Endovascular Repair for Abdominal Aortic Aneurysm

Patient Care Plan

Patient name: __________________________

Type of aneurysm repair: __________________________

Your appointment is on: ____________ (date) at ____________ (time). Please arrive ______ hours early.

☐ Fairview Southdale Hospital: Please check in at the welcome desk in the Skyway Lobby (first floor).

☐ University of Minnesota Medical Center: Please check in at Unit 3C.

Bring this handout with you to the hospital.

This care plan will help you understand your treatment before and after your stay in the hospital. Your care plan may change as your needs change. We welcome your questions during your stay.

Your spiritual beliefs and values are vital to your healing. We invite you and your family to speak with a Fairview chaplain at any time.

How should I get ready for the treatment?

☐ See your family doctor for an exam within 30 days of your treatment. If you do not have this exam, we must cancel your treatment.

If you have a history of heart disease or recent heart pain, you should also have a cardiologist (heart doctor) check your heart.

Your doctors can fax your results to:

☐ Fairview Southdale Hospital: 952-345-4191

☐ University of Minnesota Medical Center: 612-273-8951

☐ If you take blood thinners: You may need to stop taking them a few days before your treatment.

Talk about this with the doctor who prescribed the blood thinners.

– Stop Plavix (clopidogrel) 7 days before your surgery. If you recently had a heart stent placed or had a stroke, you may not be able to stop these drugs.

– Stop Coumadin (warfarin) ________ days before surgery. You may need injection blood thinners. This is called “bridging.” Instructions for bridging: __________________________

– Other instructions: __________________________

☐ If you have kidney problems: We will give you further details on how to prepare.

If you are deaf or hard of hearing, please let us know. We provide many free services including sign language interpreters, oral interpreters, TTYs, telephone amplifiers, note takers and written materials.
☐ If you are allergic to X-ray dye (contrast), please tell us. You will need to take special medicine the day before your surgery.

☐ The day before treatment:

You must have an empty stomach before surgery.

- **8 hours** before surgery, stop all food, milk and chewing tobacco. You may drink clear liquids until **2 hours** before surgery. Clear liquids include water, clear juice, black coffee or clear tea without milk, Gatorade, clear soda. Do not drink alcohol for **24 hours** before your surgery.

- Between 10 a.m. and 12 noon, drink half a bottle (5 ounces) of magnesium citrate. If you do not have a bowel movement within a few hours, drink the rest of the bottle (5 ounces).

☐ The morning of treatment:

- **Do not** take diabetes medicine (including insulin) unless your doctor tells you to.

- **If you take** medicine for your heart or blood pressure, take it with a sip of water.

- Bring a list of your medicines and the doses to the hospital.

What happens the day of treatment?

Before your surgery you will have a blood test and a short exam. A nurse will then place an IV tube in your vein. (We will give you fluids and medicine through this tube.) He or she will also complete your paperwork and answer questions.

A doctor of anesthesia will meet with you. He or she will discuss the medicine you will receive before surgery.

You will also meet with the surgeon. He or she will describe what will take place and answer your questions. You will be asked to sign a consent form. Do not sign this form unless you know the risks and benefits of the surgery.

A family member or friend can be with you for part of this time.

What happens during treatment?

We will thread small tubes (catheters and wires) through your blood vessels and into your aneurysm. The catheters carry the grafts that will seal off the aneurysm. X-rays and special dye will help us see the graft while we place it inside the blood vessel.

- You will lie on an X-ray table. A clean sheet will cover you.

- You will receive medicine to put you to sleep (general anesthesia) or to keep you from feeling pain (spinal anesthesia). Because of the pain medicine, you will not remember what happened during the treatment.

- We will clean the top of your inner thighs (groin area). Then we will place a thin tube (sheath) into a small cut in one or both groins.

- We will thread a catheter (tube) through each sheath and into your blood vessels. Dye released from the catheters will make your blood vessels show up better on the X-rays.

- We will thread wires and smaller tubes through the blood vessels and up to the aneurysm. X-rays will guide us.

- We place one or more grafts in the blood vessel. We then expand the grafts so they attach to the artery walls. Now the blood flows through the grafts instead of the aneurysm.

- We then inject dye into the blood vessel. We use X-rays to make sure that the blood is flowing through the grafts correctly.

- All the tubes are removed. The surgeon then closes the cut in each leg with a few stitches.

Your family and friends can wait in the lobby during this time. Treatment takes about two hours. Plan on four to six hours with prep and recovery.
What happens after treatment?

- The doctors will speak with your family about how the procedure went.
- You will likely spend an hour in the recovery area. Your family can visit you when you return to your room.
- If you had spinal anesthesia, you may be numb from the waist down for a few hours.
- You will have a tube in your bladder. We will remove this early the next morning.
- You will receive pain medicine through your IV. You can take pills for pain after you are able to eat.
- Your nurse will check your temperature, blood pressure and pulses (including at your feet) every two hours.
- You may be sitting up by evening.
- We will monitor your heart rate overnight.
- By the next day you may eat a normal diet (often low-cholesterol with no added salt).
- We may change your bandages the morning after treatment.
- If your blood sugar or cholesterol is abnormal, a doctor may discuss this with you.

When will I go home?

Plan on staying in the hospital one to two days. Most people go home the morning after treatment. You may be ready to take care of yourself at home if:

- Your blood pressure, heart rate and breathing are normal, and your temperature is below 100°F (37.8°C).
- You can get out of bed on your own and walk without getting dizzy.
- You can eat and drink normally.
- You can urinate (pass water) without problem.
- You can control your pain with pain pills.
- Your incisions are clean and dry.
- You know the signs of possible problems and what to do for them.
- You are able to think clearly.
- You understand your medicines and follow-up care plan.

How do I care for myself at home?

Caring for your incisions

- You may shower one to three days after treatment. No baths or swimming until you see your doctor.
- Keep the incisions clean and dry. Cover them with gauze and tape. Change the bandages every day.
- You will likely have strips of white tape (Steri-Strips) across your incision. These may curl up. You may remove them after 7 to 10 days.
- You may have bruising, hardening and numbness around your incisions. This will slowly improve over the next few weeks.
- Rarely, a soft, fluid-filled bulge (seroma) appears near an incision. It may go away on its own, or it may need to be drained in the clinic. Call our office if you have questions.

Diet

- From now on, you will need to eat a diet that is low in fat and cholesterol. It may be easier to eat several small meals a day until your appetite returns.
- Drink 1 to 2 quarts of extra fluid a day for two to three days (unless your doctor tells you not to). Avoid alcohol.
**Activity**

- No heavy lifting or hard activity for one week. You may climb stairs.
- No driving until you see your doctor after surgery. Do not drive if you are still taking narcotic pain pills.
- You may go back to work when you feel ready. Discuss this with your doctor at your follow-up visit.
- Take a short walk three to four times a day. This is very important. Slowly increase the distance.

**When can I take my medicines again?**

- Wait 48 hours after the treatment before taking metformin (Glucophage or Glucovance). We suggest you have blood tests before restarting this medicine. Talk to your doctor.
- Take all your other medicines, including blood thinners, unless your doctor tells you not to.
- To relieve pain, take plain Tylenol or the pain medicine your doctor prescribed.
- You may use stool softeners (Colace or Senokot) as needed.

**What follow-up care will I need?**

- Follow-up exams may include CT scans, blood tests and a physical exam. You will need follow-up exams in one to two weeks, one month, six months and one year.
- If your first follow-up exam has not already been scheduled at the time you go home, call the clinic to schedule this:
  - Fairview Southdale Hospital: 952-929-6994
  - University of Minnesota Medical Center: 612-273-3000

**When should I call for help?**

Call your doctor if you have:

- Numbness, coolness or tingling in a groin or leg.
- Increased tenderness, drainage or redness at the puncture site.
- A hard lump at the puncture site.
- A fever over 101°F (38.3°C), taken by mouth.

If you have any questions, call your clinic nurse at:

**After hours, you may call the clinic:**

- Fairview Southdale Hospital: 952-929-6994 (Vascular Health Center)
- University of Minnesota Medical Center: 612-273-3000 (ask for the vascular surgeon on call)