

Quick Guide: After a Transaortic Valve Implantation (TAVI)

Royal Columbian Hospital

About your follow-up appointments

- Make sure you are clear about your follow up appointments before leaving the hospital.
- You will have some follow up appointments and tests arranged for you.

If you have not heard from the Clinics within 2 to 3 business days, please call the TAVI coordinator at 604-520-4392 or call the Clinic directly.

When to follow-up

Family practitioner	Call your family practitioner to schedule	In 1 week
TAVI Team at Royal Columbian Hospital	Clinic will call you to schedule an appointment	In 4 to 6 weeks
Cardiologist/ Internist	Call your Cardiologist/ Internist to schedule	In 6 to 8 weeks
Pacemaker Clinic	604-520-4246	In 6 to 8 weeks

For new pacemaker patients only

Echocardiogram	604-520-4244	In 4 weeks
Holter monitor*	604-520-4148	In 4 weeks

^{*}You will not need this if you have a permanent pacemaker

How to care for yourself at home

Rest and relax.

- Resume light activities, such as short and easy walks every day.
- Gradually increase activity and exercise.
- Do not over-exert yourself.
- Do not drive for at least 4 weeks.

Care of your Access Site

The 'access site' is where the catheters were inserted.

- ☐ Groin access site
 For the next 7 days
 ☐ Chest access site
 For the next 30 days
 - Take only showers. Do not take baths.
 - Do not go in swimming pools or hot tubs.

You might notice bruising, soreness, and some swelling at your access site. This is normal and heals with time.

Care for your new valve

- Take your weight **every day**. If your weight increases day by day, contact your family practitioner or heart specialist.
- Always tell your dentist you had a heart valve operation. You might need to take antibiotics before certain dental procedures.
 If you are taking blood thinners, the dentist might run some tests or check with your doctor before certain dental procedures.

Family practitioner: Refers to family doctor or nurse practitioner

About your medications

- Fill your prescriptions the day you leave the hospital.
- Continue taking your regular medicines unless the family practitioner has told you to make a change.
- Take regular or extra-strength acetaminophen (Tylenol) for pain as needed.
- Check with a healthcare provider before taking any herbal, non-prescription, or overthe-counter medicines.
- If you are prescribed blood thinners, do not stop taking them unless your family practitioner tells you to stop.

When to get help

Call your family practitioner as soon as possible if you have any of the following:

- a fever over 38.5°C (101.3F)
- pus coming from the access site
- redness and swelling around the access site
- skin around the access site is warmer than normal to the touch

When to call 9-1-1

If you notice **sudden severe pain and swelling** at your access site:

- Put firm pressure over the access site.
- Call 9-1-1 right away.
- Hold pressure on the access site or have someone hold it for you until emergency personnel arrive.

If you notice signs of a stroke:

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Face	Make a smile.	
	Does one side of the face droop?	
Arms	Raise both arms.	
	Does one arm drift downward?	
Speech	Say a simple phrase.	
	Is your speech slurred or strange?	
Time	Notice any of these signs?	
	Call 9-1-1 right away.	
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When to go to the nearest Emergency

- If you notice any of the following in the access site arm or leg:
 - gets cold and does not warm up
 - becomes very swollen
 - feels numb
 - hurts quite a lot
 - changes to skin colour (skin pale, toe nails turn pale or blue)
 - shortness of breath that doesn't go away with rest
- If you have:
 - <u>sudden</u> confusion, trouble speaking, seeing, understanding, or walking
 - severe headache and dizziness with no known cause

If you have questions, it's good to ask:

- your family practitioner
- HealthLinkBC Call 8-1-1 (7-1-1 TTY)

Available in 130 languages.

For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

Online www.HealthLinkBC.ca

www.fraserhealth.ca

The information in this document is intended solely for the person to whom it was given by the health care team.

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