HANDBOOK
for a Healthy Heart

A PATIENT GUIDE

for meeting health care challenges related to heart disease.

- Ongoing care guide
- Easy to understand
- Up-to-date information
- Guidance & support

This book belongs to:

_____

UNC REX HEALTHCARE

Thank you for choosing UNC REX Healthcare for your Heart Care needs.

As part of our commitment to you, we have made this booklet to provide patients and families with the basic knowledge and information about the care provided at UNC REX Healthcare. It also provides helpful information about ongoing care and lifestyle changes to prevent other heart problems and maintain heart health.

We are ready to work with you to overcome healthcare challenges related to heart disease. Please know that our entire staff at UNC REX Healthcare is available to answer your questions, calm your fears and provide accurate and up-to-date information about your healthcare status. If you have any questions or concerns, please feel free to ask any member of your UNC REX Healthcare Team at any time.

We will coordinate your plan of care to help you maintain your best health and activity. It is important to talk with your family and friends after you leave the hospital.

We put our hearts into caring for yours. We are here to support you every beat of the way.

Sincerely,

Kirsten Riggs, MHA, BSN, RN
Vice President Heart & Vascular Services

Joel Ray, MSN, RN, NE-BC
Vice President Patient Care Services and Chief Nursing Officer

On behalf of your UNC REX Healthcare
Heart & Vascular Services Healthcare Team

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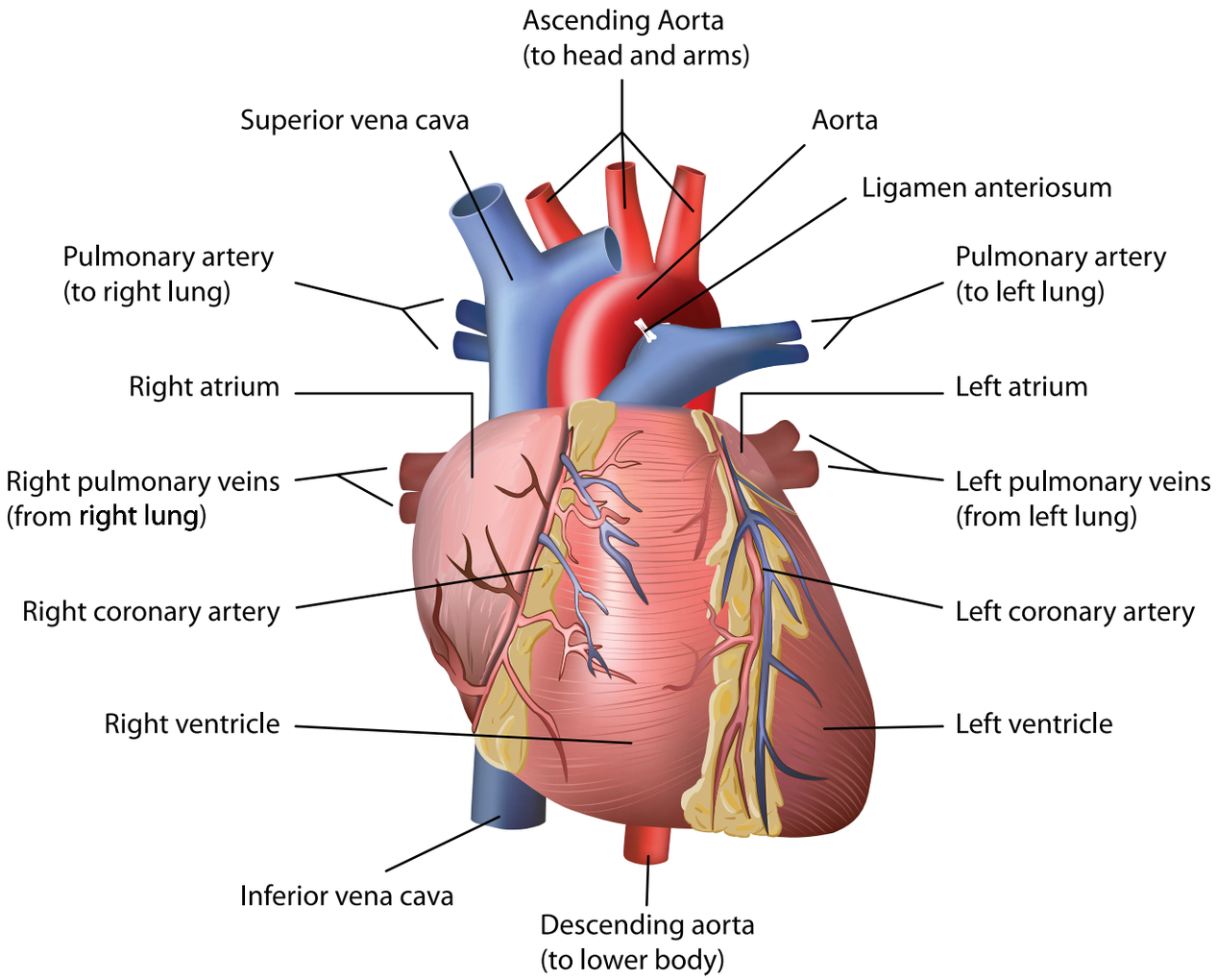
WHAT IS GOING ON WITH MY HEART?

First, it is important to know how a normal heart works. The heart is a large pump that provides oxygen to all areas of the body through a series of pipes called arteries. The heart is a strong muscle and needs to have its own supply of oxygen to be able to work normally. The heart has arteries that supply blood and oxygen directly to the heart muscle. In some patients, those arteries may become clogged and not allow enough blood to get to the heart muscle. When that happens, it is called coronary artery disease (CAD) or acute coronary syndrome (ACS).

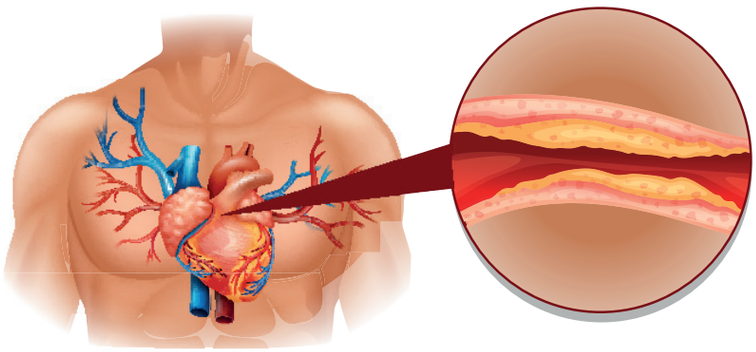


There are many reasons that can increase the chance to develop coronary artery disease, such as age, gender, diet, and other diseases like diabetes or high blood pressure. They call these risk factors, and some risk factors we can change or improve and others we cannot change, such as family history, age and gender. A family history of heart disease is an important risk factor to know. Be sure to ask your relatives about other family members that may have heart disease if you do not already know.

WHAT IS CORONARY ARTERY DISEASE (CAD)?

Coronary arteries carry blood and oxygen to the heart muscle. Over time, these arteries can become narrowed by deposits of fat called plaque. This is like rust build up in a pipe that makes it narrow. The artery walls become inflamed as a part of this process.

When the artery is inflamed, small cracks in the plaque can form and make it easier for blood clots to form. These clots block the flow of blood and oxygen to the heart. Without oxygen, part of the heart can be damaged. This is known as a heart attack or "Myocardial Infarction" (MI).



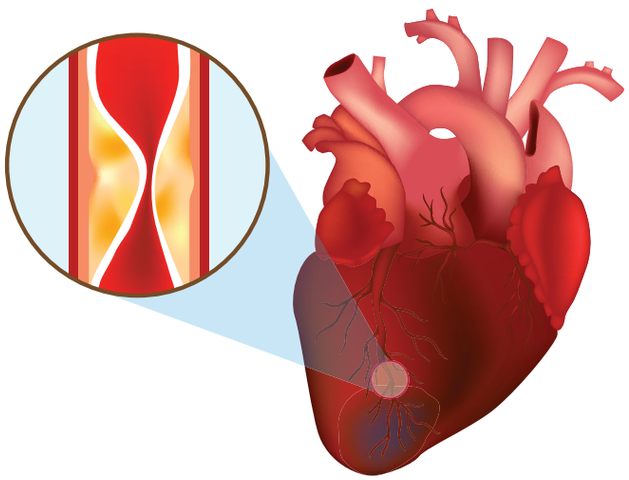
Another type of heart attack that can happen is when the arteries of the heart spasm, or squeeze tightly which stops the blood flow to the heart muscle. This type of heart attack is rare.

TYPES OF HEART ATTACKS / MYOCARDIAL INFARCTIONS (MI)

Part of your treatment will include an electrocardiogram (ECG). This helps your doctor to know which artery is blocked. An ECG measures the electrical signal from your heart, and having a blocked artery will change that signal.

You may hear the term STEMI (steh – mee) or Non-STEMI. These terms describe the changes seen on the ECG which tell us if you have had a heart attack. The ECG will help your treatment team know what part of the heart has been damaged so we can take better care of you. A STEMI is an emergency and needs to be treated as soon as possible. A Non-STEMI is urgent and requires you to be in the hospital for medications and treatment.

When there is damage to the heart muscle from a heart attack, it may make the heart weak or stiff and it can't pump normally. When the heart does not pump normally it is hard to provide oxygen to the body. This may make you feel tired, have less energy, and you may have trouble doing the things that you would normally do. It is important to make sure you report any new symptoms you have to your doctor.

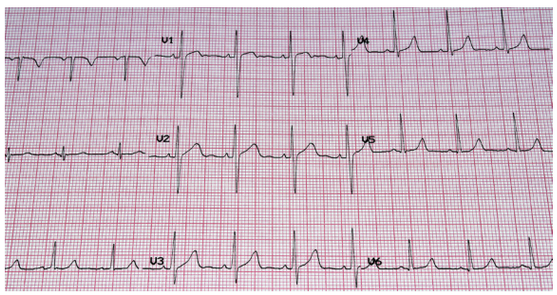


TREATMENT OF HEART DISEASE OR A HEART ATTACK "MI"

To help identify what is wrong with your heart and to help treat your heart, your cardiologist (heart doctor) may order one or more of these heart tests or procedures.

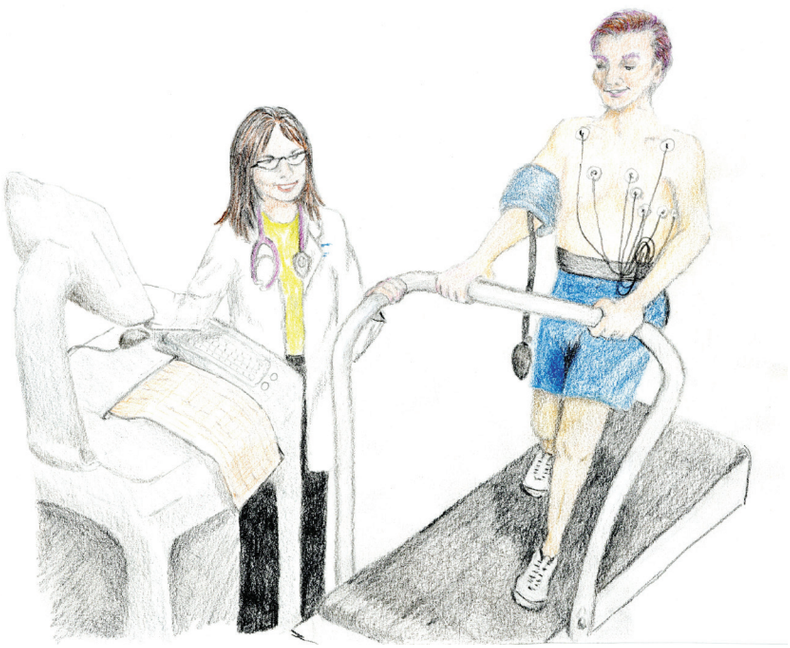
TYPES OF TESTS / PROCEDURES YOU MAY HAVE:

ECG - An ECG is an "electrocardiogram" - this will identify how your heart's "electrical" system is working. It involves placing pads called electrodes on your chest that connect to wires which connect to an ECG machine. The machine will print out an ECG that your cardiologist will review to look for any changes in how your heart is working.

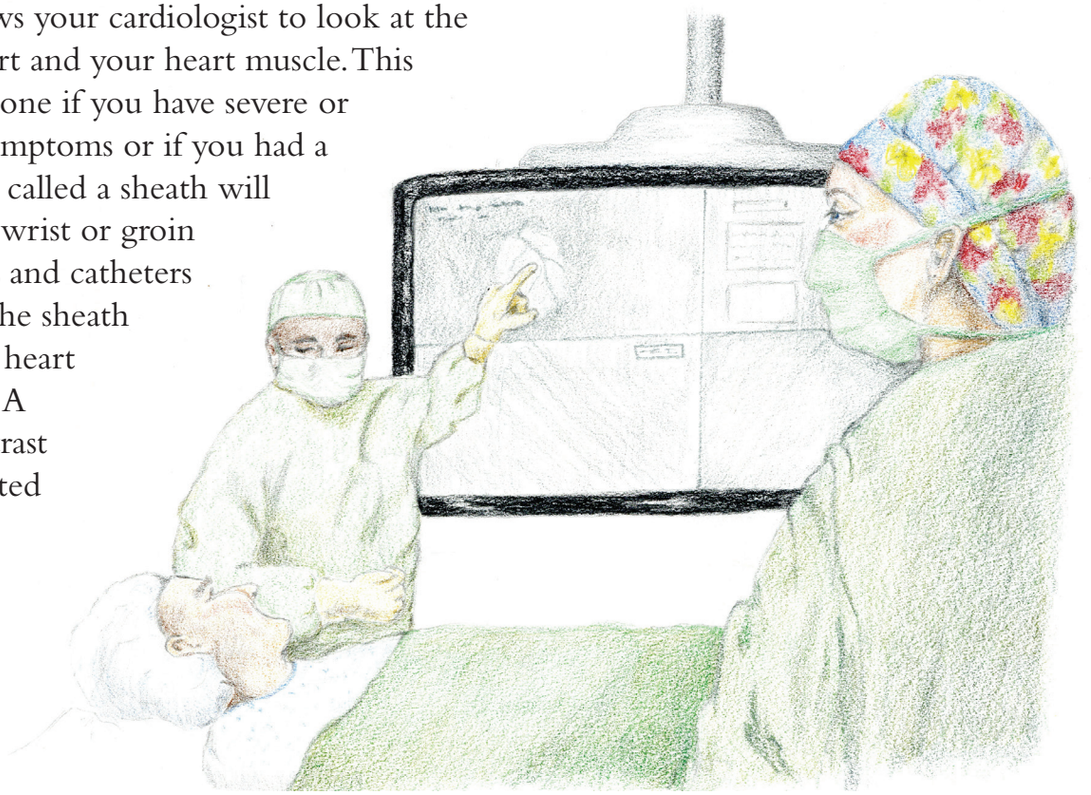


Echocardiogram (Echo) – An echocardiogram is an ultrasound of your heart that will show how well your heart and valves are working or if there has been any damage to the pumping of your heart.

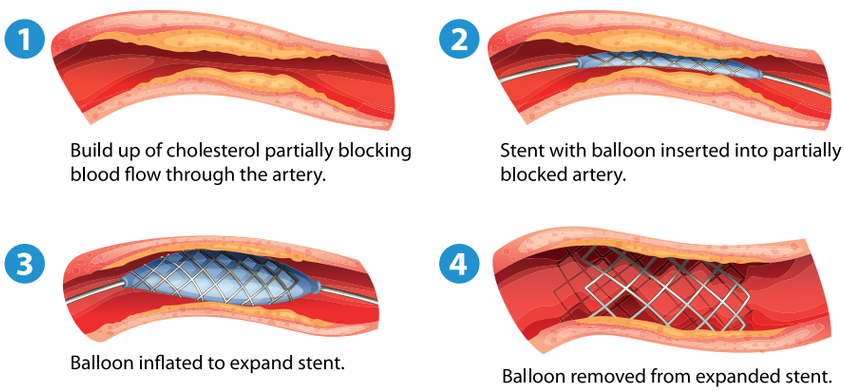
Cardiac Stress Test – A cardiac stress test is a test that makes sure you receive good blood flow to your heart. There are two ways to do a stress test. If you are able, we will have you walk on a treadmill until your heart rate gets to a target number. If you are not able to walk, you will be given IV medication to "stress" your heart as if you walked on the treadmill. You will also have pictures taken of your heart during the stress test. These pictures will identify if there is any blockage in the arteries of your heart.



Cardiac Catheterization – A cardiac catheterization is a procedure that allows your cardiologist to look at the arteries of your heart and your heart muscle. This procedure will be done if you have severe or continuous heart symptoms or if you had a heart attack. A tube called a sheath will be inserted in your wrist or groin artery. Special wires and catheters are inserted inside the sheath and guided to your heart arteries using x-ray. A solution called contrast or dye will be injected inside your heart arteries to look for blockages or narrowing that may be causing your heart symptoms.



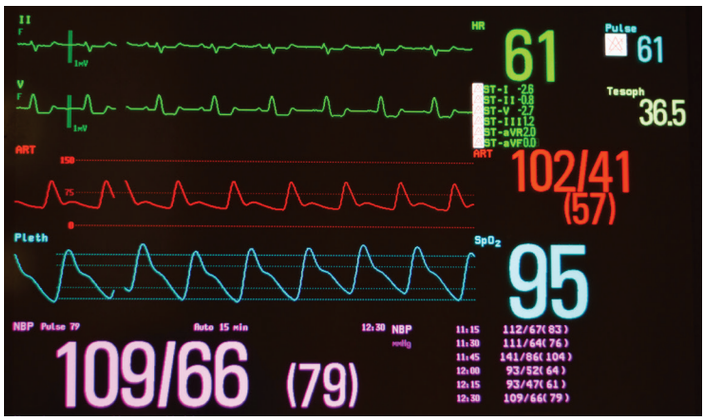
PCI (Percutaneous Coronary Intervention) or Stent – A PCI is a procedure performed by your cardiologist to open a blocked or almost blocked heart artery. Your cardiologist will use a special device to open your clogged heart artery. The PCI often times will be performed along with your cardiac catheterization.



Cardiac Surgery (Coronary Artery Bypass Grafting or CABG) – Some blockages in heart arteries may not be fixed with PCI and require open heart surgery / CABG. CABG is a surgical operation performed by a heart surgeon to bypass the blood supply around the blockages in your heart arteries. Your surgeon will use the veins from your legs or the artery on the inside of your chest wall to bypass and connect the arteries to your heart to improve blood supply to your heart muscle. You will be in the hospital for several days after your heart surgery.

WHAT CAN I EXPECT WHILE I AM IN THE HOSPITAL?

The amount of time you stay in the hospital and the recovery time depends on the degree of your heart disease. If you come to the hospital for a scheduled procedure, you may go home on the same day of your procedure or you may stay overnight and go home early in the morning.



If you have a heart attack the amount of time you stay in the hospital will be based on how much damage has occurred to your heart.

Any heart attack is serious. Some heart attacks require emergency treatment – you must have a cardiac catheterization and PCI as soon as possible. Other heart attacks require you to be in the hospital and started on medications. You may also need a cardiac catheterization within 24-48 hours.

You will have a heart monitor. Your blood pressure, heart rate, temperature, oxygen and breathing will be checked frequently. You will also have blood tests and ECGs.

You may not be allowed to eat ("NPO" status) in preparation for some testing. The tests will help the doctor to determine a treatment plan.
After about two days, your heart will start to relax and your risk for having another heart attack goes down. You will be encouraged to take part in your daily care. Frequent walking is important to your recovery.

It is not unusual for you to feel tired. You may not be up to seeing visitors while you are in the hospital. It is important for you to rest and begin your recovery.

You will receive information about your nutrition, medication, exercise, and life style changes. It is important to understand your plan of care for when you are home. Please ask questions if you do not understand anything or need more information.

RECOVERY PERIOD:

Prognosis – How quickly you recover from your cardiac event depends on you. Your cardiologist will review if your heart function is normal or if you have any damage to the heart muscle. Even if your heart has been damaged, there is a very good chance your heart can recover. You can make your heart healthy again and improve your quality of your life by doing these important things: take your medications as directed, control your blood pressure, maintain a healthy weight, control your blood sugar and cholesterol, stay active, go to cardiac rehab, and eat healthy foods.

You will be given specific instructions related to your recovery period after you leave the hospital to include: when you may resume activities and exercise, the pace at which you should increase activity and exercise, when you can drive, and when you may return to work.

KNOW YOUR MEDICATIONS

When you have heart disease you may need some or all medications listed below. It is very important for you to take the right medications at the right dose for your heart – as prescribed and directed by your doctor. It is also very important to bring all medication bottles and your pillbox to each clinic visit and to every emergency room or hospital visit. Carry an updated medication list with you at all times and tell your doctor what medications you are taking. **Please take your medicine as directed by your doctor – this will help you live longer, feel better and stay out of the hospital.**

DO NOT stop taking your aspirin or Antiplatelet medication unless your cardiologist tells you to stop. If instructed to stop by someone other than your cardiologist, please tell your cardiologist immediately.

Aspirin
Helps stop platelets (cells in your blood) from sticking together and forming a clot. Make sure that your daily Aspirin are safety coated tablets.

Antiplatelet Medications
Helps prevent blood clots for people who have received a stent to open an artery in the heart.

Aspirin or Antiplatelet medications may increase the risk of bleeding if your blood becomes too thin.

Please let your doctor know if you have increased bleeding or bruising.

DO NOT STOP taking your medicine – talk to your doctor first.

Cholesterol lowering medications
– Statins, Fibrates, Niacin, Fish Oil
Helps reduce the risk of heart attacks and strokes.
Lowers LDL ("lousy" or "bad") cholesterol, raises HDL ("healthy" or "good") cholesterol, and lowers triglyceride levels.

Beta Blocker
Helps your heart work smarter, not harder by slowing your heart rate and decreasing your heart's need for oxygen. Also helps control blood pressure and reduces the risk of abnormal heart rhythms.

ACE Inhibitors or Angiotensin Receptor Blocker (ARB)
Will be prescribed if you have heart disease with a weak heart muscle. These medicines help improve the strength or pumping of the heart muscle by preventing changes ("remodeling") to the muscle.

Nitroglycerin
Anyone who has Coronary Artery Disease or had a heart attack should always have a current supply of nitroglycerin. Nitroglycerin is used to relieve chest pain or symptoms that are caused by decreased blood flow to the heart. See page 30 for details on how to take.

TIPS FOR TAKING YOUR MEDICATIONS

- Use a pillbox marked with each day of the week. Fill the pillbox at the start of each week and place it somewhere easy to find.
- If you forget to take a dose, do not double it. Instead, take it as soon as you remember, as long as the next dose is not due within a few hours. If it is due in a few hours, skip the missed dose and get back on your regular schedule.
- If you are having side effects that bother you, **do not stop taking the medication without talking with your doctor.**
- If you experience severe side effects, call 9-1-1 immediately.
- If you are having trouble paying for your medications, ask your doctor or pharmacist about less costly drugs or for financial help programs.

MEDICATIONS TO AVOID

- If you need medication to treat mild pain such as a headache, acetaminophen (Tylenol®) is a safe alternative to NSAIDs in most patients.

  Non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil®, Motrin®), and naproxen (Aleve®) can worsen your heart and kidney function. They may also increase your chance of bleeding. Ask your doctor which pain medication is best for you.
- Decongestants and several cough and cold products can increase your blood pressure or heart rate. If you have a cough or cold, please check with your pharmacist about what over the counter medications are safe for you to take. Saline nasal spray is a safe alternative.
- Some herbal medicines and vitamins may cause problems with your heart medications. It is important to ask your doctor if herbal medicines and vitamins are safe for you to take.

AVOIDING MEDICATION MISTAKES

Your medication list should include prescription medications, over-the-counter medications, herbs, and vitamins. Remember to keep an updated medication list with you at all times in case of a medical emergency.

Before you leave the clinic or hospital, always:

- Ask for a list of the medications that you should be taking at home.
- Have a doctor review the medications with you.
- Be sure you understand how these medications should be taken.
- Ask if a new medication means you should stop taking your old medication.

You should know the following about all your medications:

- Medication name and dose
- How to take it (for example, how often—two times a day)
- What to do if a dose is missed
- Possible side effects
- What foods or medications can affect your medications
- If any tests are needed to monitor your response and safety of the medication
- Cost - If you don't believe you can afford a medicine that your doctor wants you to take, please talk to us.

Do NOT skip or stop taking your medicine!

We can help you find another medicine or help you get patient assistance.
Talk to your pharmacist or doctor if you have questions about any of your medications.

MY HEART MEDICATIONS ARE (CHECK ALL THAT APPLY):

Aspirin

☐ My Aspirin dose is_____mg once a day.
☐ I am not taking Aspirin because_____

Antiplatelet

☐ My Antiplatelet medicine is
The dose is_____ mg _____times a day.
☐ I will be taking my Antiplatelet medicine for at least one year.
☐ I will only stop this medicine if my cardiologist tells me to stop.

Cholesterol Lowering Medication

☐ My cholesterol lowering medicine is
The dose is_____ mg once a day.
☐ I am not taking cholesterol lowering medicine because _____

Beta Blocker

☐ My Beta Blocker medicine is
The dose is_____ mg _____times a day.
☐ I am not taking a Beta Blocker because _____

ACE or ARB

☐ My ACE /ARB medicine is
The dose is_____ mg _____times a day.
☐ I am not taking an ACE or ARB because _____

Nitroglycerin

☐ I have a prescription for Nitroglycerin that I will take if I have chest pain or symptoms from decreased blood flow to the heart.

WHY DID I DEVELOP HEART DISEASE?

Risk factors increase your chances of developing heart disease or having a heart attack. They are different for each person. Risk factors can be divided into two types:

Non-Modifiable Risk Factor: Something that you cannot change and cannot be treated.
Modifiable Risk Factor: Something that IS in your control. You can make health and lifestyle choices to change these types of risk factors.

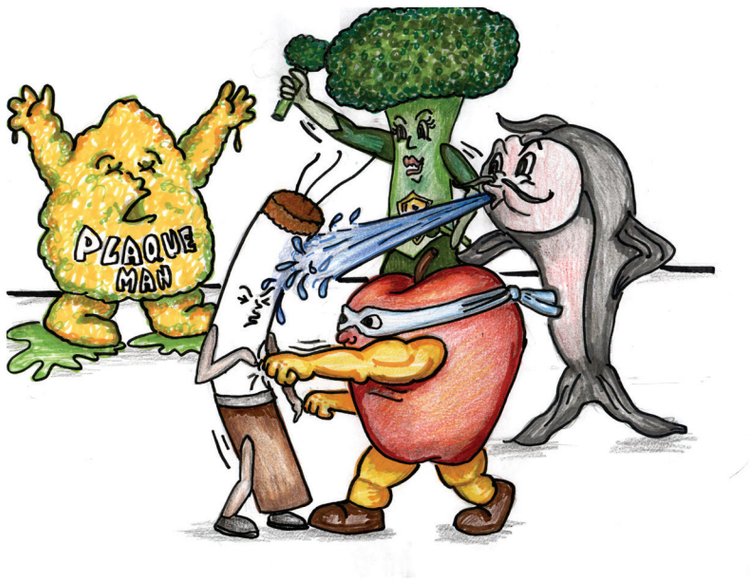
What are your risk factors?

Check the boxes below for your risk factors:

Non-Modifiable Risk Factors (I cannot change)	Modifiable Risk Factors (I can change)
☐ Age > 60	☐ High Blood Pressure
☐ Male	☐ Tobacco Use/Exposure
☐ Family History of Heart Disease or Heart Attack	☐ Diabetes
	☐ High Cholesterol
	☐ Lack of exercise and low activity
	☐ Unhealthy Weight / Overweight
	☐ Drink more than 2 alcoholic beverages a day
	☐ I often eat salty, fried or greasy foods
	☐ I have significant stress that you do not manage or control

Now that you have identified some of your risk factors, we will provide you with information that will be included in your treatment plan.

YOUR RISK FACTORS?



CONTROL YOUR BLOOD PRESSURE

Blood pressure is the amount of pressure from your circulating blood against the walls of the arteries in your body. Your blood pressure will rise and fall based on what you are doing or feeling throughout the day. If your blood pressure stays high for a long time it causes wear and tear on blood vessels that can cause serious health problems. High blood pressure can put you at risk for a stroke, heart attack, heart failure, kidney problems or even death.

Anyone can develop high blood pressure, including children. About one in three Americans has high blood pressure. Most of the time high blood pressure has no warning signs or symptoms, so people do not know they have it.

High blood pressure is diagnosed by your Provider. If you do not have a way to check your blood pressure at home, when you are out in the store or pharmacy you can check it on one of the automatic machines.

Below are the numbers for blood pressures that are normal and elevated. Please keep a record of any blood pressure numbers you check and bring them with you to any of your doctor's appointments.

BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (upper number)		DIASTOLIC mm HG (lower number)
Normal	Less than 120	AND	Less than 80
Elevated	120-129	AND	Less than 80
High Blood Pressure (Hypertension) Stage 1	130-139	OR	80-89
High Blood Pressure (Hypertension) Stage 2	140 or higher	OR	90 or higher
Hypertensive Crisis (consult your doctor immediately)	Higher than 180	AND/OR	Higher than 120

You can do many things to help prevent or control high blood pressure: Get your blood pressure checked by your doctor, eat a healthy diet, maintain a healthy weight, be physically active, limit alcohol use, don't smoke, prevent or manage your diabetes. All of these are discussed in the next several pages.

It is important that you know YOUR numbers. My blood pressures have been:

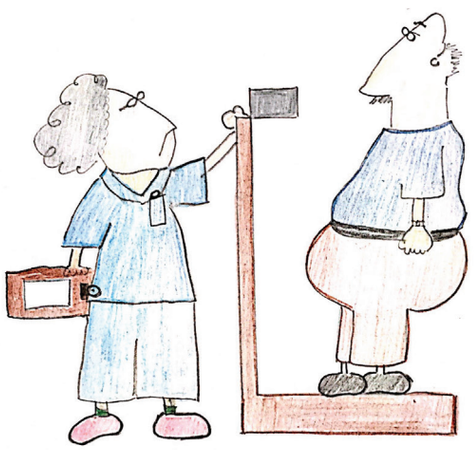
_____/_____ _____/_____

_____/_____ _____/_____

_____/_____ _____/_____

Healthy Weight

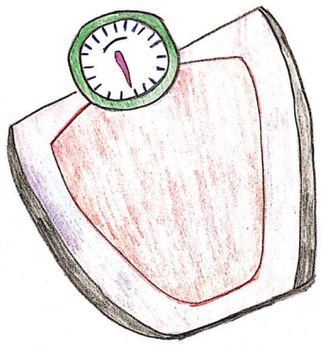
Being overweight increases your risk for heart disease, stroke, and many other conditions and illnesses. Obesity harms more than just the heart and blood vessels. Obesity can raise blood cholesterol levels, increase blood pressure, lower "good" HDL cholesterol, and lead to diabetes. Maintaining a healthy weight is important for overall health and wellness. A proper diet and exercise are the easiest and most effective ways to lose weight or maintain a healthy weight.



Body Mass Index (BMI)

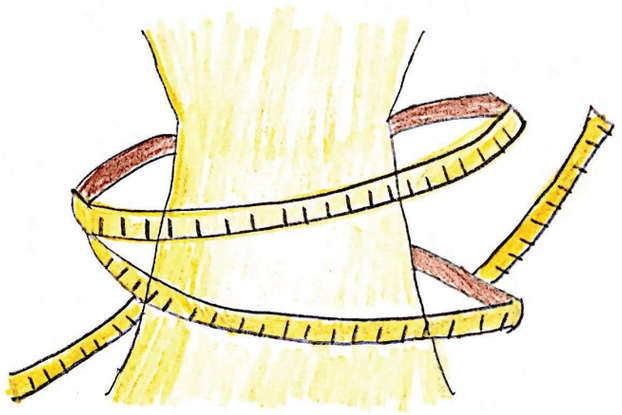
BMI is a numerical value of your weight in relation to your height. BMI is simply an inexpensive, easy-to-perform tool that screens for weight category (underweight, normal, overweight, obese). However, BMI does not take into consideration body composition (muscle mass, bone, etc). (1 kg = 2.2 pounds; 1 m = 39.37 inches)

BMI Ranges
Underweight: < 18.5 kg/m2
Normal: 18.5-25 kg/m2
Overweight: 25-29.9 kg/m2
Obese: > 30 kg/m2



The Importance of Waist Circumference
Waist circumference is a measurement of the distance around your abdomen and is used to assess abdominal fat. A high amount of abdominal fat may increase your risk for type 2 diabetes, high cholesterol, high blood pressure, heart disease, and stroke.

Your risk increases if your waist circumference is:
- Over 35 inches for women (less than 31.5 inches is ideal)
- Over 40 inches for men (less than 37 inches is ideal)



Your waist circumference alone does not define your level of health risk. Your body mass index (BMI) and other lifestyle indicators such as eating habits, smoking, and physical activity can also affect your health.

CONTROLLING YOUR BLOOD SUGAR "GLUCOSE"

Cardiovascular disease is the leading cause of early death among people with diabetes. Controlling your blood sugar means taking care of your heart. Healthy nutrition habits and exercise are important parts in managing your blood glucose. Individuals with prediabetes or type 2 diabetes are more likely to have high cholesterol, high blood pressure, and weight issues like obesity. All of these factors increase the risk of developing cardiovascular disease and other serious health conditions.

Lifestyle changes can reduce your risk of developing, as well as the progression of, type 2 diabetes.

TIPS TO LOWER YOUR BLOOD SUGAR:

1. **Control your carb intake.** Your body breaks carbs down into sugars and then insulin moves the sugars into cells. When you eat too many carbs or have problems with insulin function, this process fails and blood glucose levels rise.

2. **Increase your fiber intake.** Fiber slows carb digestion and sugar absorption.

3. **Drink water.** Drinking enough water may help you keep your blood sugar levels within healthy limits. In addition to preventing dehydration, it helps your kidneys flush out the excess blood sugar through urine.

4. **Implement portion control.** Potion control helps regulate calorie intake and can lead to weight loss.

5. **Control stress levels.** Hormones secreted during stress can cause blood sugar levels to go up.

6. **Exercise regularly.** Regular exercise can help you lose weight and increase insulin sensitivity. Increased insulin sensitivity means your cells are better able to use the available sugar in your bloodstream.

7. **Lose weight.** A 7% reduction in body weight can decrease your risk of developing diabetes by up to 58%.

8. **Get enough sleep.** Poor sleeping habits and a lack of rest also affect blood sugar levels and insulin sensitivity. They can increase appetite and promote weight gain.

9. **Stop smoking.**

10. **Take medications as prescribed.**

CHOLESTEROL

Cholesterol is a soft, fat-like, waxy substance only found in animal products. Too much cholesterol leads to a build-up of fatty material and debris (called plaque) on the walls of the arteries supplying blood to the heart and other organs. Some cholesterol is needed by the body. In fact, cholesterol plays a role in normal body functions, including the formation of cell walls, production of hormones, and manufacture of bile acids, which are needed for digestion. Because the liver has the ability to make all the cholesterol our bodies need, there is no need for extra cholesterol in the diet.

Cholesterol circulates in our blood and as the level increases, so does the risk to our health. Having high cholesterol is a major risk factor for coronary artery disease, heart attack, and stroke. The good news is, with proper nutrition and exercise, you can help control your cholesterol levels.

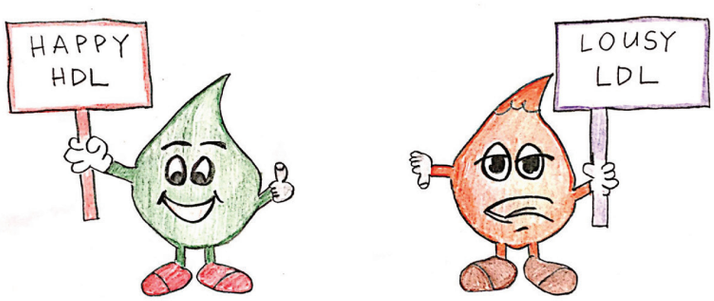
TYPES OF CHOLESTEROL

There are two types of cholesterol: low-density lipoprotein (LDL) and high-density lipoprotein (HDL). In addition to cholesterol, your physician may check your triglyceride levels (most common type of fat found in the body) to help assess your risk for heart disease.

Low-density lipoprotein (LDL or "lousy" cholesterol): a high level of LDL in your bloodstream leads to plaque buildup. Coronary artery disease happens when the plaque buildup is in the arteries of your heart. The plaque slows down or blocks blood flow to your heart. This can cause angina (chest pain) or a heart attack.

High-density lipoprotein (HDL or "happy" cholesterol): HDL helps to remove other forms of cholesterol from your bloodstream. Higher levels of HDL are associated with a lower risk of heart disease. Genetic factors, type 2 diabetes, being sedentary, and being overweight can lower your HDL.

Triglycerides: most common type of fat found in your blood. Any food that your body does not immediately use, gets converted to triglycerides and stored for later use. People with high triglycerides often have high cholesterol as well. Several factors can contribute to high triglycerides: obesity, not exercising, smoking, alcohol consumption, a diet high in carbohydrates, and sometimes genetics can play a role. A high level of triglycerides can increase your risk for heart disease.



Know your numbers:

Blood Test	My Numbers:	Desired Range
Low-density lipoprotein (LDL)		< 70 mg/dL
Triglycerides		< 150 mg/dL
High-density lipoprotein		> 40 mg/dL
Total cholesterol		< 200 mg/dL

HEART HEALTHY EATING PLAN

Limit saturated and trans fats:

- Limit saturated fat to 5-6% or less of total calories, which is 11-13 grams or fewer per day. Foods high in saturated fats include fatty cuts of meat, poultry with skin, whole milk dairy foods, butter, cheese, lard, and coconut and palm oils. Read food labels and replace foods high in saturated fats with leaner, lower-fat animal products or vegetable oils, such as olive, canola, peanut, safflower, sunflower or corn oil.
- Avoid trans fats. Trans fats are found primarily in snack foods, with "partially hydrogenated" oils, such as some desserts, microwave popcorn, frozen pizza, stick margarine and coffee creamers.
- Read food labels to select foods that have no trans fat and less than 2-3 grams saturated fat per serving.

Limit the amount of sodium that you eat to less than 2,000 milligrams (mg) per day:

- Read food labels and choose products that have less sodium for the same serving size.
- Choose low-sodium, reduced sodium, or no-salt added products.
- Choose fresh, frozen, or no-salt added foods instead of pre-seasoned, sauce-marinated, brined, or processed meats, poultry and vegetables.
- When cooking, limit your use of premade sauces, mixes, and "instant" products such as rice, noodles and ready-made pasta.
- Flavor foods with herbs and spices instead of salt.

Limit calories you consume each day from added sugars:

- Choose unsweetened or whole fruits for snacks and dessert.
- Choose drinks without added sugar such as water, low-fat or fat-free milk, or 100% fruit or vegetable juice.
- Limit intake of sweetened drinks, snacks and desserts by eating them less often and in smaller amounts.
- The American Heart Association recommends:
  - No more than 6 tsp or 24 gm sugar a day for most women.
  - No more than 9 tsp or 36 gm sugar a day for most men.

Eat more omega-3 fats:

- Fish is a good source of omega-3 fats. Good choices include salmon, tuna, mackerel, herring and anchovies. Limit total intake to 3 ounces of fish one to two times per week (or six ounces total).
- **Avoid the four fish species that are higher in mercury** - shark, swordfish, tilefish and king mackerel.
- Other foods with omega-3 fats include walnuts, almonds, Brazil nuts, hazelnuts, pecans, spinach, canola and soybean oils.
- Chia seed or flaxseed are other good sources of omega-3 fats. Have it as flaxseed oil, add ground, milled flaxseed or chia seeds to cereal or sprinkle it on salad. Limit to two Tbsp/day.

Gradually increase fiber intake:

- A daily goal for women is 25 grams per day, while a goal for men is 38 grams per day.
- Fruits, vegetables, whole grains, legumes, dried beans and root vegetables are good sources of fiber.
  - Aim for more than five servings of fruits and vegetables per day.
  - Have 3 ounces (oz) of whole grain foods every day.

Choose skin-less chicken or turkey–baked, broiled, or grilled – as your animal sources of protein. Limit total intake to six ounces per day.

Avoid red meat. If you choose to eat red meat, select only the leanest cuts (beef, pork, veal, or lamb). Eat more plant-based meals, using beans and soy foods for protein.

Try to include two grams of plant stanols/sterols per day:

- Plant stanols/sterols are derived from plants. Examples include fortified margarines (ie. Take Control®, Benecol®), juice, and vegetable oils.

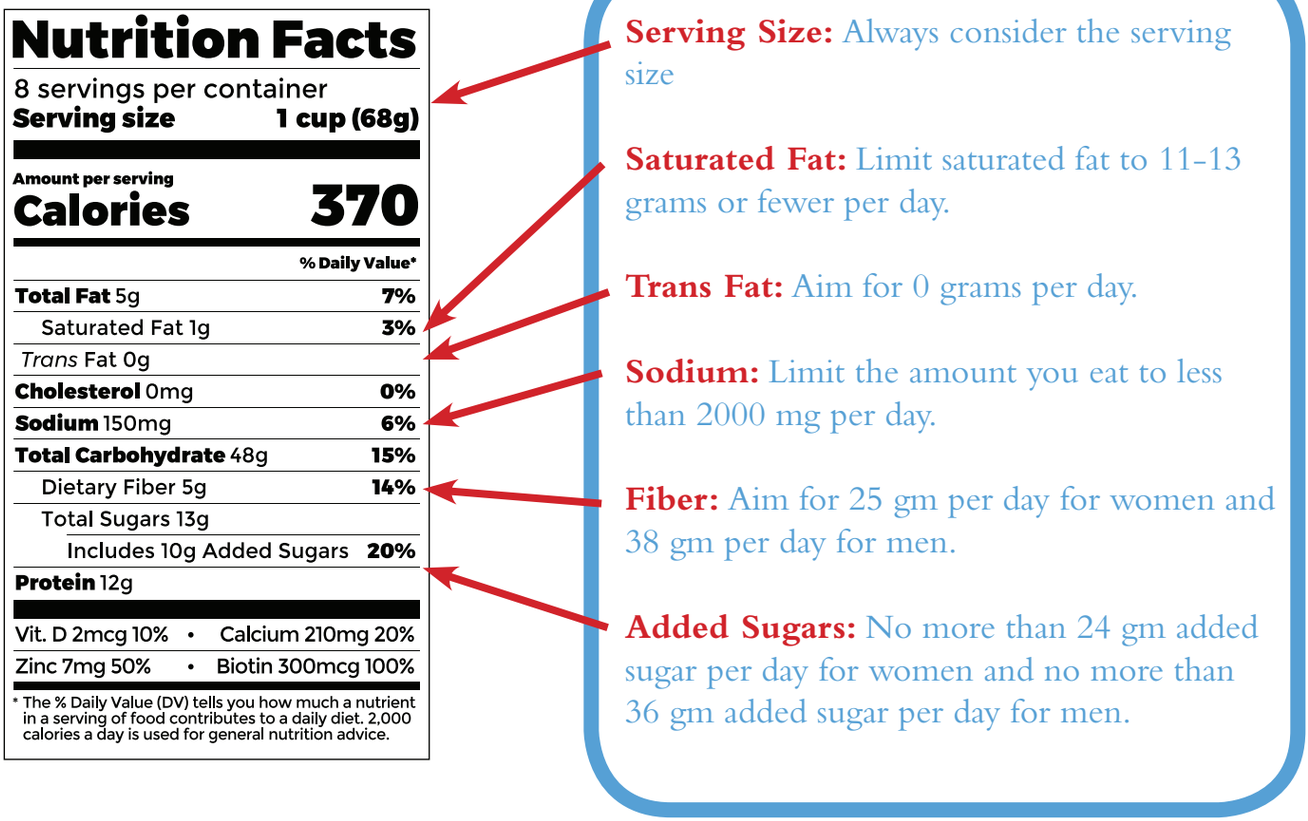
Maintain a healthy weight

If you are overweight, losing weight will help lower your total cholesterol and raise your high density lipoprotein (HDL)

Exercise:

Aim for 30-40 minutes of aerobic exercise at least five times per week to help raise your HDL

READING NUTRITION LABELS



NUTRITION CLAIMS

Free – this product contains negligible amounts of fat, saturated fat, cholesterol, sodium, sugar and/or calories

Low Fat – 3 grams of fewer per serving

Low Sodium – Fewer than 140 mg per serving

Low Calorie – 40 calories or fewer per serving

Light – Contains less than 1/3 fewer calories or half the fat and/or sodium of the regular product. (It must state which ingredient is light.)

LOOK FOR ITEMS WITH THE AMERICAN HEART ASSOCIATION HEART-CHECK CERTIFICATION.

American Heart Association CERTIFIED Meets Criteria For Heart-Healthy Food

Standard requirements for this certification are:

- Total fat: < 6.5g
- Trans fat: ≤ 1g
- Cholesterol: ≤ 20 mg
- Sodium: one of four limits applies, depending on the food product: up to 140mg, 240mg, or 360mg, or 480mg per serving

TWO BEST EATING PLANS FOR OVERALL HEALTH

MEDITERRANEAN DIET

- Includes activity and social connections at the base
- Rich in whole grains, fruits, vegetables, herbs and spices, beans, nuts, and healthy fats like olive oil
- Fish and seafood twice a week
- Dairy foods- especially those fermented like yogurt and small servings of cheese (grated, shredded) are eaten frequently
- Red meat and sweets rarely eaten
- Eggs and poultry occasionally
- May help with weight loss

THE DASH DIET

- Rich in fruits, vegetables, low fat or nonfat dairy
- Includes mostly whole grains
- Includes some lean meats, fish, and poultry
- Includes nuts and beans
- High in fiber
- Low to moderate fat
- Helps lower blood pressure and cholesterol
- May help with weight loss

DRINKING ALCOHOL

Alcohol Intake

Those adults who choose to drink alcohol beverages should do so sensibly and in moderation. Moderate drinking is defined by the federal government's 2015-2020 Dietary Guidelines for Americans as up to one drink per day for women and up to two drinks per day for men. This limit is based on differences between the sexes in both weight and metabolism. The following count as one drink:

- 12 fluid ounces of regular 5% beer
- 5 fluid ounces of 12% wine
- 1.5 fluid ounces of 40% (80 proof) distilled spirits or liquor

Drinking more than moderation can increase your risk of heart disease in many ways:

- Increased calorie intake may lead to weight gain
- Increased risk of high blood pressure
- Elevated triglycerides (fats) in the bloodstream
- Increased risk of developing diabetes
- Excessive drinking and binge drinking can lead to stroke
- Increased risk of heart failure and other forms of cardiovascular disease

Alcohol can also interfere with some medications and increase your risk for alcoholism, accidents and suicide.

More tips:

- Talk with your doctor or pharmacist before consuming alcohol, as it may interfere with certain medications
- If you don't drink alcohol, don't start
- Manage your stress with moderate exercise instead of alcohol consumption
- If you have questions, talk to your doctor regarding the benefits and risks of consuming alcohol in moderation

EXERCISE AND YOUR HEART

BENEFITS OF EXERCISE

- Decreases stress and anxiety
- Can lower blood pressure
- Decreases bad cholesterol
- Decreases future risk of cardiovascular event

EXERCISE GUIDELINES

- Wait at least 1 hour after a full meal before exercise
- Drink water before, during and after exercise
- Wear comfortable clothes and shoes. Wear layers to prevent overheating/chilling
- Do not exercise in extreme heat or cold, it is recommended to exercise in a controlled environment (such as mall or shopping center for example)
- Try to find a flat place to walk; hills/inclines are more work.
- Take all medications as prescribed by your doctor.
- If you experience signs/symptoms of chest pain or pain, severe shortness of breath, dizziness/light headedness or irregular pulse, nausea or sudden onset of unusual symptoms, stop exercise and notify your doctor.

  If symptoms do not go away in five minutes call 911

EXERCISE PROGRAM

It is good for your heart and overall health to exercise. Walking is a great way to start an exercise program. Begin each exercise session with a warm up by exercising at light level for 3-5 minutes (leg exercises); continue with a walking program as tolerated, end with a cool down 3-5 minutes (leg exercises, stretching). Patients benefit from exercise/walking program 3-5x per week. Gradually increase your exercise over time and watch for signs/symptoms that your body is not tolerating the activities you are performing.

The following is a generalized walking program:

Week	Frequency	Duration
Week 1	2-3x per day	5-10 mins (each) = total less than 30 mins
Week 2	2-3x per day	10-15 mins (each) = total 20- 45 mins
Week 3	1-2x per day	20-25 mins (each) =total 20-50 mins
Week 4	1-2x per day	25-30 mins (each) =total 25-60 mins

EXERCISE EFFORT

There are two methods to help guide you in how hard you should be working when exercising.

Talk Test

1. No problem, easy to talk, sing
2. Can talk relatively easily---- this is the level you wan to be at during walking program
3. Too short of breath to talk

Rating of Perceived Exertion (RPE) Scale

This scale helps to measure how hard you are working when you are walking. It measures not just how short of breath you are with walking, but overall body and muscle fatigue.

BETWEEN 3 AND 4 IS THE GOAL

Rating of Perceived Exertion (RPE) Scale

LEVEL	HOW DO YOU FEEL?
1	I am resting
2	I am hardly working
3	Light effort, can talk easily
4	Starting to feel a little tired
5	Increased effort, slightly breathless
6	Moderately tired
7	Working hard
8	Very strenuous, I can't talk easily
9	Extremely tired, I need to stop soon!
10	Maximal effort - I have to stop NOW!

It is important to listen to your body during this time of recovery and during exercise. If your blood pressure medications or diuretics have changed or you have started new blood pressure or diuretics, this may affect how you feel when you change positions. Please change positions slowly and sit for a few minutes prior to getting up, to avoid getting dizzy.

SEXUAL ACTIVITY

After being diagnosed with a heart condition, such as heart attack you may want to know when it will be okay to have sex again. You can ask your doctor to help you know if or when is okay for you to have sex. Most people can have sex 2 to 3 weeks after they recover from a heart attack. Having sex is often compared to the energy to climb two flights of stairs. When you can do this without symptoms, such as chest pain or shortness of breath, you most likely have enough energy to start having sex again.

Some things to consider with sex after a heart attack

- Don't rush
- Be comfortable and rested
- Avoid being too hot or cold
- Wait 1-3 hours after eating

Stop and rest if you have symptoms such as chest discomfort or shortness of breath. Call 911, if your symptoms do not go away within 5 minutes with rest. Talk with your doctor if you do experience these symptoms before you try again.

Talk with your doctor before trying an erection-enhancing medicine. Some medicines for erection problems can cause serious problems if you also use a nitrate medicine, such as nitroglycerin.

CARDIAC REHABILITATION

Cardiac Rehabilitation is a medically supervised exercise program designed to help patients recover from a recent cardiac event.
The purpose of the program is to improve your overall health and fitness, decrease risk factors for future heart problems, and improve nutrition habits. Cardiac rehab can decrease fear and anxiety, increase independence and improve emotional well-being.

EXERCISE:

A personalized exercise plan is developed to meet your needs. Heart rate, heart rhythm, blood pressure, and rating of perceived exertion are monitored during each exercise session by rehab therapists.

DIETARY EDUCATION:

An individual dietary consult is scheduled when enrolled in the program. This is a 45-minute session with a registered dietitian. Additional sessions with a certified diabetes educator are available to assist patients with management of their blood sugar.

BENEFITS:

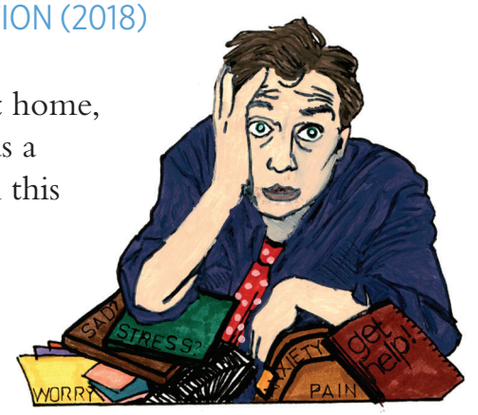
Medical evidence suggests that attending a cardiac rehabilitation program increases health and fitness and decreases risks of suffering another cardiac event. Other benefits include weight management, decreased anxiety and depression, and improved overall well-being.
Cardiac Rehabilitation consists of attending supervised exercise sessions three times a week for a period of 4-12 weeks. The length of time in the program is determined by staff through review of each patient's Individual Treatment Plan.

GETTING STARTED:

An order is placed for Cardiac Rehab when you are discharged from the hospital. Approximately 3-5 days following discharge a representative from Cardiac Rehab will contact you to discuss programs in your area and enrollment in a program.

STRESS MANAGEMENT

TIPS FROM "HEALTHY FOR GOOD" FROM AMERICAN HEART ASSOCIATION (2018) FOR MANAGING STRESS



Stress is a normal part of our lives. You may experience it at work, at home, with family interactions or in the community. You might feel stress as a result of being in the hospital. Your family might also feel stress from this experience and the changes to your health.

It is important to recognize when you feel stressed, and use tools to manage it. Remember that it is normal to experience stress, and it is possible to use these tips to help you manage it. With proper management, you can decrease the negative effects on your health.

TOP 10 EMERGENCY STRESS-STOPPERS

Emergency stress stoppers are actions to help you defuse stress in the moment. You may need different stress stoppers for different situations, and sometimes it helps to combine them. Here are some ideas:

1. Count to 10 before you speak or react.
2. Take a few slow, deep breaths until you feel your body un-clench a bit.
3. Go for a walk, even if it's just to the restroom and back. It can help break the tension and give you a chance to think things through.
4. Try a quick meditation or prayer to get some perspective.
5. If it's not urgent, sleep on it and respond tomorrow. This works especially well for stressful emails and social media trolls.
6. Walk away from the situation for a while, and handle it later once things have calmed down.
7. Break down big problems into smaller parts. Take one step at a time, instead of trying to tackle everything at once.
8. Listen to music or something relaxing to help you deal with road rage.
9. Take a break to pet the dog, hug a loved one or do something to help someone else.
10. Work out or do something active. Exercise is a great way to lower stress.

UNDERSTANDING YOUR EMOTIONS: ANXIETY, DEPRESSION, FEAR

I feel…

It is normal to have many different feelings when you are told that you have heart disease or have had a heart attack. Some of the feelings you may experience are depression, anxiety, or fear. Everyone shows emotion in different ways. You may feel sad, or feel like you have no energy. You may find yourself not wanting to join in social activities, or your usual activities you did before your heart attack. You may be afraid of changing your lifestyle, having another heart attack, or death. You may feel alone or not want to talk to anyone about how you are feeling.

NEXT STEPS:

If you have any feelings of anxiety, depression or fear, please know it doesn't have to stay this way. Talk to your family and friends as well as your doctor. Let them know how you are feeling. It is also helpful to monitor how long you have felt this way.

Your doctor may suggest talking to a Counselor, or taking a medication to help manage your depression. Support groups are a great resource as well, to share your feelings and hear from others about their journey.

Everyone defines community differently. Your community may be your neighbors, family, friends, faith group or volunteer group. Your community has resources that can provide you with support. Don't be afraid to reach out and ask for support.

TREATMENTS:

Studies have shown that exercise can help with depression. It is important to follow your doctor's guidance to make sure you are safe to exercise. Also, eating a healthy diet can help with energy levels. Some medications that help people who have had a heart attack, can cause you to feel more tired when you first start taking them. Be patient with yourself…it does get better. You will start to have more energy as your body adjusts to the medications.

It is worth saying again: It is so important to talk to someone about how you are feeling. Keep your family and doctor updated.

SMOKING AND YOUR HEART

THE EFFECTS OF SMOKING AND TOBACCO PRODUCTS

Cigarette smoking is the most important preventable cause of premature death in the United States. Cigarette smokers are two to three times more likely to die from coronary heart disease than non-smokers. A cigarette smoker has about double the risk of having a heart attack as a non-smoker. For the smoker who has high blood pressure and high cholesterol, the risk is eight times greater.

WHAT ARE THE BENEFITS OF QUITTING SMOKING?

After two weeks to three months of smoke-free living: your circulation and lung function begin to improve. Walking becomes easier.

After one to nine months: Fatigue and shortness of breath decreases.

At one year: Excess risk of coronary heart disease is decreased to ½ that of a smoker.

At fifteen years: Your risk of coronary heart disease and death is now similar to that of a person who has never smoked.

WHAT SHOULD I DO IF I WANT TO QUIT SMOKING?

The letters in the word **"START"** can help you remember the steps to take:

- **S = Set a quit date**
- **T = Tell family, friends, and the people around you that you plan to quit**
- **A = Anticipate or plan ahead for the tough times you'll face while quitting**
- **R = Remove cigarettes & other tobacco products from your home, car and work**
- **T = Talk to your doctor about getting help to quit**

HOW CAN MY DOCTOR OR NURSE HELP?

Your doctor or nurse can give you advice on the best way to quit. He or she can also put you in touch with counselors or other people you can call for support. Plus, your doctor can give you medicines to:

- Reduce your craving for cigarettes
- Reduce the unpleasant symptoms that happen when you stop smoking (called "withdrawal symptoms").

UNC REX Healthcare has a program that can help you quit smoking. It is a text based support program called Kare-N. If you are interested, please let us know and one of our quit coaches can sign you up for the program.

You can also get help from a free phone line (1-800-QUIT-NOW)

IT'S TIME TO GO HOME, NOW WHAT?

Keep the lines of communication open with your family because they are very important to your well-being. **How your family and friends can help you:**

- Practice lifestyle changes with you
- Allow and help you to do as much for yourself as possible
- Listen to you
- Learn CPR – just ask the nurses and we can provide this education for them before you go home
- Take care of their own health

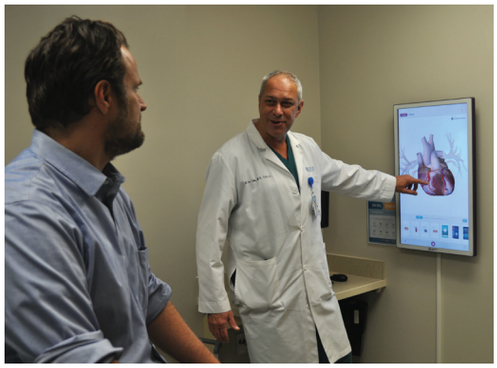
Knowing your risk factors is the first step to prevent complications from heart disease. Following YOUR treatment plan is the most important thing you can do to maintain your health and wellbeing.

TAKE YOUR MEDICATIONS AS PRESCRIBED SO THEY WILL HELP YOU:

- Medications need to be taken every day, even when you feel fine.
- Create a routine to take your medications at the same time each day.
- Never change your medication dosage or stop taking medication on your own.
- If you miss a pill do not take two at a time.
- Plan ahead. Refill prescriptions at least one week before they run out.
- Tell your doctor if any medication causes side effects.
- **Tell your doctor if you have problems affording your medications.**

FOLLOW UP CARE:

- Keep your appointment with your Cardiologist.
- Keep your appointment with your Primary Care Provider and follow up regularly.
- Always keep a list of your medications and bring it with you to all appointments.



LISTEN TO YOUR BODY:

NOTIFY YOUR PROVIDER IF YOU HAVE ANY OF THE FOLLOWING:

- Brief episodes of chest discomfort that go away with rest or your Nitroglycerin.
- Chest discomfort that occurs at rest or wakes you up from sleep.
- Increasing feeling of no energy.
- Decreased ability to do your normal activities.
- Feeling short of breath or difficulty catching your breath when you are exerting.
- Any change or increase in the intensity or frequency of your usual chest discomfort symptoms.
- You have had to increase the amount of Nitroglycerin you typically take to manage your chronic chest discomfort.
- Women can experience chest discomfort, but often experience other symptoms particularly shortness of breath, nausea/vomiting and back or jaw pain.

WHAT ARE SYMPTOMS OF A HEART ATTACK?

- Chest discomfort that may feel like pain, pressure, tightness or squeezing in your chest that lasts more than a few minutes and may come and go. This may radiate to your shoulder, arm, jaw or back.
- Shortness of breath without any other reason.
- You may have associated nausea, sweating or shortness of breath with the chest discomfort or shortness of breath.
- If you have heart disease, be aware of the "heart" symptoms that you experienced in the past as this could be warning you of further blockages or heart attack.

WHAT SHOULD YOU DO IF YOU EXPERIENCE CONCERNING SYMPTOMS FOR A HEART ATTACK?

If you experience symptoms that are concerning for a heart attack, act quickly as every minute matters:

- **Call 9-1-1 immediately** so that an ambulance will be sent to your location. **DO NOT drive yourself.**
- Unlock your door if you are alone so that the paramedics can easily get to you.
- Stop what you are doing – do not exert yourself.
- Chew four non-coated Baby Aspirin.
- Take your Nitroglycerin: Place one tablet under your tongue. If you are still having concerning symptoms you may take a second tablet in five minutes. If after two tablets you are still having concerning symptoms, you may take a third tablet in five minutes from the second tablet.
  DO NOT take more than three tablets.

FREQUENTLY ASKED QUESTIONS:

Q: DO I HAVE DAMAGE TO MY HEART AND IF SO, WHEN WILL THEY RECHECK TO SEE IF IT IS IMPROVED?

Your doctor should talk to you about this information before you leave the hospital. If we have not, please ask us before you leave so we can answer this question for you.

Q: WHEN WILL I START CARDIAC REHAB?

You will receive a call from the cardiac rehab staff in about 3-5 days after you go home. You will be provided with a time for an onsite evaluation and a date to start the program. See pages 24.

Q: HOW LONG DO I NEED TO TAKE MY MEDICATIONS?

Many of the medications that you are taking for your heart will be lifelong. Your doctor will discuss this with you at each of your follow up clinic visits.

Q: WHEN CAN I RESUME SEXUAL ACTIVITY?

You can ask your doctor to help you know if or when is okay for you to have sex. Most people can have sex 2 to 3 weeks after they recover from a heart attack. See page 23 for more information.

Q: WHY DID THIS HAPPEN AND WHAT CAN I DO TO REDUCE THE CHANCES OF THIS HAPPENING AGAIN?

There are many risk factors that make you at risk for heart disease. It is important that you know your risk factors and take steps to control and improve them. See pages 10-21.

Q: WHEN CAN I RETURN TO WORK AND/OR RESUME EXERCISE?

Most people can return to work in 3-5 days after a simple procedure like a stent. If you have had a heart attack you can return to work after 2 weeks.

We want everyone to begin activity after you return home from the hospital and slowly increase the amount and intensity. Please ask your Provider to discuss your individual plan with you before you leave the hospital.

Q: WHAT SHOULD I DO IF I HAVE CHEST PAIN?

See pages 29-30, and 32.

Q: CAN I HAVE A MRI IF I HAVE A STENT?

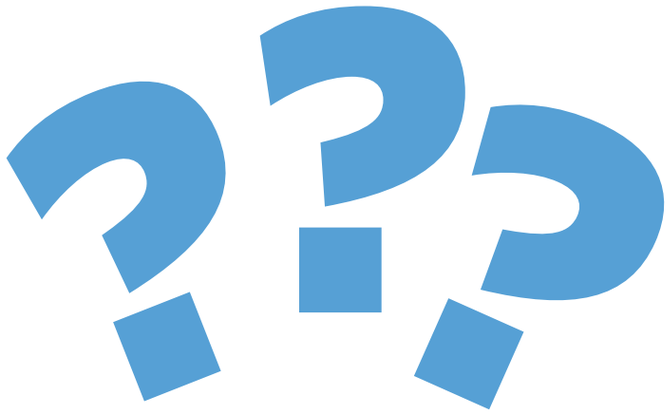
Yes, if you had a stent placed you will need to wait 2 weeks before you can have a MRI done.

Q: HOW OFTEN WILL I NEED TO SEE MY DOCTOR?

You will need to see your Primary Care Provider on a regular basis. You will also see your Cardiology Provider after you go home and then at least one time a year.

Q: ARE THERE SUPPORT GROUPS FOR PEOPLE THAT HAVE BEEN THROUGH THE SAME THING AS ME?

Yes. Mended Hearts has a local chapter in Raleigh. See page 36 for more information. You can also contact your employer or your place of worship for additional resources.



CHEST PAIN OR HEART ATTACK?

1. Follow your doctor's directions for taking medicine, and how to eat and exercise.
2. Watch for signs – increased chest discomfort or trouble breathing with activity.
3. Get help from your doctor **NOW** or **Call 9-1-1**

Green ----------Go

- No shortness of breath / trouble breathing
- No chest discomfort, jaw or arm pain
- No feeling dizzy
- No upper stomach pain
- No nausea
- No cold sweats

What should you do?

- Take your pills as directed.
- Bring pills with you to doctor appointments.
- Eat healthy
- Exercise: Goal 30 minutes 5 days a week
- Start slow and increase to goal if not there yet.
- No Smoking

Yellow----------Caution

- Shortness of breath
- Chest discomfort, jaw or arm pain
- Feeling dizzy or lightheaded
- Upper stomach pain
- Breaking out in cold sweats

What should you do?

- **STOP** your activity
- Write down the symptoms and tell your doctor:
  - Date, time, what you were doing, what you felt, how long lasted.
- If you have Nitroglycerin, take it as directed.
- Call your doctor for additional instructions or for an appointment to be evaluated.

Red------Danger – TAKE ACTION

If these symptoms are new to you or won't go away:

- Chest discomfort, jaw or arm pain
- Shortness of breath
- Upper stomach pain

What should you do?

Call your doctor immediately to report symptoms and request appointment.
If symptoms are SEVERE Call 9-1-1.

UNC REX Healthcare is committed to your recovery and well-being.

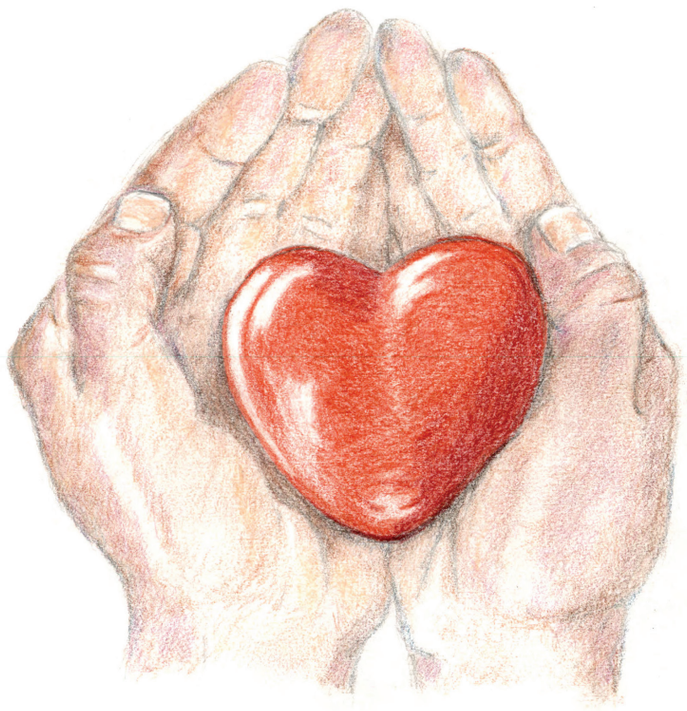
We hope that you will use the information in this booklet to guide you through your journey to heart health. We put our hearts into caring for yours. Thank you for allowing us to care for you.

Best regards,

Kirsten Riggs, MHA, BSN, RN
Vice President Heart & Vascular Services

Joel Ray, MSN, RN, NE-BC
Vice President Patient Care Services and Chief Nursing Officer

And your UNC REX Healthcare Heart & Vascular Services Healthcare Team



Information to manage your heart and health.

PLEASE PLACE A CHECKMARK IN EACH BOX TO CONFIRM YOUR UNDERSTANDING OF THE IMPORTANT ITEMS ON THIS CHECKLIST:

☐ I understand how a normal heart functions.

I understand my Diagnosis (check all that apply):

☐ Coronary Artery Disease (CAD) / Heart Disease
☐ Heart Attack or Myocardial Infarction (MI)

Check the statement that describes your heart function:

☐ I do not have any damage to the functioning of my heart.
☐ I have damage to the functioning of my heart. My heart function is _____%, and normal function is 55% or more

During this hospitalization I had the following procedures (circle all that apply):

Echocardiogram Stress Test Heart Catheterization Stent Angioplasty

☐ I understand and have been given education sheets for the heart medications that I will be taking after I go home that are listed on page 9.
☐ I have resources to get all of my medicine I will be taking when I go home.
☐ I will need help with getting my medications after I go home and I have talked to the case manager.

In addition to taking the medications listed above as prescribed, I have many other important things that I must do to keep my heart healthy. This includes:

☐ Control my blood pressure
☐ Control my blood sugar
☐ Attend Cardiac Rehab Program
☐ Exercise regularly
☐ Control my cholesterol levels
☐ Maintain a Healthy Weight
☐ Eat a Heart Healthy Diet
☐ Control Stress
☐ Understand the symptoms of depression and anxiety
☐ Follow up regularly with my primary care provider and my cardiology team

I have scheduled my first appointments after I go home with:

☐ My Cardiology Team on:_____ Time:_____
☐ My Primary Care Provider on:_____ Time:_____

IF YOU DO NOT KNOW THE ANSWER TO ANYTHING ON THE CHECKLIST ABOVE, PLEASE LET US KNOW BEFORE YOU LEAVE THE HOSPITAL SO WE CAN ANSWER ALL OF YOUR QUESTIONS. WE PUT OUR HEARTS INTO CARING FOR YOUR HEART.

RESOURCES

- American Heart Association: http://www.heart.org/HEARTORG/
  Customer Service 1-800-242-8721

- Quit Smoking: (1-800-QUIT-NOW) or go online: www.smokefree.gov.

- American Lung Association Freedom from Smoking on line reference: WWW.ffsonline.org

- Stop Smoking: http://www.heart.org/HEARTORG/HealthyLiving/QuitSmoking/Quit-Smoking_UCM_001085_SubHomePage.jsp

- Stress Management Tips: https://healthyforgood.heart.org/be-well/articles/3-tips-to-manage-stress

- Healthy Eating: Nutrition, Dining Out, Sample Recipes: http://www.heart.org/HEARTORG/HealthyLiving/HealthyEating/Healthy-Eating_UCM_001188_SubHomePage.jsp

- Remaining Active: http://www.heart.org/HEARTORG/HealthyLiving/PhysicalActivity/Physical-Activity_UCM_001080_SubHomePage.jsp

- Healthy Weight: http://www.heart.org/HEARTORG/HealthyLiving/WeightManagement/Weight-Management_UCM_001081_SubHomePage.jsp

- Hands Only CPR: http://cpr.heart.org/AHAECC/CPRAndECC/Programs/HandsOnlyCPR/UCM_473196_Hands-Only-CPR.jsp

- Resources and Information for Your Family / Support Team: http://www.heart.org/HEARTORG/Support/Support_UCM_001103_SubHomePage.jsp

- Silver Sneakers NC: http://www.medicaresolutionsnc.com/silver-sneakers-nc/

- Rex Wellness Programs: https://www.rexhealth.com/rh/wellness-centers/

- YMCA 12 week programs: https://www.ymcatriangle.org/

- Chronic Disease Self-Management Program at UNC Rex: Call (919) 784-4015
  Or register online www.rexhealth.com/livinghealthy

Mended Hearts Chapter #300

Mended Hearts is a national nonprofit organization offering the gift of hope and encouragement to heart patients, their families and caregivers for more than 60 years. Whether it be patients, spouses, family members, friends, or medical professionals, Mended Hearts brings together all of us who are faced with the realities of heart disease to form a network of caring individuals.

Our chapter is supported by NC Heart and Vascular and UNC REX Healthcare. We were accredited on November 19, 2001. We meet on the third Monday night of each month (EXCEPT IN DECEMBER) for our educational/support meetings presented by various cardiologists, exercise instructors, dietitians, and other heart related professionals. The meeting is held in the NC Heart & Vascular Hospital located next to the Medical Office Building located at 2800 Blue Ridge Road, Raleigh on the UNC REX Healthcare Main Campus. Please contact us at (919) 784-3756 for meeting times.

Our Mended Hearts accredited visitors go to visit the cardiac care patients at UNC REX Healthcare to meet and reassure them that life does go on after their catheterization and/or surgery. Since we are a support group, our visitors share their heart procedure experiences while empathizing with the anxiety and concern of the patients and their families. We also try to answer non-medical questions.

VISITORS ARE ALWAYS WELCOME TO ATTEND OUR MEETINGS.

For more information about our Chapter 300 @ UNC REX Healthcare,
call (919) 784-3756
For information on other chapters
visit www.mendedhearts.org or phone – 1(888) 432-7899

ACKNOWLEDGMENTS:

UNC REX Healthcare co-workers wrote and illustrated this Heart Healthy Handbook in its entirety.

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This book is dedicated to Joánne Kuszaj, for her compassion and devotion to patients and co-workers. Thank you for your 25 years of service at UNC REX Healthcare!