My Cardiac Resynchronization Therapy (CRT) Device for Heart Failure

Including Procedure Preparation and After Care











| Date of Procedure: | |
|--------------------|--|
| | |

My Device:



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What is your preferred language?

Sunnybrook offers professional interpretation services to our patients. Learn more about this service at **sunnybrook.ca/interpreters**.

Your Appointment Timeline

About 1 week before The day of your your procedure procedure **CRT Procedure** Date: The arrhythmia scheduling office at Time: 416-480-4469 will contact you to confirm the date and time of your procedure. Location: ☐ Outpatient Cath Lab B-Wing, 3rd Floor, Room B315 □ Schulich Short **Stay Unit** B-Wing, 3rd Floor, Room B313

1-3 days after 6 weeks after your procedure your procedure **Arrhythmia Device Arrhythmia Device Clinic Follow-up Clinic Follow-up Appointment Appointment** Date: Date: Time: Time: Location: Location: Arrhythmia Device Clinic Arrhythmia Device Clinic E-Wing, 2nd Floor E-Wing, 2nd Floor Room E248 Room E248 Phone: Phone: 416-480-4471 416-480-4471

Introduction

How to Use this Guide

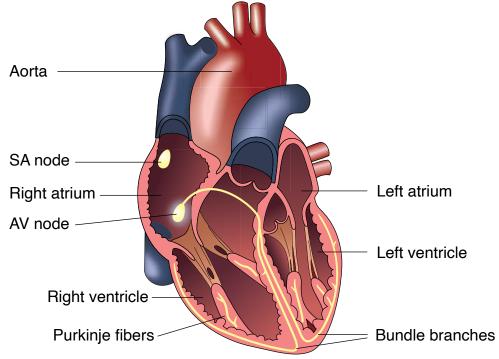
The information in this guide will help you understand your Cardiac Resynchronization Therapy (CRT) device for heart failure and your recovery. It also has information about what will happen on the day of your procedure and your care afterwards, including when you go home. Not every patient has the same journey. Members of your health-care team will go over this guide with you.

We know this may be a stressful time for you and you will get a lot of information about your procedure. This booklet will help you keep track of what you need to do after your procedure. If you have any questions about this booklet, please call the Arrhythmia Device Clinic at 416-480-4471.

In this booklet on page 2, there is a place to write the dates and times of your appointments and there are pages for you to write notes of your own.

How the Heart Works

Your heart is a muscular organ with four chambers that work together to pump blood throughout your body. The two upper chambers, called the left atrium and the right atrium, receive and collect blood. The two lower chambers, called the left ventricle and the right ventricle, push blood out of the heart. To make the chambers pump blood, the heart has an electrical system. The electrical system sends tiny impulses to the upper and lower chambers telling them to contract (squeeze) at the same time, which then pumps the blood through the heart and to the rest of the body.



Why do I need a Cardiac Resynchronization Therapy (CRT) Device?

If the heart's electrical system does not work properly, the left side of the heart may not pump in a coordinated way with the right side of the heart. Your heart may become weak or stiff (called heart failure) and it cannot pump blood effectively to the rest of the body. Fluid may then collect in other parts of the body, making your ankles, lower legs, and abdomen swell. If there is extra fluid in or around your lungs, you may feel shortness of breath. Symptoms of heart failure include:



Extreme tiredness (fatigue) or no energy



Loss of appetite



Shortness of breath, even when lying down



Coughing or wheezing



Rapid heartbeat or palpitations



Fast weight gain (more than 2kg over 2 days)



Swelling in the ankles, feet, and stomach



Peeing more often, especially at night

A cardiac resynchronization therapy (CRT) device is an electronic medical device that is put into your chest to detect and fix the pumping of the heart. This can help a weakened heart pump more efficiently. In addition to your medication, your doctor has recommended you get a CRT device to help make your heart pump more efficiently and reduce your symptoms of heart failure.

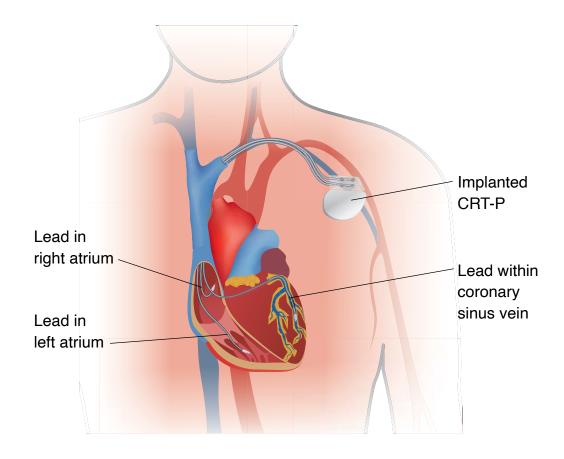
How a CRT Device Works

There are two types of CRT devices:

- CRT-P: A CRT-P device is a basic pacemaker that works to maintain the normal timing of the heartbeats. It stimulates the left and right ventricles at the same time to improve the heart pump. This is called biventricular pacing.
- CRT-D: If you are at risk of having life-threatening rapid heart rhythms, you may need a CRT device combined with an implantable cardioverter defibrillator (ICD), known as a CRT-D. It will deliver biventricular pacing and electrical shocks to the heart to correct irregular heartbeats.

The device has two main parts:

- The pulse generator (battery) is the power source and tiny computer that sends electrical impulses or shocks to the ventricles to help resynchronize (coordinate) the heartbeat.
- The three leads (wires) are flexible, insulated wires that carry electrical energy from the pulse generator to the right and left areas of your heart. It also sends information about the heart's activity back to the device. Your doctor will assess the anatomy of your heart to decide the best way to place the leads.



Before Your Procedure



Stop Smoking:

Smoking can affect your healing and increase your chances of getting an infection. Try to stop or reduce smoking. Speak to your doctor or nurse if you would like to guit smoking or you need help with withdrawal symptoms. You may also visit smokershelpline.ca or call Health Connect Smoking **Cessation Program** at 1-866-797-0000 (press 3).

Preparing for Your Procedure

The arrhythmia scheduling office at 416-480-4469 will contact you to confirm the date and time of your implant about one week before your procedure. They will give you instructions on how to prepare for the procedure, including when to stop any medications you may be taking.

Use the space below and the timeline on the next page to keep track of what you need to do to prepare for your procedure.

My Medications

| Medication | Dose | Date to Stop |
|------------|------|--------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| Notes | | |
| | | |
| | | |

Preparing for Your Procedure

About 1 week before procedure

1 day before procedure







any lotion or powder.



If you have not had your blood tested within three months before your procedure, the scheduling office will send you for blood work. You can get your blood tested at a local blood lab or at the blood lab in M-Wing, Ground Floor, Room 202 (MG 202).



At night, shower and use soap to wash from the neck down. Leave the soap on your body for 2 minutes before rinsing off. After your shower, do not use



Do not shave your chest where you will have your procedure.



We recommend you use antibacterial soap (Chlorhexidine 4%) to clean your skin for your procedure. This is to help prevent infection. You can buy this soap at Sunnybrook's pharmacy on the first floor of M-Wing.



Wear clean pyjamas and use clean bed sheets.

Notes

Morning of procedure





Do not eat or drink anything after midnight before your procedure or at the time told to you by the scheduling office. You may rinse your mouth with water or brush your teeth, but do not swallow. You may take a small sip of water if you are told to take medication before your procedure.



Take off all make-up, nail polish, jewelry and body piercings.



Shower and use soap to wash from your neck down again. This will lower the risk of infection. Do **not** use perfume, cologne, scented cream, body lotion, deodorant, or hair products. Sunnybrook is a fragrance-free hospital.



Wear comfortable clothing that will be easy to put on after your procedure.



Tie your hair back if your hair is long.



Do not smoke any tobacco products or recreational drugs.



Do not take or use any prescription, creams, patches, over-the-counter or herbal medications unless directed by your pharmacist or doctor.

Preparing for Your Recovery

Most people go home the same day as their CRT procedure, but you should plan to stay in the hospital for at least 4 to 6 hours. Here are some things to consider as you prepare for your recovery: Talk to your family and friends about the support you will need after your procedure. Someone should stay with you the first night you are back home. Ask someone to help you with physical tasks when you are at home, such as cooking, home maintenance, and laundry. You will not be allowed to lift more than 2.3 kilograms (5 pounds) for six weeks. See page 18 for activity guidelines after your procedure. Plan how you will bathe: You can have a shower three days after your procedure, but no baths for six weeks. This timeline may change based on how your wound is healing. Arrange for a friend or family member to drive you home and to your follow-up appointments. You will not be allowed to drive for a period of time after your procedure. See page 19 for driving after your procedure. **Notes**

The Day of Your CRT Implant

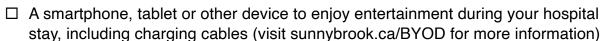
Rescheduled Procedures

Sometimes procedures are cancelled because there is someone else who needs an emergency surgery. If this happens to you, the triage nurse will contact you and a new procedure date will be booked as soon as possible.



What to bring to the hospital:

- □ This booklet
- ☐ Your Ontario Health Card
- ☐ Glasses, dentures, hearing aids and any walking aids you may need
- ☐ Comfortable, non-slip-footwear and any orthotics or prosthetics you use
- ☐ Your prescription and over-the-counter medications in the containers they came in (e.g. pills, inhalers or puffers, injections, eye drops, herbal medicines and vitamins)



Please note: The hospital cannot accept responsibility for lost, stolen, or damaged items. We advise that you do not bring large amounts of cash, jewelry or other valuables.



Registration

When you get to Sunnybrook, check in at the B3 Outpatient Cath Lab (B315) or B3 Schulich Short Stay Unit (B313) at the time provided to you.

After check-in, you will be taken to an assigned room. You will be asked to take off all your clothing and put on a hospital gown. A nurse will check your blood pressure, heart rate, and temperature. Next, the nurse will ask questions about your medical history and review your medications with you. The nurse will then get you ready for your procedure by clipping any hair at the procedure site and inserting an intravenous (IV) in your hand or arm.

In the Procedure Room

Before your procedure, your implanting physician will explain the procedure to you and get your consent. When the implanting physician is ready, a member of your healthcare team will take you to the procedure room and ask you to lie down on a special X-ray table. The procedure can take up to two hours depending on your needs.

What will happen during my procedure?

- You will be covered with warm blankets and connected to equipment that will help us watch your heart rate, blood pressure and oxygen level (called saturation).
- The team will wash your chest with a cold cleaning solution and place sterile drapes over you. It is important not to move or touch anything above the drapes once they are in place.
- The team will talk about your procedure before starting. You are welcome to take part in the discussion.
- You will get a mild sedative and painkiller through the IV to keep you comfortable and pain-free during the procedure. You will also get antibiotics to help prevent infection.
- You will be awake during your procedure. The spot on your chest that will be cut will be injected with a local anesthetic to numb your skin, so you do not feel any pain.
- An incision (cut) is made below the collarbone and a small pocket is made under the skin.
- The implanting physician will feed small wires (leads) through your vein and into your heart using an X-ray camera.

- The CRT device is put into the surgical pocket. You may feel a little pressure as the physician implants the device.
- Your healthcare team will test your CRT device to make sure everything is working. The device will be programmed to meet your needs.
- The incision is closed with stitches that dissolve and covered with a sterile dressing.

After your Procedure

Your Discharge Checklist

After the procedure, you will go back to your room. You will be connected to a heart monitor and a nurse will check your vital signs regularly. You will also get an ECG and chest X-ray to check the function and placement of your CRT.

Most patients go home the same day and have a follow-up appointment with the device clinic the next day. In some cases, you may stay in hospital overnight to have your heart monitored.

When you are discharged and ready to leave the hospital, a dressing will cover the incision. It is important to keep your incision clean and dry for three days. See page 17 for information on how to take care of your incision.

Your leads (wires) need time to heal properly in place. To prevent your leads from disconnecting, you will need to limit your activity and avoid moving your arm on the side of your implant for six weeks. See page 18 for activity guidelines.

| a. Discharge Chicomist |
|---|
| Arrange for a friend or family member to pick you up on the day of discharge. |
| Review your discharge paperwork in the brown envelope with your nurse, including follow-up appointments, your device card, and important information about your CRT device. |
| Review your discharge prescriptions with your nurse or doctor. |



☐ Bring this booklet home with you. It contains information about your recovery at home.

After-Procedure Care

When should I get medical help?

Contact your doctor and tell the Arrhythmia Device Clinic at 416-480-4471 if you experience any of the following:

- Fever of 39 degrees Celsius (100 degrees Fahrenheit) or higher for more than 24 hours.
- Extreme tenderness, warmth and redness around your incision (cut) site.
- Yellow/green drainage or excessive bleeding from your incision.
- Any abnormal pain or other symptoms that does not get better with your medications.
- If you feel thumping in your abdomen (called phrenic stimulation), contact the Arrhythmia Device Clinic. This symptom is typically not dangerous, but we may be able to reprogram your device to fix the issue.



The look of your incision will improve over time. It is common to have some discomfort, tenderness and bruising around your incision site. You may take acetaminophen (Tylenol) for pain, or another medication ordered by your doctor. Do not take anti-inflammatories such as naproxen or ibuprofen (Advil) as they increase your risk of bleeding. If the medication does not give you relief, or you have angina or other chest pain, speak with a nurse or doctor.



Keep the dressing on your incision for 72 hours (3 days).

Three days after your procedure, you can take off the dressing and have a shower. Do not soak in a bathtub or swim for 6 weeks. This is to prevent your incision site from bleeding, prevent infection, and to help with healing. You can leave the bandage off after your shower to help it heal.



Keep your incision dry.

Pat your incision dry with a clean towel after every shower. Do not rub the area. Do not put lotions or creams on or around your incision site.





Stitches will dissolve.

Stitches will dissolve on their own within six weeks and do not need to be removed. Small strips of non-allergenic tape were put across the wound to hold the edges together. If the tape does not fall off on its own, gently remove the tape after 7-10 days.

Activity Guidelines

Your body needs time to heal. It can take up to six weeks for the leads to settle firmly in your body. For six weeks, limit the amount you move and use your arm on the side of your implant:



Do not raise your arm.

Keep your arm on the side of your implant lower than your shoulder.



Do not lift, push or pull heavy items.

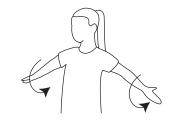
Do not lift, push, or pull items heavier than 2.3 kg (5 lbs), for example: laundry baskets, garbage bins, groceries, luggage, furniture, appliances, heavy doors, pets, or children.

After six weeks, you can go back to all the daily activities you did before your procedure, including activities that use your arms, like golf, tennis, swimming or sweeping.

Arm Circle Exercise

Arm circles can help if your arm is sore and stiff.

Stand or sit up straight. Raise your arm slightly at your side. Do not raise your arm higher than your shoulder. Slowly circle your arm forward and then backward. Repeat 10 to 15 times, every hour you are awake.



| Repetitions | Frequency |
|-------------|-----------|
| 10-15 | hourly |

Driving

Medical conditions like some kinds of arrhythmias can make driving unsafe. The Ontario Ministry of Transportation is responsible for deciding when and if it is safe for you to drive. Your doctor is required by law to inform the Ministry if you have a medical condition that may affect your ability to drive safely. In some cases, you may not be able to drive for up to three months after your procedure.

Nutrition

Good nutrition is important for your recovery. After your procedure, you will be able to eat and drink as normal, but you should eat healthy meals that are low in fat, cholesterol and salt, and high in fiber. If you have diabetes, be sure to control your blood sugar.

Returning to Work

Returning to work depends on the demands of your job. You may need to take time off work to heal and recover. Every person is different. Speak to your doctor or nurse about going back to work.

Follow-up Appointments

You will need to go back to the Arrhythmia Device Clinic for regular check-ups for your CRT. The first visit is usually the day after your procedure, again in six weeks, and then every six months. Write your first two follow-up appointments on page 3.

During the appointments, a nurse will use a programmer to check your CRT device leads and battery. They will review information from your device and make changes as needed. It is recommended that the biventricular pacing is more than 90%. We may need to make programming changes to your device or suggest other options to improve pacing percentage. The appointments are usually about 45 minutes. It is important to keep all your follow-up appointments, even if you feel well.

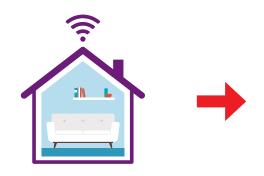
| W | hat to bring to your follow-up appointments |
|---|---|
| | This booklet |
| | Your Ontario Health card |
| | Your red Sunnybrook patient card if you have one |
| | Your device card |
| | A current list of your medications, including any over-the-counter creams, patches, inhalers or puffers, injections, eye drops, herbal medicines and vitamins |
| | A list of questions, concerns, and symptoms you want to discuss |

Remote Monitoring

Some CRT devices can be monitored remotely. Remote monitoring means that our arrhythmia device specialists can ensure your CRT is working properly without taking a trip to the clinic.

You may need to visit the Arrhythmia Device Clinic for an in-person appointment at least once a year to test your device. Speak with your health-care team if you are interested in remote monitoring.

How it Works

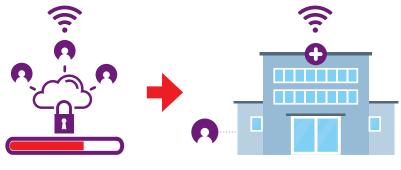




We will pair your CRT device to the remote system. Your device connects to a small transmitter in your home or an app on your cell phone. Keep your transmitter plugged in as instructed.

Travelling?

You may take your transmitter with you when you travel, but please inform the clinic of your travel plans.





The transmitter or cell phone collects real-time, encrypted data, such as battery status, lead function, percentage pacing and any treatment from your device.



With your consent. the data is sent to our Arrhythmia Device Clinic automatically or at a specific time provided to you by our clinic.

You may be required to come into the clinic for an in-person evaluation.

Please Note:

The remote monitoring system is not an emergency information system and does not substitute for medical treatment in the case of an emergency.

If you feel unwell, see your family doctor, or visit your nearest emergency room for urgent matters. Please inform the emergency room doctor that you have remote monitoring for your device.

Replacing the Battery

The CRT device battery can last up to 8 years but may vary based on how much the device is used. We will check the battery on your device during your follow- up appointments. If your battery needs to be replaced, you will need another procedure that is similar to when you had your device implanted. In some cases, your leads may need to be replaced as well. You may get a different type of device if the needs of your heart have changed.

Your CRT device may have a defibrillator (CRT-D)

There may be a time when you no longer want to receive shocks to prevent sudden cardiac death. Shocks from your CRT-D can cause pain and anxiety to you and your family. You could have the shocking function turned off. This is called deactivation of the defibrillator function of your device. You will still have the biventricular pacing. Talk to your family and your health-care members about deactivation so that everyone understands your wishes.

| next appointment? | | | | |
|-------------------|--|--|--|--|
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Living With Your CRT Device

After you recover from your procedure, you should be able to go back to many of the activities you enjoyed before.

Your Device Card



Your healthcare team gave you a device card with important information about your CRT. Always carry this card with you. You may also choose to wear a medic-bracelet or necklace to let people around you know you have a CRT device.

If you have a CRT-D (defibrillator): What do I do if I feel a shock?

When the heart is beating dangerously fast and irregular, a high energy shock is sent to the heart muscle to restore normal rhythm. A shock may feel like a kick in the chest, and you may or may not lose consciousness.

If you feel one shock and feel fine, you do not need to go to an emergency room. Call the Arrhythmia Device Clinic at 416-480-4471 and we will book an appointment for you to come to the clinic.

Call 911 if you experience:

- More than one shock in a 24-hour period
- Chest pain, pressure or heaviness in your chest
- Shortness of breath or fainting



Appliances and Vehicles

Items that use magnets or electricity have magnetic fields around them. These fields are usually weak and will not affect your CRT device. Strong magnetic fields can interfere with the device and may affect the way it works. Do not use or stay near induction ovens, welding machines, large stereo speakers, and radio transmitting towers. Do not work on a vehicle while the engine is running.



Cellphones

It is safe to talk on a cellphone but avoid placing a cellphone within 15 centimeters (6 inches) of your CRT device. Use your cellphone on the ear farthest away from your CRT device.



Exercise and Sports

Your CRT device will not limit you from exercising and playing most sports. Speak to your doctor or nurse before going back to strenuous exercise. If you are playing aggressive recreational activities, try not to hit or get hit on the area over the device. A hit near the CRT device can affect how it functions. If you do get hit near your device, call the device clinic or your doctor.



Medical Treatment and Tests

Tell your health-care provider that you have a CRT device. Most medical equipment do not interfere with your device, but you may have interference from procedures that involve electrocautery, TENS (transcutaneous electrical nerve stimulation), Electromagnetic interference (EMI) diathermy, and ECT (electroconvulsive therapy).

Radiation aimed directly at the device can cause damage. Radiation aimed away from device may be safe. Most devices implanted are MRI (magnetic response imaging) "conditional" The device may need to be programmed before and after an MRI.



Security Systems

Security systems like those you walk through at airports and stores will not harm your device, but it may set off an alarm. If this happens, show your device card. Handheld systems that use wands like at airports may interfere with your device. Show your device card and ask for a pat down instead of the wand.



Sexual Activity

The CRT-D should not deliver therapy for the natural increase in heart rate that happens during sex. However, if this happens, you may feel a sensation, but the shock will not hurt your partner.

Healthy Living

By living a healthy lifestyle, you can help reduce your symptoms of heart failure and improve your heart health. You can find many healthy living tips on Sunnybrook's Your Health Matters blog at **health.sunnybrook.ca**.

Heart-Healthy Eating

Healthy food choices and habits are an important part of managing your heart failure. Choose foods that are low in fat, such as lean meats and low-fat dairy products. Fruits, vegetables and whole grain products are high in fibre and help to lower cholesterol.

Limit Sodium

Eating too much sodium (salt) can cause fluid to build up in your body. To help manage heart failure, limit the amount of sodium you eat every day to no more than 2000 milligrams (2 grams). More than 75% of the sodium we eat is from table salt or processed foods. Read the nutrition label on food products to help you make healthy choices.

| Choose | Limit | Avoid |
|--|---|---|
| Fresh or dried herbs instead of salt to add flavor Fresh and home-prepared foods whenever possible Products that are "no added salt" or "low sodium" | Foods that have been pickled, processed, cured, smoked, or salted (e.g. pickles, olives, bacon, smoked meat or fish) Canned vegetables, sauces, gravies, dressing, marinades | Any salt (e.g. table salt, sea salt, kosher salt, iodized salt, fleur de sel, Himalayan salt, garlic salt, onion salt, celery salt) Monosodium glutamate (MSG) or foods containing MSG Bouillon cubes or soup base powders Salt substitutes, unless approved by your physician or dietitian Foods with visible salt, (e.g. potato chips, salted nuts, salted pretzels, salted crackers) |

Limit Fluid

Drinking too much can also cause fluid to build up in your body, making your feet, ankles, legs, and stomach swell. Limit the amount of liquid you drink to no more than 1500-2000 mL (6-8 cups) each day. Remember, fluid is more than just water and other beverages you drink. It includes anything that is liquid at body temperature or can melt in the mouth, such as soup, Jell-o, ice cream, sorbet, ice, and nutrition supplements.

Write down how much fluid you drink each day. Use a small cup or glass and sip fluids slowly throughout the day. This may help you control how much you drink.

Tips to help control your thirst:

- Limit the amount of sodium (salt) you eat
- Brush your teeth often
- Rinse your mouth with water but do not swallow it
- Use chilled mouthwash to keep your mouth cool and fresh
- Moisten your mouth with lemon or lime wedges, chewing gum, or breath mints
- Add lemon or lime slices to your water or ice
- · Use a humidifier to moisten the air

Check Weight Daily

Weigh yourself every morning at the same time: after going to the toilet and before breakfast. Having an empty bladder and empty stomach will give you the most accurate weight. Use the same scale (even on vacation) and make sure it is on a hard surface. Keep track by writing down your weight and any water pills you may have taken. If you have gained more than 1kg (2 lbs) over 24 hours, you may be retaining more fluid. Follow the instructions given to you by your healthcare provider.

Manage Stress

Difficulties coping with stress may harm your heart. Stress is a necessary part of living. It helps us respond to emergencies, meet a deadline or achieve a goal. However, if we have too much stress, our minds and bodies cannot relax. Try to be aware of stressful situations and learn effective ways of managing them. For example, avoid rush hour traffic or allow for more time to travel. You can also try relaxation techniques such as deep breathing, massage, or meditation. For some people, counseling may be helpful.

Take Your Medications

To help manage your heart failure, you will also be prescribed four medications:



1. Beta blockers (bisoprolol, carvedilol)

Beta-blockers can be used to decrease how hard your heart needs to work. They can lower your blood pressure and heart rate and help your heart work better if the heart muscle is damaged.

2. ACE inhibitors, ARBs, ARNI (ramipril, perindopril, valsartan, candesartan, Entresto)

ACE inhibitors, ARBs, and ARNIs can be used to prevent a heart attack, lower blood pressure and strengthen the heart muscle. They also reduce salt and water retention and open the blood vessels. This makes it easier for your heart to pump blood to your body.

3. Mineralocorticoid receptor blocker (spironolactone, eplerenone)

Mineralocorticoid receptor blockers help your kidneys remove extra water and salt from your body by blocking a hormone called aldosterone, a stress hormone that can make your heart stiff and cause scarring.

4. Sodium-glucose cotransporter-2 inhibitor (dapagliflozin, empagliflozin)

Sodium-glucose cotransporter-2 inhibitors (SGLT2) can help lower blood pressure and remove extra fluid in your body by helping you to pee out waste. More importantly, they help to lower stress on your heart.

Take your medications regularly as prescribed. Do not stop or change how you take your medications without speaking to your healthcare provider. If you have concerns about managing your medications, speak with your pharmacy about using a dosette (pill box) or pre-arranging your medications in weekly blister packs. If you experience side effects, talk to your doctor or pharmacist.

Check Your Blood Pressure

High blood pressure puts a strain on your heart and makes your heart work harder to pump blood to the rest of your body. Check your blood pressure regularly as directed by your doctor and take medications as prescribed. Minimize your sodium (salt) intake and exercise regularly.

No Smoking

Smoking makes your heart work harder. It increases your heart rate, narrows blood vessels, raises blood pressure, and reduces the amount of blood, oxygen and nutrients that get to your heart. Second hand smoke can cause the same effects. By not smoking you will reduce your risks of heart disease that can cause heart failure over time. Ask your doctor or pharmacist for ways of helping you stop or reduce smoking. You may also visit **smokershelpline.ca**.

Limit Alcohol

Alcohol may lead to heart conditions that affect the heart muscle. Check with your healthcare provider for advice on whether it is safe for you to drink alcohol and how much.

Exercise Regularly

Physical activity can help you feel better, decrease symptoms and improve your heart's function. Be sure to talk to your doctor before starting an exercise program or increasing your activity level. The key is to be active slowly and regularly. The goal is to do 30 minutes of activity a day for five days each week. This can be split into parts, such as three ten-minute blocks of activity.

| ly Commitme | | | | | |
|-------------------|-----------------|--------------|----------------|-------------|--|
| entify at least o | ne healthy livi | ng habit you | will try to ac | dopt first: | |
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| | | | | | |
| | | | | | |
| hat other goals | will you work | towards? | | | |
| hat other goals | will you work | towards? | | | |
| hat other goals | will you work | towards? | | | |
| hat other goals | will you work | towards? | | | |

Heart Failure Zones

Which Heart Failure Zone Are You Today?

ALL CLEAR: This zone is your goal!



Your symptoms are under control. You have:

- No shortness of breath at rest or during activity.
- · No chest discomfort, pressure or pain.
- No swelling or increase in swelling of your feet, ankles, legs or stomach.
- Body weight that does not change.

CAUTION: This zone is a warning!



Call your healthcare provider (e.g. doctor, nurse or pharmacist) if you have any of the following:

- You gain more than 2 lbs (1kg) or more from the day before or 5lbs (2.5kg) in a week.
- You feel more heart palpitations, like your heart is racing fast.
- You feel more short of breath than usual or are waking up suddenly at night to catch your breath.
- You have vomiting and/ or diarrhea that last more than two days.
- You find it difficult to do the same activities you did before.
- You have increased swelling in your feet, ankles, legs, or stomach.
- You have a dry hacking cough.
- You feel lightheaded or dizzy when at rest.
- You find it difficult to do the same activities you did before.
- You find it easier to sleep by adding pillows or sitting up in a chair.

EMERGENCY: This zone means act fast!



Go to emergency room or call 911 if you have any of the following:

- · You are struggling to breathe and it does not change when you sit still.
- You are having trouble thinking clearly or are feeling confused.
- You have a fast heartbeat that does not slow down when you rest.
- You have chest pain that does not go away with rest or with medicine.
- You fainted.

The information in this document is intended solely for the person to whom it was given by the healthcare team. For more information refer to: www.heartandstroke.on.ca. Adapted from BC Heart Failure Zone.

| Notes | | |
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Notes



If you have questions or concerns about your appointments or your concerns related to the device, please call:

Arrhythmia Device Clinic......416-480-4471

Monday to Friday, 8:00 a.m. - 4:00 p.m.

For remote monitoring questions and concerns please email

EPremotemonitoring@sunnybrook.ca

If you have questions or concerns about your appointments or your concerns related to your heart failure symptoms, please call:

Heart Function Clinic 416-480-2484

For more information about your CRT medical device and answers to frequently asked questions, visit the company websites:

Boston Scientific: www.bostonscientific.com

Medtronic of Canada: www.medtronic.ca/patientresources

Abbott (St. Jude Medical): www.abbott.com/patients

Biotronik: www.biotronik.com/patients

For more information about heart failure management and answers to frequently asked questions, visit the following websites:

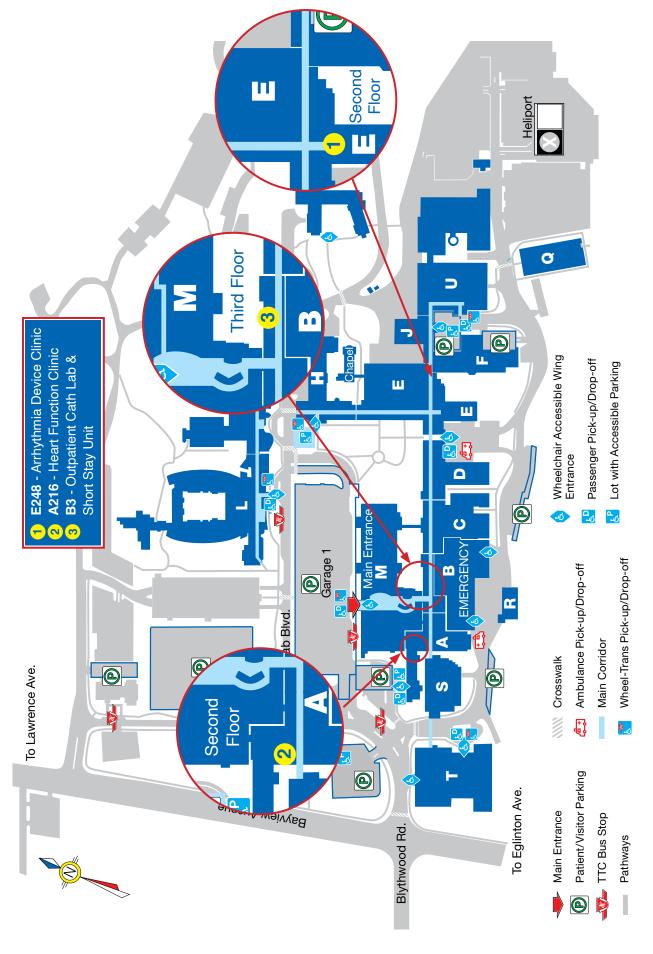
Heart and Stroke Foundation of Canada: www.heartandstroke.ca

Canadian Heart Failure Society: www.heartfailure.ca

Sunnybrook Health Sciences Centre

The location of your appointments:

(Take the M-Wing elevators to the second or third floor)



Schulich Heart Centre

2075 Bayview Avenue Toronto, Ontario M4N 3M5

sunnybrook.ca/heart



