

After Heart Surgery



Table of Contents

How to Contact Us.....	3
------------------------	---

After your surgery

Things to Remember poster	7
Activity Check List.....	9
Respiratory Therapy	11
Nutrition in the Hospital.....	13
Atrial Fibrillation	15
MIDCAB Surgery	17

After you go home

Home Check List.....	19
Sternal Incision Precautions	21
Caring for Your Incisions.....	23
Medicine Safety Tips	25
Depression After Surgery	27
Cardiac Rehab	29
Role of Exercise	31
Warm-Up Exercises.....	33
Home Walking Program	37
Recovery from Open Heart Surgery	39
Dos and Don'ts for Activity	43
Reduce Heart Disease Risk	45
Heart-Healthy Diet Guidelines.....	47
Sodium	49
Fats	53
More Tips	55
Know Your Label	57
Make Recipes Heart-Healthy	59
Dining Out	61
Buy Right to Eat Right	63

How to Contact Us

Your Cardiac Surgery staff want to make your experience at UPMC a positive one. Please contact us with any questions or concerns you may have.

Cardiac Rehab contact:

Main hospital phone numbers

UPMC Presbyterian: 412-647-2345
UPMC Shadyside: 412-623-2121
UPMC Passavant: 412-367-6700

Other phone numbers:

Main Cardiac Surgery office phone numbers

UPMC Presbyterian: 412-647-6200
UPMC Shadyside: 412-623-2994
UPMC Passavant: 412-369-4603

Main Cardiac Surgery office mailing addresses

UPMC Presbyterian:

Cardiac Surgery Division, Suite C-700
200 Lothrop Street
Pittsburgh, PA 15213

UPMC Shadyside:

Cardiac Surgery Division, Suite 715
5200 Centre Avenue
Pittsburgh, PA 15232

UPMC Passavant:

Cardiac Surgery Division, Suite 5105
9104 Babcock Blvd.
Pittsburgh, PA 15237

In the Hospital After Your Surgery

Things to Remember

Remove this page and post it on your refrigerator as a reminder.

Remember:

- Call to make follow-up appointments with your doctors within your 1st week home.
- Weigh yourself daily, and record your results.
- Check your incisions, and wash them daily with a clean wash cloth.
- Keep your legs elevated.
- Limit your intake of salt and fat.
- Take all of your medicines as directed.

Be active:

- Follow the activity guidelines given to you by cardiac rehab staff or your nurse.
- Balance rest with activity, and pace your activities throughout the day.
- If you were given a walking program, “Just Do It!”
- Talk to your doctor about outpatient cardiac rehab during your 1st office visit. Call for a program close to you.

Avoid:

- Smoking.
- Driving until your doctor approves.
- Going back to work until your doctor approves.
- Crossing your legs.
- Putting creams or lotions on your incisions.

Call your doctor if you have:

- Extreme redness or drainage from your incisions
- Fever of 101 F degrees or more
- Weight gain of 3 pounds overnight or steady weight gain of 5 pounds in a week
- More shortness of breath than usual

Activity Check List

The lists below are our day-by-day goals for you as you get stronger after surgery. There is a list for each of the first 4 days after your surgery. We call these days “post-op” days 1, 2, 3, and 4.

An important part of your recovery is to get out of bed and move. Increasing activity improves blood circulation, breathing, and a sense of well-being. **The key to all of this is to control your pain.**

Post-Op Day 1

On your first day after surgery:

- Sit in a chair as much as possible.
- Keep your legs elevated while in the chair.
- Walk to the bathroom with help.
- Use the incentive spirometer at least 10 times each hour.
- Cough and deep breathe frequently. Use the chest pillow for added comfort and support.
- Increase your diet from clear liquids to solid food (cardiac diet) when you are ready to handle it.
- Limit your fluids to 1500 cc (50 ounces, or 6 ½ cups) a day.
- Ask for pain medicine every 3 to 4 hours as needed.
- Work with your cardiac rehab specialist to increase your activity.

Post-Op Day 2

On your second day after surgery:

- Get out of bed for all meals.
- Stay up in a chair with your legs elevated for most of the day.
- Walk in the halls 2 or 3 times with the help of your nurse or cardiac rehab staff, if you need help.
- Move about in your room on your own.
- Continue to cough, deep breathe, and use your incentive spirometer every hour. We may end your use of supplemental oxygen today.
- Tell your nurse if you have not moved your bowels since surgery. A stool softener and/or laxative may be needed to help get your bowels back to normal.
- Continue with your cardiac diet. Continue to limit fluids.
- Continue to keep your pain under control.
- Talk with your nurse about planning for your discharge.

Post-Op Day 3

On your third day after surgery:

- Increase your walking time and distance.
- Stay up in a chair most of the day. Remember to keep your legs elevated while sitting.
- Continue to deep breathe, cough, and use your incentive spirometer every hour. You should no longer need supplemental oxygen.

- A bowel movement is a must today. Tell your nurse if you have not moved your bowels.
- Continue with your cardiac diet, and continue to limit your fluids.
- Continue to keep your pain under control.
- Work with your care team and family to plan for your discharge.

Post-Op Day 4

You may be discharged on the fourth day after surgery:

- Continue to increase your walking time and distance. Add stair climbing with the help of cardiac rehab staff.
- Continue to cough, deep breathe, and use your incentive spirometer every hour.
- You should be back to your normal bowel regime. Tell your nurse if you have not moved your bowels.
- Continue with your cardiac diet. Fluid restrictions may be lifted.
- Continue to keep your pain under control.
- Discuss your questions with your nurse.
- Continue discharge planning with your care team.

Day of Discharge

- All teaching will be completed.
- You will receive detailed information about:
 - limits on your activity
 - your diet
 - your medicines
- Your nurse will go over these instructions with you.
- If you are going home, you should be fairly steady on your feet and require only a little help.
- If you need to go to a rehab unit or extended care facility, we will talk with you and your family about the facility, time of departure, and mode of transport to the facility.

Respiratory Therapy

Your spirometer

A very important device in your recovery is the incentive (in-SEN-tiv) spirometer (spih-RAW-meh-ter).

This device will help to:

- keep the lungs expanded
- remove secretions
- promote coughing

We will teach you how to use the spirometer. You should use it at least 10 times each hour.

Other breathing aids

We will check you to see what other kinds of help you may need with breathing. You may need supplemental oxygen, breathing treatments, and/or bronchodilators [BRON-ko-DIE-lay-ters].

Bronchodilators are medicines that are inhaled. They help to open the airways so that you can breathe freely. They also aid in removing secretions. We will give you the treatments that fit your specific needs.

You will be re-checked daily. That way, we can continue to tailor your respiratory care to your needs.

We will encourage you to walk, deep breathe, and cough frequently. These activities will help your lungs work better. Please see the Activity Checklist (Page 9) for what you should do each day.

We will teach you about any respiratory care that you may need to continue at home.

IMPORTANT:

Please tell the respiratory therapist or your nurse if you were receiving respiratory therapy at home but are not receiving it in the hospital. For example, you may have been receiving breathing medicines, breathing treatments, home oxygen, BiPAP, or CPAP at home. You may need to continue these treatments during your hospital stay.

Nutrition in the Hospital

Cardiac diet

Your doctor has ordered a **cardiac diet** for you during your hospital stay after surgery. This diet has **limited fat, cholesterol, and sodium** to promote heart health. Your diet may be tailored for you in other ways as well. For instance, people with diabetes will have a diabetes diet.

Appetite after surgery

After surgery, it's important to eat balanced meals. That way, your body will get the nutrients needed for proper healing. However, many patients have less appetite or find things taste different after surgery. If this happens to you, you may not want to eat as much as you need to eat.

To help you eat, we sometimes loosen your diet restrictions slightly until you are eating better. Our hospitals offer patients a wide variety of food options. Ask for smaller, more frequent meals, with added snacks or supplements.

Guidelines and dietitian

As you progress in recovery and move closer to discharge, you should read and start to follow the Dietary Guidelines in this booklet (Pages 47 to 68).

If you would like to speak with a registered dietitian about your meals or want more information about your diet, please tell your nurse.

Atrial Fibrillation

Atrial fibrillation is sometimes called “A-fib” for short. It is a very irregular heart rhythm. It is caused by irregular beating of the upper chambers of the heart (atria).

A-fib after heart surgery

It is not uncommon to develop A-fib after open-heart surgery. Irritation of the heart during surgery may cause A-fib. Fluid overload after surgery is another possible cause.

In A-fib, the heart rhythm can be very fast. It may cause:

- fatigue
- sweating
- mild chest heaviness
- shortness of breath
- nervousness

A-fib is not a life-threatening problem.

Controlling A-fib

A-fib is usually can be controlled by medicine alone.

Occasionally, medicine is not enough. When this happens, the heart needs a small electric shock called a DC cardioversion. This often brings the heart back into a normal rhythm.

When A-fib is prolonged, rapid, or goes back and forth from A-fib to normal rhythm, blood clots may form in the heart. These clots can be dangerous. If a clot is pumped out of the heart, it could block blood flow to the brain and possibly cause a stroke.

To help prevent clots, you may be placed on a blood thinner medicine (heparin or Coumadin) for a short time.

MIDCAB Surgery

(Minimally Invasive Direct Coronary Artery Bypass)

How MIDCAB differs

MIDCAB surgery and conventional bypass surgery differ in some ways.

Below is a list of some differences with MIDCAB and how they affect a patient.

- MIDCAB surgery takes less time. It usually lasts only 2 to 3 hours. This means that patients spend less time under anesthesia.
- Anesthesia is lighter with MIDCAB. This allows the breathing tube to be removed when the surgery is over — either in the operating room or soon after in the recovery room. Because the breathing tube is in place for a shorter time, the lungs are less affected.
- The MIDCAB incision is generally only 8 to 10 cm long. It is located just under the left breast. Patients have less pain and less restricted movement.
- MIDCAB surgery is done on a beating heart. Patients are not placed on a heart-lung machine. As a result, the body is less affected after surgery, for example, has less edema (retains less water).
- In most instances, the left internal mammary artery is used for the MIDCAB. This means there is no incision on the legs or arms. Again, the result is less pain.

Going home after MIDCAB surgery

If you had MIDCAB surgery, most of this booklet applies to you. But some of the guidelines for MIDCAB patients are different.

- Most MIDCAB patients go home on the 2nd or 3rd post-op day.
- Shower daily. **Do not** put any creams or ointments on your incision.
- Increase your activity as tolerated. Walking is the best exercise!
- **Do not** lift or pull anything heavier than 10 pounds for the first 4 to 5 days after surgery. After that, there are no exercise restrictions.
- You may drive a car.
- You may resume sexual activity whenever you feel comfortable.
- After you go home, visiting nurses will visit twice during your 1st week at home.

After You Go Home

Home Check List

Have you ...

- removed “Things to Remember” (Page 7), filled in phone numbers, and placed it on your refrigerator?
- set up your medication schedule?
- been contacted, within 3 days of your discharge, by your home health nurse to set up visits (if home care was ordered for you)? If not, call your surgeon’s office.
- continued your incentive spirometer use and your coughing and deep-breathing exercises for 1 week?
- taken your temperature 2 times each day, and reported readings over 101 F degrees to your nurse?
- checked your incisions daily for signs of infection? See “How to Care for Your Incisions,” Page 23.
- weighed yourself daily, and reported any weight gain of more than 3 pounds in 1 day or 5 pounds in 1 week?
- checked your pulse daily, and reported any changes in the rate or rhythm? See “Atrial Fibrillation,” Page 15.
- made sure not to lift anything heavier than 5 to 10 pounds for the first 4 weeks after surgery? See Page 17 if you had MIDCAB surgery.
- stayed out of bed as much as possible, and elevated your legs whenever sitting?
- taken only a short nap in the afternoon if you are tired, so that you are able to sleep at night?
- during the first week, decreased your use of pain medicine, and substituted extra-strength Tylenol for your discomfort? (Narcotics can cause fatigue, constipation, sweating, dry mouth, and dizziness.)
- increased your exercise every couple of days? See Pages 31 to 37. Remember to walk in an enclosed area if it is too hot or too cold outside.
- remembered that you are not allowed to drive a car until cleared by your surgeon at your 4-week checkup? Riding in a car is OK. See Page 17 if you had MIDCAB surgery.
- called for cardiac rehab if desired? Call 412-648-6853.
- called for smoking cessation classes if needed.

Pennsylvania Free Quitline
1-877-724-1090

UPMC Referral Service
1-800-533-8762

American Lung Association
1-800-548-8252 or www.lungusa.org

- called for dietary instruction if desired? Call 412-647-7063.
- within your first week at home, made appointments to see your:
 - family doctor in 2 weeks
 - cardiologist in 4 weeks (or as directed)
 - CT surgeon in 4 weeks

Sternal Incision Precautions

The breast bone is called the sternum. If you had an incision in your sternum, this is called a sternal incision.

Care for your incision

To care for yourself after a sternal incision, please follow these steps.

- Use coordinated breathing during activity. Breathe in through your nose as you raise your arms. Breathe out through your mouth as you lower your arms. **Never** hold your breath during strenuous activity.
- You may raise your arms over your head to brush or shampoo your hair. Be careful when reaching. You will find that the sternum and the surrounding muscles may be very sore for a while.
- **Do not** lift anything heavier than 5 pounds for 4 weeks after surgery.
- You should not push or pull with your arms, especially when rising from a chair or bed. Have someone help you get up. Or roll to your side, and push off with your elbow to get out of bed.
- Assistive devices, such as canes or walkers, can be used only for balance. **Do not** place your full weight on any of these devices until the sternum is completely healed (usually 10 to 12 weeks).

How to Care for Your Incisions

Caring for your incisions after you go home is an important part of recovery. This section tells you what to do for your incisions and when to call your doctor.

If you have diabetes, you will tend to heal more slowly. You also will have more risk of developing an infection. It is very important to keep your blood sugar levels in good control. You also need to put extra effort into caring for your incisions.

What should I do for my incisions?

It is very important to keep your incisions clean and dry. Follow these guidelines:

- Shower daily. **Do not** take a tub bath for 4 weeks or until your doctor says you may.
- Wash your incisions with a mild soap and water. **Always** use a clean wash cloth.
- **Do not** put creams, lotions, or antibiotic ointments on the incisions.
- Keep your legs elevated when sitting.
- Be careful not to bump or bruise the incisions.
- **Do not** wear any tight clothing that may rub against your incisions.

The visiting nurse will remove metal clips or stitches in 7 to 10 days.

When is my incision normal?

The following symptoms are normal and should resolve in the first 2 to 3 weeks.

- black and blue skin around the incisions
- mild redness along the incision edges
- tenderness, numbness, or itching along the incisions
- mild to moderate swelling around the incisions, especially leg incisions
- small amount of clear or pinkish drainage from incisions

When should I call my doctor?

If you have any of the following symptoms, call your doctor right away:

- redness that extends more than 1 inch from incision edges
- increased warmth in the skin around an incision
- large amount of clear or pinkish drainage
- sudden increased amount of drainage
- white, yellow, or greenish drainage
- odor, which may be foul or sweet, coming from an incision
- increase of swelling, tightness, or pain around an incision
- fever higher than 101 F or chills
- temperature of 99 F to 100.9 F for more than 3 days
- tenderness in your calf or your forearm
- long-lasting extreme tiredness (fatigue)

Safety Tips for Taking Your Medicine

Your medicines are powerful drugs. It is **important** to know the right way to use them. Here is a list of “Dos and Don’ts.”

DO

- Learn the correct way to take your medicine.
- Always take your medicine as prescribed.
- Make a habit of taking your medicine at the same time each day.
- Ask the pharmacist if your refilled medicine looks different than usual.
- Keep your medicines in the original containers so you will not confuse them.
- Store your medicines properly in a place that is dark, cool, and dry. Light, heat, and moisture may affect how well a medicine can work.
- Throw away all medicines that are outdated.
- After each discharge or appointment, update the list of medicines that you take.
- Keep all medicines out of the reach of children.
- Learn both the generic name and brand name of your medicines.
- Ask your pharmacist or doctor what each of your medicines does for you.
- Tell your doctor and pharmacist about your health history. Include your allergies and drug reactions.

- Always carry an updated list that shows your medicines, type of surgery, doctors’ names, and emergency numbers.
- Wear a medical alert bracelet if you have allergies or take the drug Coumadin.
- Keep the poison control phone number at hand.

DON’T

- Don’t chew, crush, or break any capsules or tablets unless you are instructed to do so.
- Don’t take your medicine in the dark. You may take the wrong medicine if you cannot see what you’re taking.
- Don’t wait until your last dose to ask for a refill. Don’t run out of medicine.
- Don’t stop taking your medicine without your doctor’s approval.
- Don’t take an over-the-counter medicine unless your doctor clears it.
- Don’t take someone else’s medicine.
- Don’t rely on family or friends for information about medicines. Ask a professional.

REMEMBER

- Some medicines contain more than drugs. Some contain salt, sugar, and alcohol.
- Birth control pills, over-the-counter herbal remedies, and vitamins are medicine. They may interact with your heart medicine with bad results.
- Drugs may affect pregnancy and an unborn child. Drugs may pass into breast milk.

Learn more

You can learn more about your medicines on UPMC's website at www.upmc.com. Go to Health A-Z; in the drop-down box, click Patient Education Materials, then "C." There are two options:

- Click Cardiology, and then "Blood Clot Prevention: Coumadin (warfarin)."
- Click Cardiology Drugs, and then other heart medicines your doctor has prescribed for you.

Depression After Open Heart Surgery

After open heart surgery, patients often have feelings of sadness or varying degrees of depression. Usually these feelings disappear within several weeks. Sometimes, however, the symptoms don't go away and become worse.

Signs of depression

Recognize signs of depression, which include:

- feeling sadness or emptiness
- loss of interest or pleasure in daily activities
- significant weight loss or weight gain
- significant change in sleep patterns, such as inability to sleep or sleeping more than usual
- restlessness
- fatigue or loss of energy
- feeling worthless or extreme guilt
- difficulty making decisions
- difficulty concentrating
- thoughts of death or suicide
- planning or attempting suicide

Call your doctor

If you have any of the symptoms listed above, call and talk with your family doctor.

Call your doctor immediately if you are thinking about or planning suicide, or go to the nearest hospital Emergency Department.

Cardiac Rehab: An Important Step to Recovery

What is cardiac rehab?

After you go home, it is strongly advised that you join a cardiac rehabilitation (re-huh-bill-ih-TAY-shun) program. Cardiac rehab helps patients recover to a full and active life after heart surgery.

An outpatient cardiac rehab program can help you in these ways:

- **exercise** — helps you regain energy and strength during recovery. Your exercise program will be tailored to your specific condition, needs, and interests.
- **education and counseling** — helps you understand your heart condition. You will learn how to adopt a healthy lifestyle to reduce your risk of future heart problems.

How do I get started?

Talk to your surgeon at your post-op visit. Ask if he or she recommends outpatient cardiac rehab for you. If so, ask your surgeon for a cardiac rehab prescription.

Then call your local outpatient cardiac rehab program. The hospital's cardiac rehab staff can help you find a program in your area.

The Role of Exercise in Your Recovery

Exercise is vital if you want to recover as fully as you can. Regular exercise will increase your quality of life. This section gives you guidelines for a regular home exercise plan.

What can exercise do for me?

Physical activities like walking, biking, and swimming are a type of exercise called aerobics (air-ROW-biks). Regular aerobic exercise will help your heart pump with less effort. In addition, regular aerobic exercise may help to lower blood pressure, lower cholesterol levels, help with weight loss, control blood sugar, and provide an overall sense of well-being.

You need to engage in aerobic activity for at least 20 minutes every day to benefit. Your rate of progress will depend on factors such as your age, how active you were before surgery, and any other illness or limitation you may have.

What type of exercise should I do?

You will be given an exercise plan if you are going home after you leave the hospital. The cardiac rehab staff will design the home exercise plan for your specific needs. It will be based on your age, your health history, your activity level before surgery, and your progress after surgery.

Your home exercise plan will begin with a walking program. At the end of this section (Page 37), you will find a Home Walking Program that is not yet completed. Before you leave the hospital to go home, your cardiac rehab specialist will fill in specific instructions for your walking program.

When should I exercise?

You may exercise at any time of the day. Be sure to space your sessions evenly throughout the day. Before exercising, wait at least 1 hour after meals and 1/2 hour after other activities, such as housework.

Do not exercise outdoors in cold weather (below 35 F) or in hot, humid weather (above 85 F with humidity above 80 percent). In the summer, it's best to walk or do other outdoor exercise in the early morning or evening, when it is cooler outside. A good option for walking during the hot or cold months is indoor mall walking.

How much exercise should I do?

Your home exercise plan is a general guide for how much exercise to do. Depending on how you feel at home, you may need to adjust the plan. Pace yourself so that you do not exercise too much.

Signs that you are doing too much exercise include:

- dizziness
- increased shortness of breath
- chest pain (angina)
- extreme tiredness (fatigue) during exercise

If you have any of these or other symptoms, stop and rest as needed. If your symptoms continue, call your doctor.

Warm-Up Exercises

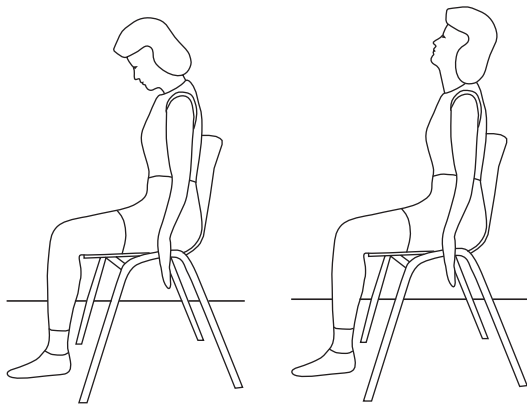
General guidelines

- Breathe naturally. **Do not** hold your breath.
- Exercises should be done slowly and smoothly.
- Do each exercise 5 to 10 times unless instructed otherwise.

These exercises may be done in a sitting position.

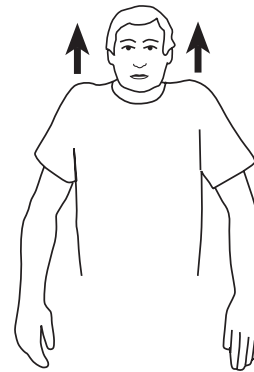
Neck stretch

Bend your neck forward bringing your chin toward your chest. Then bring your neck up and tilt your head back gently. Next, with your head upright, turn your head toward your left shoulder, then right shoulder. Hold for 5 to 10 seconds in each position.



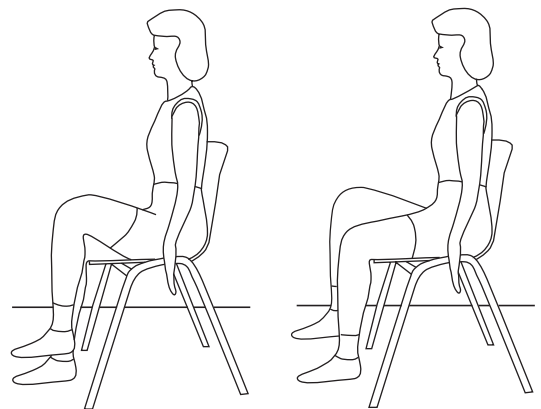
Shoulder shrugs

Lift both of your shoulders up, then return to relaxed position. Repeat 5 to 10 times.



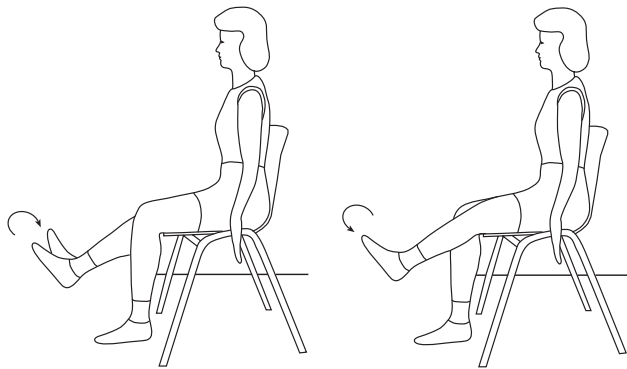
Knee lift

Lift one foot off the floor 5 to 8 inches. Return that foot to the floor, and repeat with your opposite leg. Repeat 5 to 10 times on each leg.



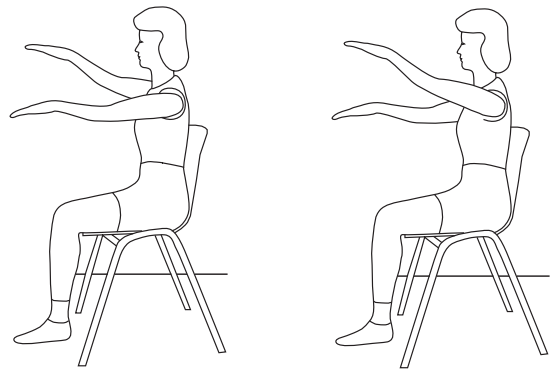
Leg lift with toe circle

Lift and extend your foot 6 to 10 inches from the floor. Make circles with your toes, 5 to 10 in each direction. Repeat with your opposite leg.



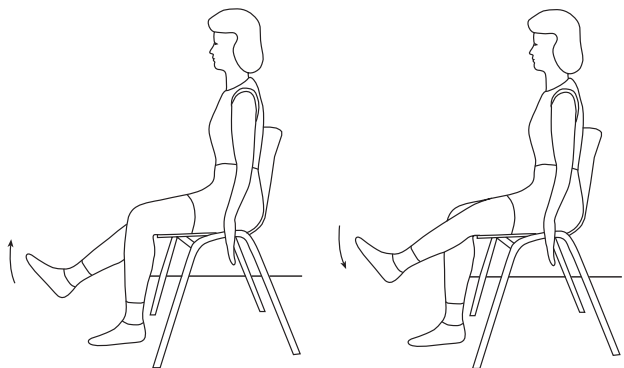
Straight arm raise

Extend both arms out in front of you with palms facing down. Raise each arm above eye level, alternating one at a time.



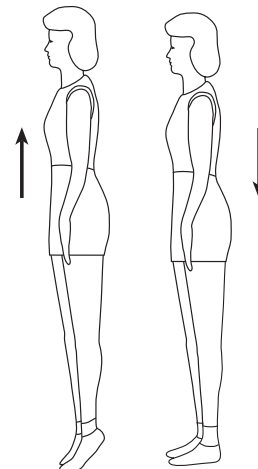
Leg extension

Lift one leg at a time, keeping it straight, until the entire leg is off the chair. Hold for 10 to 15 seconds, and then repeat with the other leg.



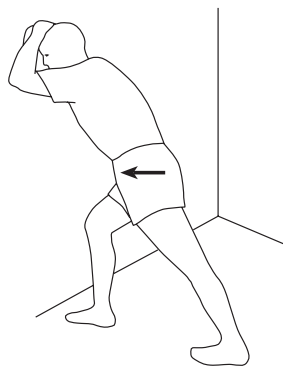
Heel raises

Use a chair or wall for support. Stand with your feet apart at shoulder width. Push your heels off the floor, and balance your weight on the balls of your feet. Return to resting position. Repeat 5 to 10 times.



Calf and ankle stretch

Face a wall, and have your feet facing forward. Place one foot in front of the other as shown. Bend your front knee while keeping both heels firmly on the floor. Gently lean in toward the wall. Hold the stretch for 10 to 15 seconds. Repeat with the opposite leg.



My Home Walking Program

Below you will find a home exercise plan for several weeks. Try to walk for the prescribed amount of time without stopping.

Remember that the plan below is just a guide. You should adjust this plan based on how you feel at home.

Warm-up period

To start an exercise period, warm up slowly first. If the exercise period is to be longer than 10 minutes, walk slowly for the first 5 minutes.

Pace yourself

After you warm up, you may walk at a faster pace. Be sure the pace is comfortable for you. You should be able to talk with someone while you walk. You should not become breathless. If you become winded, slow down.

How often to walk

For the first few weeks, walk every day. When you can progress to 15 or 20 minutes of exercise, you need to walk only 3 to 5 days a week. You may walk daily if you wish.

For questions

If you have any questions about your exercise plan, please call your cardiac rehab specialist.

Name: _____

Phone: _____

My Home Walking Program

Week 1:

Walk _____ minutes _____ times a day.

Week 2:

Walk _____ minutes _____ times a day.

Week 3:

Walk _____ minutes _____ times a day.

Week 4:

Walk _____ minutes _____ times a day.

Recovery From Open Heart Surgery

This section gives you general guidelines to follow while you recover from surgery. Recovery involves both physical healing and emotional healing.

When can I get physically active again?

After open heart surgery, your body must heal for about 4 to 6 weeks before you can return to all normal activities. Surgery, along with bed rest and being inactive, makes your body less able to tolerate activity.

The best way to resume your normal activities at home is to use a slow, progressive approach. Over time, you should be able to perform routine household tasks, take part in recreational activity, and return to work.

General Tips

- Get up and get dressed each morning; don't stay in bed.
- Wear street clothes each day to help you get back into a regular daily routine.
- Break up long tasks into shorter parts, and space them over the day.
- Stop your tasks before you get tired. If you overdo it, you'll probably be very tired the next day and need to rest.

Rest

During the day, alternate your activity with rest periods. Your body may give you signals that show you need to rest. These signals include symptoms such as shortness of breath, fatigue, dizziness, and pain or discomfort. Try to plan ahead for rest periods so you will not become too tired.

Stairs

You may climb stairs. Be sure to go slowly at first. Take your time. Remember that it takes more energy to climb stairs than to walk. If you become tired or short of breath as you climb, stop, rest, and then continue. Use the stair railing only for balance. **Do not** pull yourself up the stairs.

Driving

Do not drive a car until after your visit with your surgeon. This appointment is usually 4 to 6 weeks after surgery. A car accident could damage your breast bone (sternum).

You may ride in a car. Either ride in the back seat, or if riding in the front seat, move the seat back as far as possible. Use a pillow between your chest and the seat belt for comfort and to prevent irritation.

Do not take long trips until your doctor says you may. When you are allowed to travel, it's **important** to stop every 2 hours to walk and stretch your legs.

Bathing

Shower daily. **Do not** take tub baths. Avoid extremely hot water, which may make you feel dizzy or light-headed. Try to have another person nearby the first few times you take a shower.

After showering, you may want to take a short rest before you dress. This will help to prevent fatigue.

Sex

Many patients are concerned about resuming sexual activity after surgery. It often depends on how you feel physically and mentally.

Most doctors agree on the following guideline: When you can climb 2 flights of stairs without fatigue or shortness of breath, you are physically able to resume sexual activity.

Here are some other guidelines:

- Feel rested before beginning.
- Wait at least 1 hour after eating.
- Relax and go slowly.
- Find a comfortable position. Be sure you **do not** have to support your weight or your partner's weight.
- Be with a familiar partner. Your heart may have to work harder to have sex with a new partner.

Joining a cardiac rehab program can help to improve your physical strength and confidence. Remember that some medicines interfere with sexual performance or arousal. If you experience these problems, you may want to talk with your doctor.

See the next section, “Dos and Don’ts for Activity After Open Heart Surgery,” for a detailed list of what you may and may not do.

What part do emotions play in my recovery?

Recovering from open heart surgery also involves emotional healing. Remember that healing takes time. You will have good days and bad days. As you increase your daily activity, follow your exercise plan, and get plenty of rest, you will help yourself on the road to emotional recovery.

A Range of Emotions

During this time, you are likely to feel a variety of emotions. You may feel fear, anger, denial, frustration, and sadness. If you experience this, it's important to realize that these feelings are normal. Not only our bodies, but also our feelings go through a period of adjustment with a change in our health.

Share Your Feelings

You may tend to keep your feelings to yourself. But when you don't share your feelings with others, you may start to feel isolated. Your family members and friends also may be experiencing many of the same emotions. When you talk about your concerns with them, it will help everyone to cope better.

Signs of Depression

Many people experience some depression after open heart surgery. For some people, depression becomes so severe that they are no longer able to function normally. Some signs of depression are:

- feeling great sadness or hopelessness
- sleeping too much or too little
- changes in eating habits
- loss of interest in usual activities

If you have any of these signs, talk about it with your doctor.

Dos and Don'ts for Activity

Weeks 1 and 2

DO:

- Shower, shave, and wash your hair.
- Prepare basic foods.
- Wash dishes, do light dusting, and make beds (**do not** change sheets) — light housework.
- Write, read, and type — desk work.
- Read, watch TV, and listen to radio programs and music.
- Sew, knit, and do other crafts.
- Play cards and board games.
- Ride in a car as a passenger (short trips only).
- Walk as prescribed by your cardiac rehab program.

DON'T:

- Don't lift more than 5 pounds.
- Don't lift infants or small children.
- Don't vacuum, sweep, or scrub floors or the tub.
- Don't shovel, dig, or cut grass or hedges.
- Don't walk a medium-size or large-size dog.
- Don't do competitive sports.
- Don't do any strenuous activity
- Don't drive.
- Don't walk up grades or hills.

Weeks 3 and 4

DO:

- Dine out and prepare meals.
- Shop for groceries, and run errands (avoid lifting).
- Go to church, bingo, and movies.
- Play musical instruments.
- Wash dishes, do light dusting, and make beds (**do not** change sheets) — light housework.
- Pump gas.
- Walk up mild grades.

DON'T:

- Don't lift more than 5 pounds.
- Don't lift infants or small children.
- Don't vacuum, sweep, or scrub floors or the tub.
- Don't shovel, dig, or cut grass or hedges.
- Don't do carpentry or paint.
- Don't hunt.
- Don't bowl.
- Don't walk a medium-size or large-size dog.
- Don't do competitive sports.
- Don't drive.
- Don't walk up steep grades or hills.

Weeks 5 and 6

DO:

- Sweep with a broom, do laundry, clean windows — moderate housework.
- Paint, do light carpentry, and make house repairs (no ceiling or ladder work).
- Ride the mower and garden.
- Do light car maintenance.
- Dance, bowl, and golf (pitching and putting).
- Walk the dog.
- Have sex as an active partner.
- Drive and travel by plane.

DON'T:

- Don't lift more than 20 pounds.
- Don't shovel heavy loads.
- Don't do contact sports.
- Don't walk up steep hills.

Lower Your Risk for Heart Disease

A number of factors can put you at increased risk for a heart attack. Each risk factor that you have increases your overall risk.

How to lower your risk

To reduce your risk, you need to change to a heart-healthy lifestyle. Follow these guidelines:

- **Quit smoking.** Quitting smoking is the most important action you can take to improve your health now and in the future.
- **Control your blood pressure.** If your blood pressure is above 120/80, you have high blood pressure (hypertension.) Have your blood pressure checked regularly and take medicine if your doctor has prescribed it. Exercising and losing weight can help you reach an ideal blood pressure goal of 115/75.
- **Control your diabetes.** Take your medicine, exercise daily, and watch what you eat. Monitor your blood glucose daily. You should have your hemoglobin A1c checked 3 or 4 times per year. A good hemoglobin A1c is less than 7.
- **Lose weight.** Exercising regularly and eating a low-fat and healthy diet can help you lose weight. (See Weight Chart on page 47.)
- **Reach your cholesterol goals.** The following chart shows the ideal numbers for each type of cholesterol.
- **Exercise.** Become active. A good goal is to exercise 5 to 7 days a week. You can take 3 to 4 short walks per day. Start out slowly and gradually increase your walking time to 30 to 60 continuous minutes. If you are not able to walk, consider swimming or cycling.
- **Care for your emotional health.** Emotions are an important part of your overall health. If you feel stressed, alone, angry, or depressed, it might be difficult to make healthy changes in your life. You can help to control stress by exercising, deep breathing, and meditating. It is also important to talk about your feelings with a family member or close friend.
- **Know your body.** Listen to signals from your body. If there are any changes in how you feel or if you have any new symptoms, tell your doctor.

Healthy Cholesterol Numbers
Total Cholesterol: Less than 200
LDL (“bad cholesterol”): Less than 100
HDL (“good cholesterol”): Greater than 40
Triglycerides: Less than 150

Guidelines for a Heart-Healthy Diet

Eating well-balanced meals that are low in fat, cholesterol, and sodium and high in fiber is important to your continued health. Heart-healthy foods help to lower cholesterol, decrease blood pressure, and reduce weight.

It is not always easy to change your eating habits. The heart-healthy guidelines in this section of the booklet will help you. You can still enjoy food when you follow these guidelines.

Weight Chart

	Sun.	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.
Week of $\frac{9/1}{\text{(sample)}}$	150	151	150	150	151	152	151
Week of _____							
Week of _____							
Week of _____							
Week of _____							
Week of _____							
Week of _____							
Week of _____							
Week of _____							
Week of _____							
Week of _____							

Dietary Guidelines: Sodium (Salt)

Facts about sodium

Sodium is a mineral that helps the body regulate blood pressure and blood volume, but most Americans eat more sodium than their bodies need. Many heart patients can decrease their blood pressure and help their hearts to pump better when they limit the amount of sodium in their diet.

Table salt is a major source of sodium in your diet. Table salt is a mixture of sodium and chloride. **One teaspoon** of salt has 2,300 milligrams of sodium. Currently, the recommended amount of sodium for the entire day is 2,400 milligrams. To properly regulate body fluids, the body needs only 500 milligrams of sodium a day.

Tips to decrease sodium

Take these tips to reduce the amount of sodium in your diet:

- **Do not** use table salt. Ask your doctor about the use of a salt substitute. However, because they contain potassium, salt substitutes may not be right for you.
- Avoid cooking with salt. Try herbs and spices to season your food.
- Eat more fresh and frozen foods. Avoid convenience, canned, processed, cured, smoked, and fast foods.
- Avoid canned or bottled condiments. Use low-sodium bouillon cubes or fresh vegetable stock. Do not use store-bought bouillon cubes, which have 864 to 1152 milligrams of sodium (brands vary).
- When dining out, request that your food be prepared without salt or MSG.
- Read food labels. Use the chart that follows as a guide.

Food Label Claims	
What the Label Says	What It Means
Sodium free or salt free	Less than 5 mg sodium per serving
Very low sodium	35 mg of sodium or less per serving
Low sodium	140 mg of sodium or less per serving
Reduced sodium	At least 25% less sodium than the original food product
Light or lite sodium	At least 50% less sodium than the original product
Unsalted or no salt added	Processed without the salt normally used

CHOOSE These Creative Seasonings	
Seasoning and Spices	Uses
Anise	Used in tossed green salad and other vegetable salads
Caraway seeds	Seasons bread, cabbage, cauliflower, cereals, and cookies
Cardamom seeds	Good with curries, soups, and meats
Cayenne	Use sparingly in vegetables, meats, fish, poultry, and soups
Chili peppers	Seasons soups, rice, dried peas or beans, meat, and fish
Cloves	Used in the same way as cinnamon
Coriander seeds	Seasons stews, curries, soups, and fish
Curry powder	Used in soups, stews, rice, chicken, egg substitutes, meat, fish, and vegetables
Garlic (fresh or powder)	Used for soups, sauces, salads, salad dressings, meats, fish, poultry, and dried peas or beans
Ginger	Used similarly to cinnamon
Mace	Flavors meats, fish, poultry, soup, sauces, stews, potatoes, and vegetables

CHOOSE These Seasonings and Flavor Enhancers		
Allspice	Horseradish	Pineapple (not prepared)
Apple	Hot sauce	Poppy seed
Applesauce	Jelly	Purslane
Almond extract	Juniper	Red peppers
Anise	Leeks	Rosemary
Aromatic bitters	Lemon juice or extract	Saccharin
Basil	Lime juice	Saffron
Bay leaf	Mace	Sage
Caraway	Maple extract	Savory
Cardamom	Marjoram	Scallion
Cayenne	McCormick Parsley Patch	Sesame seed
Celery seed-fresh	Mint	Sorrel
Chili powder	Mrs. Dash®	Sugar, brown
Chives	Mustard, dry	Sugar substitute
Cinnamon	Mustard seed	Sugar, white
Cloves	Nutmeg	Summer savory
Cocoa	Onion juice (fresh, powder)	Tabasco sauce
Coriander	Onion, dehydrated	Tarragon leaves
Cranberry sauce	Orange extract	Thyme
Cumin	Orange peel	Tomatoes, fresh
Curry	Oregano	Turmeric
Dill Leaves	Paprika	Vanilla extract
Fennel	Parsley (fresh, flakes)	Vinegar
Garlic (fresh, powder, juice)	Pepper (black, red, white)	Walnut extract
Ginger	Peppermint extract	Wine or Sherry
Green peppers	Pimento peppers	

AVOID These Seasonings and Flavor Enhancers	
Accent®	Monosodium glutamate (MSG)
Bacon fat	Mustard
Baking powder (except in baking)	Olives
Baking soda (except in baking)	Onion salt
Barbecue sauce	Pickles
Bouillon cubes	Relishes (commercial)
Celery salt	Salt pork
Chili sauce	Salt (table and light)
Cooking sherry	Sea salt
Cooking wine	Seasoning salts
Fatback	Soy or soya sauce
Garlic salt	Steak sauce
Horseradish (prepared)	Teriyaki sauce
Kosher salt	Vegetable salt
Meat extracts (meat tenderizers)	Worcestershire sauce
Meat sauce	

Dietary Guidelines: Fats

To make heart-healthy food choices, you need to know about the different kinds of fats.

Cholesterol

Cholesterol is a soft, odorless, waxy substance found in all body cells. Cholesterol is important to help the body function, but is needed only in small amounts. Too much cholesterol in your body may cause heart and blood vessel diseases. Animal products, such as meat, contain cholesterol.

Saturated fat

Saturated fats are solid at room temperature. These fats tend to raise your total cholesterol and LDL (bad) cholesterol levels. To reduce the amount of saturated fats in your diet, avoid fatty cuts of meat, poultry skin, whole milk products, butter, tropical oils such as coconut and palm oil, and hydrogenated foods (see UPMC patient education sheet [Food Labels](#)).

Unsaturated fat

Unsaturated fats tend to be liquid at room temperature. They do not raise your cholesterol like saturated fats do. **Mono-unsaturated fat** lowers blood cholesterol by lowering LDL. These fats are in olive, canola, and peanut oil. **Poly-unsaturated fat** lowers the total cholesterol level. These fats are in soybean, sunflower, safflower, and corn oils. Although unsaturated fats have healthy effects, you still need to control your intake of these fats.

Hydrogenation and trans fats

Hydrogenation (hi-draw-jen-AY-shun) is a process that changes a liquid oil into a solid. For example, hydrogenated oil becomes margarine. The more solid the liquid becomes, the more saturated fat it has. The process also creates trans fatty acids (trans fats). Both trans fatty acids and hydrogenated oils can increase blood cholesterol levels.

Omega-3 fatty acids

Omega-3 fatty acids may lower total cholesterol and LDL (bad) cholesterol levels. Good sources are tuna, mackerel, salmon, herring, sardines, trout, and whitefish. It is recommended to eat fish 2 to 3 times a week for a healthy heart. Flaxseed and walnuts also contain omega-3 fatty acids. If you do not eat fish, ask your dietitian for other ideas to put omega-3 fatty acids into your diet.

Tips to reduce fat and cholesterol

- Choose low-fat and skim dairy products.
- Eat lean meat. Trim the fat from meats and poultry before cooking. Remove the skin from poultry.
- Bake, roast, braise, broil, grill, or poach food. Avoid fried food.
- Watch for hidden fats in gravy, salad dressing, and processed foods.
- When using fat in your diet, choose liquid oils. Limit liquid oils to 1 to 2 teaspoons at a meal.
- Read labels to avoid hydrogenated oils, such as margarine.

Dietary Guidelines: More Heart-Healthy Tips

Fiber

Fiber is part of the plant that is not digested. There are two forms of dietary fiber: soluble and insoluble. Both forms of fiber provide many health benefits.

- **soluble fiber** — helps control blood cholesterol levels. It binds to some of the cholesterol in your digestive tract and eliminates it. Good sources include apples, oats, dried beans, barley, oranges, and broccoli.
- **insoluble fiber** — absorbs moisture and helps prevent constipation. Good sources include wheat bran, whole grains, and most vegetables.

Increase fiber in your diet by eating more whole grains, fruits, and vegetables. Eat 3 servings of whole-grain starches each day, such as whole-wheat bread, brown rice, and oatmeal. Eat 3 servings of fresh fruit and 3 to 5 servings of vegetables each day.

Plant stanols

Plant stanols or sterol esters occur naturally in plant foods. Plant stanols are thought to decrease LDL (bad) cholesterol without affecting HDL (good) cholesterol. It appears that cholesterol attaches to the plant stanol in the digestive tract and then is eliminated. Plant stanols are used in some margarine spreads, such as Benecol and Promise Activ brands.

Caffeine

Examples of foods that contain caffeine are coffee, tea, chocolate, and many soft drinks. Ask your doctor if you need to limit caffeine in your diet.

Soy

Studies have shown that soy protein may help lower your cholesterol. Soy is available in the whole soybean form, tofu, soymilk, soy burgers, and soy flour. Soy protein is now found in some cereals.

Dietary Guidelines: Know Your Label

Use the Nutrition Facts label and the list of ingredients on food products to help guide your food choices.

Nutrition Facts	
Serving Size 1 cup (228g)	
Servings Per Container 2	
Amount Per Serving	
Calories 250	Calories from Fat 110
% Daily Value*	
Total Fat 12g	18%
Saturated Fat 3g	15%
Trans Fat 1.5g	
Cholesterol 30mg	10%
Sodium 470mg	20%
Total Carbohydrate 31g	10%
Dietary Fiber 0g	0%
Sugars 5g	
Protein 5g	
Vitamin A	4%
Vitamin C	2%
Calcium	20%
Iron	4%
* Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs:	
	Calories: 2,000 2,500
Total Fat	Less than 65g 80g
Sat Fat	Less than 20g 25g
Cholesterol	Less than 300mg 300mg
Sodium	Less than 2,400mg 2,400mg
Total Carbohydrate	300g 375g
Dietary Fiber	25g 30g

1

2

4

3

1. Servings section: This section shows you the recommended serving size and the number of servings per container.

2. Nutrients section: This section tells you the amount of each nutrient in 1 serving of the product. Pay close attention to the amount of fat, saturated fat, cholesterol, and sodium in the food.

3. “% Daily Value” section: The percent shows how much of the recommended daily amount (Daily Value) of each nutrient you get by eating 1 serving of this food. For example, 1 serving of the food in the sample label provides 20 percent of the total sodium recommended for most adults. The Daily Values in this section are based on a 2,000 calorie diet.

4. Daily Values section: Here you can see the recommended daily amount for each nutrient for two different calorie levels. If you eat a 2,000 calorie diet, you should be eating less than 65 grams of fat and less than 20 grams of saturated fat. If you eat 2,500 calories a day, you should eat less than 80 grams of fat and 25 grams of saturated fat each day. **Your daily amounts may be higher or lower, depending on the calories you consume.**

Make Recipes Heart-Healthy

It is easy to make recipes more heart-healthy.
This chart gives you tips on how to do this.

How to Change Recipes

If a Recipe Calls For:	Use Instead:
1 whole egg	Egg substitute (per package instruction) or 1 egg white with 1 teaspoon vegetable oil or 2 egg whites
1 cup butter	1 cup tub margarine (may not work in all recipes because of margarine's water content) or 1 cup applesauce
1 cup shortening	3/4 cup vegetable oil
1 cup whole milk	1 cup skim milk
1 cup light cream	1 cup evaporated skim milk or 3 tablespoons oil with skim milk to equal 1 cup
1 cup heavy cream	1 cup evaporated skim milk or 2 to 3 cups skim milk with 1/2 cup oil
1 cup sour cream	1 cup plain yogurt or 1 cup blenderized, low-fat cottage cheese with lemon juice
1 oz baking chocolate	3 tablespoons powdered cocoa and 1 tablespoon oil
Cream cheese	4 tablespoons margarine with 1 cup dry low-fat cottage cheese and a small amount of skim milk to blend
Cream soup	1/2 can low-sodium, low-fat soup and 1/2 can skim milk
Sour cream	Non-fat, plain yogurt with 1 tablespoon flour for each cup of yogurt
High-fat cheese	Low-fat cheese (less than 3 grams fat per ounce)
Mayonnaise	Non-fat yogurt or Half non-fat yogurt with half light mayonnaise or Light or imitation mayonnaise

If a Recipe Calls For:	Use Instead:
Canned tomatoes or sauce	Canned tomatoes or tomato sauce with no added salt or Fresh tomatoes or Tomato paste or tomato puree without added salt
Canned broth or bouillon cubes	Fresh chicken stock or low-sodium chicken bouillon cubes
Salt	<ul style="list-style-type: none"> • In some recipes, omitting salt does not change the taste. • Use fresh herbs, when possible. • Add dry mustard to vegetable, salads, and grains. • Use flavored vinegars in soups, sauces, and salad dressings.

Dietary Guidelines: Dining Out

Many restaurants have special heart-healthy choices on the menu or will prepare food in the way you request.

In addition, you can learn to recognize and choose menu selections that are heart-healthy. Here are tips for what to choose and what to avoid on menus.

CHOOSE foods described this way:

- Au jus
- Bordelaise
- Bouillabaisse
- Broiled
- Burgundy-style
- Clam sauce
- Garden fresh
- Grilled
- In its own juice
- In lemon juice
- Marinara
- Poached
- Roasted
- Steamed
- Tomato-based sauces
- Wine-based sauces

AVOID foods described this way:

Avoid foods described this way:

- Antipasto
- Au gratin
- Béarnaise
- Béchamel
- Brioche
- Buttery
- Casserole
- Chimichangas
- Creamed
- Escalloped
- Fried
- Guacamole
- Hollandaise
- In butter sauce
- In gravy
- Marinated
- Nachos
- Parmesan
- Pate
- Prime
- Saltimbocca
- Sautéed
- Szechwan/Hunan style

MORE TIPS for eating out:

- Avoid “all-you-can-eat” specials, buffets, and unlimited salad bars.
- Ask that vegetables and entrees be prepared without butter, margarine, oil, or gravy.
- Ask that salad dressings, sauces, and toppings be served on the side. This lets you control the amount that goes on your food.
- Do not eat croissants, muffins, biscuits, or cornbread. Choose lower-fat breads, like Italian or whole-grain.
- Beware of portion sizes. Many restaurants serve portions that are larger than normal. Eat only part of your meal, and take the rest home.

Dietary Guidelines: Buy Right to Eat Right

How to choose foods

For a heart-healthy diet, you need to know the foods to buy and eat. The food charts below will help you do this. You need to choose foods that are low in fat, cholesterol, and sodium. The charts list these foods in the “Choose” column.

There is a chart for each of the food groups. You should eat foods from each food group every day. Use the charts to select foods. For variety, you can select different foods within each group.

The recommended number of servings for adults is listed for each food group. This number is only a guide. You must decide on the number of servings you need to lose or maintain weight.

If you need help

If you need help, call a registered dietitian. If you have diabetes or follow any other dietary restrictions, follow that meal plan until you can talk with a registered dietitian. He or she can assist you with complex restrictions in your diet. To contact a registered dietitian at UPMC, call 1-800-533-8762.

Meat, Poultry, Fish, and Shellfish You can have up to 6 ounces a day.	
Choose	Avoid
<ul style="list-style-type: none"> • lean cuts of meat with fat trimmed <ul style="list-style-type: none"> - beef round, sirloin, loin, or flank - lamb leg, arm, loin, or rib - pork tenderloin, leg (fresh), or shoulder (arm or picnic) - veal, any trimmed cut except ground - reduced sodium lunch meats with no more than 3 grams of fat • tofu • peanut butter (1 Tbsp limit) • fish like salmon and tuna • chicken and turkey without skin 	<ul style="list-style-type: none"> • “prime” grade fatty cuts of meat like corned beef, beef brisket, regular ground beef, and short ribs • pork spareribs • goose, domestic duck • organ meats like liver, kidney, sweet bread • sausage, bacon • regular lunch meats • hot dogs • caviar, roe

Eggs You should not have more than 3 egg yolks a week.	
Choose	Avoid
<ul style="list-style-type: none"> • egg whites • cholesterol-free egg substitutes 	<ul style="list-style-type: none"> • egg yolks

Dairy Products You should have 2 servings a day (3 servings for women who are pregnant or breastfeeding).		
Choose	Avoid	In moderation
<ul style="list-style-type: none"> • skim milk, 1 percent milk, non-fat evaporated milk • low-fat yogurt, low-fat cottage cheese • cheeses labeled no more than 3 grams of fat in an ounce • part-skim ricotta 	<ul style="list-style-type: none"> • whole milk, evaporated or condensed whole milk • 2 percent milk, cream, half-and-half, most non-dairy creamers and products, real or non-dairy whipped cream • custard-style yogurt • whole-milk ricotta • regular cheese 	<ul style="list-style-type: none"> • yogurt • part-skim cheeses like part-skim mozzarella • low-fat buttermilk • low-fat evaporated milk

Fats and Oils

You can have up to 6 to 8 teaspoons a day.

Choose	Avoid	In moderation
<ul style="list-style-type: none">• unsaturated vegetable oils including corn oil, olive oil, canola oil, safflower oil, sesame oil, and soybean oil• liquid or tub margarine made with unsaturated fats (listed above), diet margarine• low-fat salad dressings• fat-free cream cheese, fat-free mayonnaise, salad dressings made with unsaturated fats (listed above)• unsalted nuts and seeds• fat-free sour cream	<ul style="list-style-type: none">• butter, coconut oil, palm kernel oil, lard, bacon fat• stick margarine or shortening• dressings made with egg yolk• regular cream cheese• regular sour cream	<ul style="list-style-type: none">• salted nuts and seeds• avocados and olives• light cream cheese• light sour cream• light mayonnaise• peanut oil

Sweets and Snacks

Avoid eating too many sweets and snacks.

Choose	In moderation	Avoid
<ul style="list-style-type: none">• fat-free frozen desserts like sherbet, sorbet, Italian ice, frozen yogurt, Popsicles• low-fat cakes like angel food cake• low-fat cookies like fig bars and gingersnaps• fat-free candy like jelly beans and hard candy• low-fat snacks like plain popcorn and pretzels• diet beverages like coffee, tea, and carbonated drinks• salt-free, low-fat snacks like popcorn• baked potato chips and baked tortilla chips with allowed ingredients	<ul style="list-style-type: none">• low-fat frozen desserts• homemade cakes, cookies, and pies using unsaturated oils sparingly• fruit crisps and cobblers	<ul style="list-style-type: none">• high-fat frozen desserts like ice cream and frozen tofu• high-fat cakes like most store-bought, pound, and frosted cakes• store-bought pies• most store-bought cookies• most candy like chocolate bars• potato and corn chips• buttered popcorn• high-fat beverages like frappes, milkshakes, floats, and eggnog

Breads, Cereals, Pasta, Rice, Dried Peas, and Beans

You should have 6 to 11 servings a day.

Choose	Avoid	In moderation
<ul style="list-style-type: none"> • breads like white, whole-wheat, pumpernickel, and rye • pitas, bagels, English muffins, sandwich buns, dinner rolls, rice cakes • low-fat crackers like matzo, bread sticks, rye crisp, saltines, and zwieback • hot cereals, most cold dry cereals • pasta like plain noodles, spaghetti, macaroni, and whole-wheat • any white or brown rice, short, medium, or long grain • dried peas and beans like split peas, black-eyed peas, chick peas, kidney beans, navy beans, lentils, soybeans, and soybean curd (tofu) • baked or mashed potatoes, yams, and sweet potatoes 	<ul style="list-style-type: none"> • croissants, butter rolls, sweet rolls, Danish, pastry, doughnuts • most snack crackers like cheese crackers, butter crackers, and those made with saturated fats • granola-type cereals made with saturated fats • pasta and rice prepared with cream, butter, or cheese sauces • egg noodles • sugar-sweetened cereals • seasoned rice and noodle packets • creamed soup, canned soup 	<ul style="list-style-type: none"> • store-bought pancakes, waffles, biscuits, muffins, and cornbread

Fruits and Vegetables

You should have 2 to 4 servings of fruit and 3 to 5 servings of vegetables a day.

Choose

- fresh and frozen vegetables
- fresh, dried, canned fruit
- unsweetened fruit juice (100 percent juice)

Avoid

- vegetables prepared in butter, cream, or cheese sauces
- canned vegetables
- fried vegetables
- sauerkraut
- pickled vegetables
- vegetable juice like tomato juice

UPMC

200 Lothrop Street
Pittsburgh, PA 15213-2582

For help in finding a doctor or health service that suits your needs, call 412-647-UPMC (8762) or, toll-free, 800-533-UPMC (8762).

UPMC is an equal opportunity employer. Policy prohibits discrimination or harassment on the basis of race, color, religion, national origin, ancestry, sex, age, marital status, familial status, sexual orientation, disability, or veteran status. Further, UPMC will continue to support and promote equal employment opportunity, human dignity, and racial, ethnic, and cultural diversity. This policy applies to admissions, employment, and access to and treatment in UPMC programs and activities. This commitment is made by UPMC in accordance with federal, state, and/or local laws and regulations.

This information is not intended to be used as a substitute for professional medical advice, diagnosis, or treatment. You should not rely entirely on this information for your health care needs. Ask your own doctor or health care provider any specific medical questions that you have.