit “drink”, cranberry cocktail, regular vegetable juices or grapefruit juice.

Fats and Oils

4 to 6 servings per day

Choose:	Avoid:
<p>Unsaturated oils:</p> <ul style="list-style-type: none"> • Canola, olive, peanut, safflower, sunflower, corn and soybean. • <i>1 serving is equivalent to 1 teaspoon (5 mL)</i> 	<ul style="list-style-type: none"> • Coconut oil, palm kernel oil, palm oil
<p>Margarine:</p> <ul style="list-style-type: none"> • Low in saturated fat and nonhydrogenated, i.e. Becel, Fleishmann's soft, Olivina, President's Choice - Too Good to be True. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>1 teaspoon (5 mL) regular</i> - <i>2 teaspoon (10 mL) low calorie</i> 	<ul style="list-style-type: none"> • Butter, lard, shortening, bacon fat, hard margarine sticks, highly hydrogenated margarine
<p>Salad Dressing:</p> <ul style="list-style-type: none"> • Made with unsaturated oils listed above. • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>1 tablespoon (15 mL) regular</i> - <i>2 tablespoon (30 mL) low fat (includes mayonnaise)</i> 	<ul style="list-style-type: none"> • Salad dressings made with egg yolk, cheese, sour cream, whole milk
<p>Seeds and nuts:</p> <ul style="list-style-type: none"> • Unsalted nuts • <i>1 serving is equivalent to:</i> <ul style="list-style-type: none"> - <i>a small handful of nuts</i> - <i>1 tablespoon (15 mL) seeds</i> 	<ul style="list-style-type: none"> • Coconut • Roasted nuts with extra oil
<p>Peanut Butter:</p> <ul style="list-style-type: none"> • <i>1 serving is equivalent to 1 tablespoon</i> 	
<p>Vegetable Oil Cooking Spray:</p> <ul style="list-style-type: none"> • <i>1 serving is equivalent to 1 to 2 second spray</i> 	

Other Foods

Use in moderation

Choose:	Avoid: the following if diabetic, weight loss is required or if triglycerides are elevated. Otherwise they can be used in moderation.
<ul style="list-style-type: none">• Water• Diet pop• Diet fruit drinks• Artificial sweeteners made with Nutrasweet (Aspartame)• Diet jam• Cocoa powder• Herbs and spices• Vinegar• Lemon, lime• Coffee, tea• Diet Jell-O• Diet gum	<ul style="list-style-type: none">• Fruit punch• Iced tea• Lemonade• Sugar, white or brown• Syrup• Honey• Regular jam• Candy• Regular Jell-O• Popsicle• Sherbet• Sorbet• Fruit ice• Gum• Alcohol

High Fibre Guidelines

A high fibre diet should include **20-35 g** of fibre per day.

There are two types of fibre: **Soluble** and **Insoluble**. **Soluble** fibre helps to lower cholesterol. **Insoluble** fibre helps keep you regular and may protect against colon cancer. Both types of fibre are important for good health.

Best sources of soluble fibre: oat bran, oatmeal, legumes such as dried beans, peas and lentils, apples, strawberries, citrus fruit, psyllium containing cereals.

Best sources of insoluble fibre: Wheat bran and wheat bran cereals, whole grain foods, such as whole wheat or rye bread, brown rice, fruits, and vegetables.

Choose a **variety of fibre rich foods** to get a healthy balance of soluble and insoluble fibre:

1. Eat more whole grain breads and cereals.
2. Eat more fruits and vegetables, at least 5 servings per day.
3. Eat more legumes, dried beans, peas, and lentils.

It is important to:

Increase the fibre in your diet slowly to prevent gas and bloating.

Drink 6-8 cups of fluid each day for the fibre to work.

Top ten picks for fibre:

grams of fibre

1. Baked beans (1/2 cup / 125 mL)	8
2. Lentils (1/2 cup / 125 mL)	6
3. Wheat bran (1/4 cup / 60 mL)	7
4. Bran flake cereal (3/4 cup / 30 g)	5
5. Oat bran cereal (1 cup / 250 mL cooked)	4
6. Two slices whole wheat bread	4
7. Raisins (1/4 cup / 60 mL)	4
8. 1 orange	7
9. 1 pear or apple	4
10. Green peas (1/2 cup / 125 mL)	4

Read nutrition labels to determine the fibre content and compare products:

Foods with at least **2 g** of fibre per serving = a **moderate** source of fibre

Foods with **4 g** of fibre per serving = **high** source of fibre

Foods with **6 g** or more per serving = a **very high** source of fibre

*Adapted from: Fibre Facts, Heart & Stroke Foundation. By Southlake Regional Health Centre.
November 2003*

Tips to Reduce Sodium on a No Added Salt (NAS) Diet

Avoid salt at the table and during cooking. Use seasonings that don't contain salt/sodium, such as: spices, herbs, herb mixtures (for example, Mrs. Dash™), lemon juice, Tabasco sauce™, and flavoured vinegars. Add flavour to marinades and sauces with wine or tropical fruit juices.

Use fresh and home prepared foods, whenever possible. Fresh fruits and vegetables, unsalted grain products and plain rice, pasta and potatoes, fresh or frozen meat, poultry, and fish are low in sodium.

Limit use of processed foods, such as canned products, processed or smoked luncheon meats, and processed packaged foods. *These foods contain the most sodium in our diets.* Read and compare food labels and choose products that are lower in sodium.

Avoid foods that have visible salt, such as potato chips, salted pretzels, salted nuts, and salted crackers. Choose unsalted alternatives and have fresh fruits and raw vegetables more often as snacks.

Know your daily sodium allowance. For an NAS diet, you should limit sodium to less than 2500 mg a day. Spread this amount of sodium throughout the day. For example, on a 2500 -mg sodium diet, have about 500 mg at breakfast, 900 mg at lunch and supper, and 200 mg for snack(s). Keep in mind that 1tsp. or 5 mL of table salt contains about 2000 mg of sodium!

Read Nutrition Information labels. Look at the amount of sodium listed in milligrams per serving and consider if it will fit into your allowance of sodium per meal. If the amount of sodium is not listed, look at the list of ingredients, which are listed in order of highest to lowest amounts. If the word sodium or salt is listed near the beginning, the food may be too high in sodium. Other ingredients that contain sodium include sodium chloride, baking soda, baking powder, monosodium glutamate (MSG), and brine (i.e., pickled products).

Use low sodium products. Look for nutrition claims, such as Sodium Free/Salt Free or Low Sodium. Claims like Reduced Sodium, Less Salt, Lower Salt or No Added Salt may still contain large amounts of sodium. Compare similar products and choose the lower sodium alternative.

Use salty condiments in moderation. Use small amounts (1 tsp. or 5 mL) of these condiments: mustard, ketchup, relish, chili sauce, low sodium soya sauce, steak sauce, and Worcestershire sauce.

Plan your meals carefully. If you choose a high sodium food, try to have lower sodium foods throughout the rest of the day. Reduce the number of times you eat fast foods and convenience foods.

Updated November 2003. Southlake Regional Health Centre.

CARDIAC REHABILITATION PROGRAM

The next step in your recovery after you return home is your participation in a cardiac rehabilitation program. A cardiac rehabilitation program provides supervised exercise and heart education classes, along with emotional and psychological support as you begin to feel better. Staying physically active is well known to reduce future heart problems. The program runs on Tuesdays and Thursdays for 26 weeks. The program is designed for you to attend on both days, either afternoon or evening sessions. The first day includes a one-hour education class and a one-hour exercise session. The second day will include one hour of exercise only. We encourage you to bring your spouse, a family member, or close friend with you to the program.

The exercise sessions are led by kinesiologists, who will design a personalized exercise prescription for you to ensure that you are exercising in a safe manner. Each patient will work with a designated kinesiologist throughout the program. He/she will monitor your progress and will gradually increase your level of activity based on your readiness and ability. We can easily accommodate patients whose activity is limited due to arthritis, multiple sclerosis, or other medical conditions.

The education sessions provided at HeartWorks cover many topics related to heart health. The classes will be led by registered dietitians, registered nurses, a social worker, a pharmacist, and a kinesiologist. Topics include understanding how your heart works, healthy eating, reading food labels, stress management, heart disease and the impact of heart diseases, understanding your medications, and guidelines for continuing with exercise at home.

HeartWorks has a social worker and a dietitian, who are available for one-on-one consultations. These consultations can be booked once you begin attending the program.

It is important to attend an Information Session and the Intake Clinic before beginning the exercise program. These sessions are outlined below.

Information Session:

This session is offered on alternate Thursday evenings from 6:00 -8:00 p.m. The rehab staff will call you and book you for a session. In the first hour, you will learn more details about the program, and have the opportunity to ask questions. The second hour is a lecture by our nurse titled 'Knowing Your Heart'. We strongly suggest you attend this session before beginning the program as important information is shared here.

Intake Clinic:

At this clinic, the nurse will assess your cardiac history, current health and risk factor review. You will also do a stress test to determine your current level of activity. A cardiologist will monitor you on the treadmill. Please bring your medications with you, and wear comfortable walking shoes and clothing. This appointment will take about 1 hour.

Referral to Cardiac Rehabilitation at Southlake is done through your physician (cardiologist, surgeon, or family physician). The HeartWorks staff will likely meet with you before you are discharged from the hospital. Our program runs off site, at the Tannery Mall on Davis Drive (by the railway tracks). If you live far away from this location, we will let you know of cardiac rehabilitation programs offered in other areas closer to you. There is a one-time cost of \$50 for the program. This covers your information binder, handouts, and a stopwatch.

If you have any further questions, please contact us at HeartWorks: 905-895-4521, ext. 2448.

Orientation Session: _____

Intake clinic: _____

If you need to change these appointment times, please call us at the above number.