



WHAT TO EXPECT: AFTER YOUR HEART ATTACK

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WHAT TO EXPECT: AFTER YOUR HEART ATTACK

Having a heart attack is a scary experience. The purpose of this booklet is to provide you with the information you need to understand how heart attacks happen, and what the steps are after one occurs. It also guides you through the lifestyle changes you will have to make if you are recovering from a heart attack. Heart attacks occur for several reasons, but future events can often be prevented by being proactive. Maintain a healthy diet, control your portions, and exercise regularly. Talk to your doctor if you have any questions or concerns related to your heart health.

My Doctor's Name: _____

My Doctor's Phone: _____

ABOUT YOUR HEART

CORONARY ARTERIES

Your heart is a pump about the size of your fist. It pumps blood through arteries to every part of the body. The arteries that carry blood to your heart muscle are the coronary arteries. The coronary arteries carry blood rich in oxygen and nutrients to the heart. The picture below shows the aorta, which is the body's largest artery, and the origin of the coronary arteries. The coronary arteries lie on the surface of the heart. There are two main coronary arteries: the right coronary artery and the left coronary artery. Each of these arteries branch out into smaller arteries.

Ask your doctor, cardiac rehab specialist or nurse to mark where the blockages are in your coronary arteries.

HEART ATTACKS

A heart attack occurs when the blood supply to part of the heart muscle is completely cut off. Because the heart isn't receiving oxygen, heart cells become damaged and begin to die.

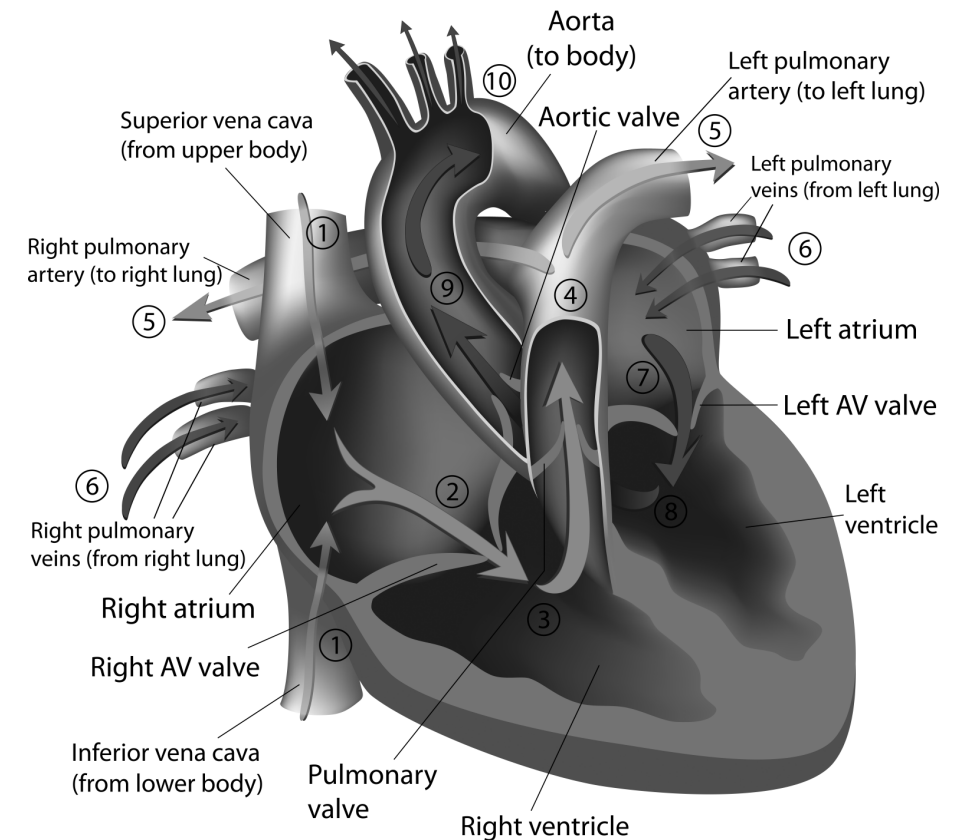
A heart attack is sometimes called a myocardial infarction, or MI for short. An MI damages your heart, and can make it a weaker pump.

The symptoms of a heart attack may include pain, pressure, tightness or burning in the chest, pain or burning radiating into the neck or jaw, or pain down one or both the arms. Some complain of pressure or tightness in the center of the upper back. Sometimes there is sweating, nausea, or vomiting. Women tend to have more jaw pain, upper back pain or lower chest pain.

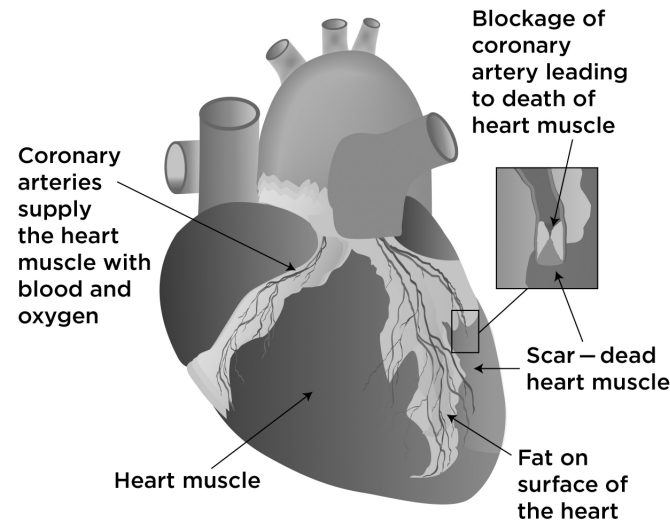
Coronary Artery Disease

As mentioned above, the arteries that supply blood to your heart are called the coronary arteries. Heart attacks are usually caused by coronary artery disease (CAD). In CAD, the coronary arteries become narrow. Fatty substances called plaque develop within the walls of the coronary arteries and cause narrowing. This process is called atherosclerosis. As a result, blood cannot flow properly through the arteries and take oxygen to the heart muscle.

The pathway of blood flow through the heart



However, it is not only the narrowing of the artery that causes a heart attack. It is unstable plaque. Prior to most heart attacks the plaque becomes unstable and ruptures. This ruptured plaque attracts platelets causing a blood clot to form. It is the blood clot that blocks off the artery leading to a heart attack. Oxygen is unable to reach the heart muscle. Sometimes (but rarely) a heart attack occurs because a coronary artery spasms and closes off.



Angina

Angina is a sign that the heart may not be getting enough blood or oxygen. It can be a warning sign that a heart attack is coming.

It most often feels like a constricting pain in the center of the chest. The pain may radiate to the jaw, neck, shoulders, back, and arms. It is most likely to occur with exertion and then go away when you stop and rest. It can also occur at rest.

If you get angina and it does not go away in less than 15 minutes call 911 or get to the nearest emergency room.

Finding the Cause of Your Angina

A number of tests are available to help the doctor find the cause of your angina. You may need to have more than one test. The testing may include blood tests, an electrocardiogram (ECG), treadmill tests, and cardiac catheterization.

Treatment

Your doctor may prescribe nitroglycerin. This medicine is safe, and it is non-habit forming. It comes in several different forms:

- Tablet (placed under the tongue)
- Spray (used under the tongue)
- Capsule (taken by mouth)
- Patch (worn on the skin)

Your nurse will tell you when and how to take this medicine.

TESTS AND PROCEDURES

You may be asked to have, or already have had, various tests or procedures to determine the extent of your heart problem. Below are brief explanations of these tests. Please ask your health care provider if you would like more information.

Electrocardiogram (ECG)

An ECG is a recording of the electrical activity of your heart. This electrical activity helps set your heart's rate and rhythm. An ECG can help the doctor see if you have heart muscle damage or electrical problems with your heart.

Echocardiogram (Echo)

An echocardiogram (echo) is a test that checks how well your heart is working. It uses sound waves to produce a picture of your heart. The test is done to help your doctor check:

- The size of your heart's main pumps (ventricles).
- How well your heart is pumping.
- How well your heart valves are working.
- If there is any fluid around your heart.

Nuclear Stress Test

A nuclear stress test measures blood flow to your heart muscle both at rest and while the heart is under stress (like walking). It does this by collecting images that show areas of the heart muscle that are damaged or lacking blood flow when the heart works harder, like when you are active. The test is usually ordered when the doctor thinks you might have coronary artery disease or another heart problem.

A nuclear stress test may also be recommended in order to guide your treatment if you've already been diagnosed with a heart condition.

A nuclear stress test involves taking two sets of images of your heart — one set while at rest and another set while under stress. The stress is caused either by exercising on a treadmill or with the use of a medication, called Lexiscan®. Lexiscan increases the work your heart does, sort of like exercise does; only you don't have to exercise.

Cardiac Catheterization

Cardiac catheterization is also called a heart cath, or cardiac cath. The procedure involves inserting a long, thin, flexible tube (catheter) into the heart. The catheter enters the body through a blood vessel, usually in the leg or arm. A doctor guides the catheter through the blood vessel toward the heart. Cardiac cath uses special x-ray equipment so your doctor can look at the whole procedure.

When the catheter is inside the heart, the doctor uses it to inject dye into the blood vessels and chambers of the heart. The dye allows the x-rays to show the pumping action of the heart, and how the heart valves work. It also shows how blood flows through the coronary arteries that bring blood and oxygen to the heart muscle. Your cardiologist uses this information to choose the best treatment for you.

TREATMENT OPTIONS AFTER YOUR HEART ATTACK

There are several options for treatment after you have a heart attack. Your doctor may recommend one or more of the following options, based on your care needs.

Medications

Your doctor will likely prescribe medications to treat your heart condition to keep it from getting more serious. There are many medications that might be used to treat heart disease, and they all work in different ways. They might improve the heart pump, maintain a sound heart rhythm, or increase blood flow to your heart.

Medication has the ability to:

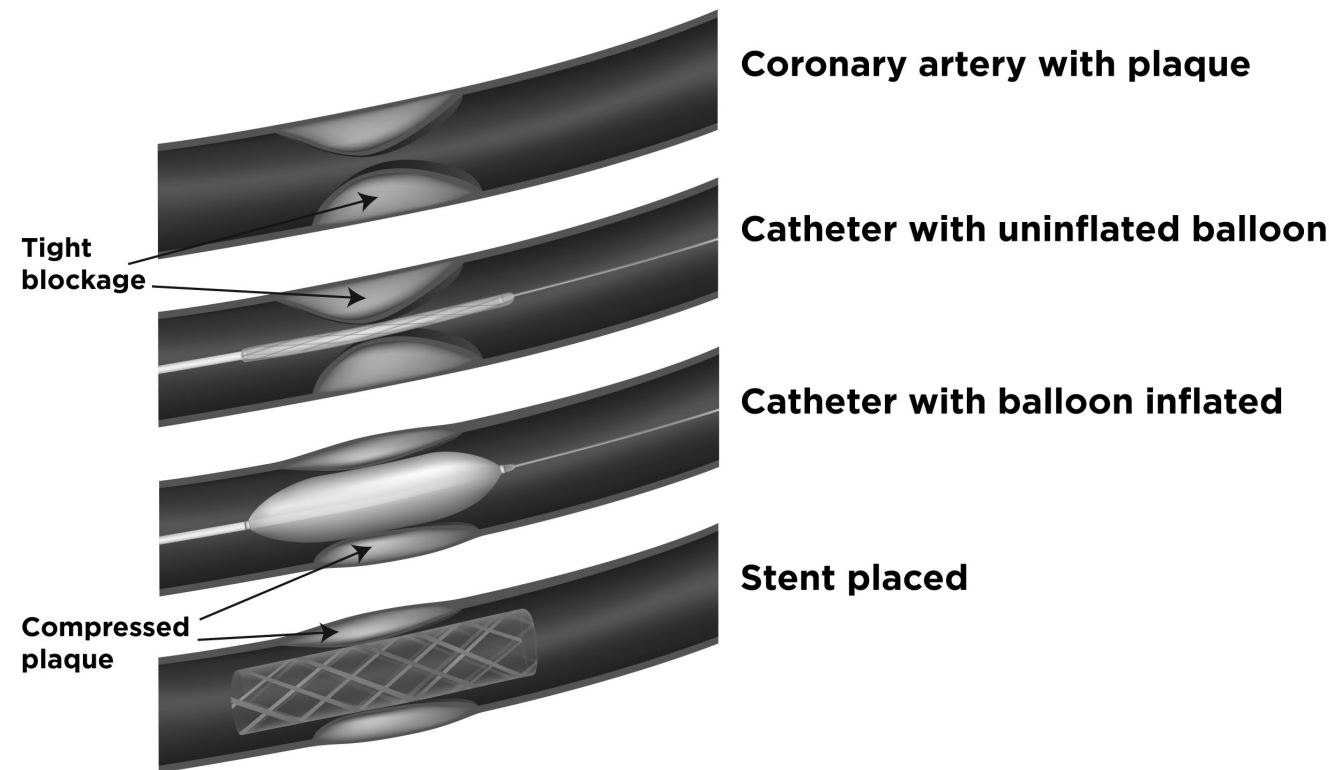
- Relax your blood vessels.
- Increase your heart's force of contraction.
- Reduce the work your heart has to do.
- Slow your heart rate.
- Prevent blood clots.
- Control irregularity of rapid heart beats.
- Remove excess fluid (water) from your body.
- Reduce your cholesterol level.

It is very important that you know the names of your medication(s) and why you take them. Be careful to take them only as they are prescribed. It is a good idea to keep a list of medications with you at all times, including the dose, and number of times per day the medication should be taken. Please use the table at the back of this booklet to write down your medications.

Points to remember:

- Always take your medications as prescribed by your doctor.
- Check with your doctor or pharmacist before taking any over-the-counter medications, vitamins, or herbs.
- Do not increase or decrease the dosage of your medications, or stop taking them, without first checking with your doctor.
- Check with your doctor regarding alcohol intake, as alcohol may affect you poorly when you are taking certain medications.
- Report any unusual symptoms or concerns to your doctor.
- Call your doctor or pharmacist if you have any questions about your medications.
- Keep your medications out of the reach of children.

Balloon Angioplasty and Stent Angioplasty



Balloon Angioplasty

Balloon angioplasty is a non-surgical, invasive treatment used to open one or more blocked arteries in your heart, restoring blood flow.

The procedure:

- The physician places a long, narrow tube, called a catheter, inside your blocked artery. The catheter has a small, deflated balloon on its tip.
- The balloon is inflated and then deflated several times inside the blocked artery.
- This generally reopens, or dilates, the artery, restoring blood flow to the heart and improving or taking away the symptoms of coronary artery disease.

Balloon Angioplasty With Stents

A balloon angioplasty with stents adds another step to the above balloon angioplasty procedure.

Following the above procedure:

- The catheter is reinserted with a stent over the balloon.
- When it is within the artery that was just opened, the balloon is inflated again.
- A stent is left behind that acts as a form of brace, holding the artery open.

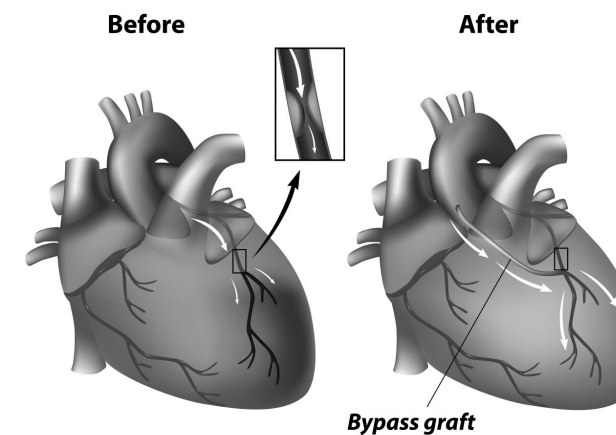
Following balloon angioplasty, healing takes only a few days, after which most people can resume normal activities.

Coronary Artery Bypass Surgery

Coronary artery bypass grafting (CABG) is an operation that improves blood flow to the heart muscle. During the operation, the surgeon creates “detours” or bypasses around the blockages in the coronary arteries. Sections of veins or arteries are removed from other places in the body where they are not needed. The surgeon sews these artery or vein grafts on to the arteries on the heart.

This makes a new route for blood to flow. The surgeon does not remove the diseased coronary arteries or the blocked sections of them.

Coronary artery bypass surgery



During the surgery one or more coronary arteries may be bypassed depending on your disease. Your surgeon will make the final decision about what is best for you.

Other Treatments

There may be other concerns that accompany your heart attack, such as severe heart damage, or irregular or dangerous heart rhythms. There also may be some variations of the above procedures. Check with your doctor if you have questions about other procedures that may have been done, or recommended.

RECOVERING FROM YOUR HEART ATTACK

The amount of time required to recover from a heart attack varies from person to person. Generally it takes six to eight weeks for your heart to heal, depending upon the amount of damage to your heart muscle, and the physical condition you were in prior to the heart attack.

During your recovery, you will work to safely regain your strength and stamina, and learn lifestyle changes necessary to prevent further problems. Returning to work and decisions about driving are topics to be discussed with your doctor and will depend on several factors, including the type of work you do.

Activity After Discharge

After leaving the hospital, it is recommended that you exercise every day in order to regain the strength and stamina you lost because of bed rest and inactivity. You also may not be accustomed to exercise and need to build up gradually to establish a regular exercise program.

Aerobic Exercise

Regular aerobic exercise (walking, cycling, swimming) will help:

- Increase muscle strength and endurance.
- Lower blood pressure.
- Raise “good” cholesterol.
- Control blood sugar levels.
- Help you lose weight.
- Reduce stress.

Be consistent and never quit. Aerobic exercise will only have lasting benefits if you keep it up.

When to Exercise

You can exercise any time of the day, but be sure to space your sessions evenly throughout the day. Wait at least one hour after meals, and 30 minutes after other activities, before exercising. Do not exercise outdoors if the temperature is below 35° F, above 85° F, or if humidity is greater than 80 percent.

When to Stop

Your body will tell you that you are doing too much if the following signs develop:

- Dizziness.
- Increased shortness of breath.
- Chest discomfort (not incisional).
- Extreme fatigue during exercise.

If symptoms persist, stop and rest. Contact your doctor, or call 911.

ACTIVITY GUIDELINES

Below is a general guide that will help you to know what activities to do, and what you should avoid after discharge.

WEEKS ONE AND TWO

Personal Hygiene

- Avoid very hot or cold water.
- Avoid tub baths for the first 48 hours if you have had a cardiac catheterization or angioplasty.
- You may shower.

Stairs

- Limit stair climbing to 1 to 2 times a day.

Lifting

- Avoid lifting anything more than 10 pounds.
- If you have had a cardiac catheterization and/or angioplasty, avoid lifting more than 5 pounds for the first 72 hours after the procedure.
- Avoid lifting, pushing, pulling, carrying heavy things, grunting, or “bearing down,” as these activities can create an excess burden on your heart.
- Try to keep these activities intermittent, if they must be done.
- Remember to breathe normally and don’t hold your breath while doing them.



Walking

- Continue with your walking routine as in the hospital.
- Increase your walking time each week by 5 to 10 minutes.
- Walk at least 2 times a day on a level surface.

Do

- Continue with seated activities.
- Make small meals.
- Dust items or furniture lightly.

Don't

- Do not vacuum.
- Do not mow the lawn.
- Do not walk hills.
- Do not walk a large dog.

WEEKS THREE AND FOUR

Stairs

- Increase stair climbing as you feel able.

Lifting

- Avoid lifting anything more than 20 pounds.
- Avoid lifting, pushing, pulling, carrying heavy things, grunting, or “bearing down,” as these activities can create an excess burden on your heart.
- Try to keep these activities intermittent, if they must be done.
- Remember to breathe normally and don’t hold your breath while doing them.

Walking

- Increase your walking time to 15 to 30 minutes a day.
- Walk 3 to 5 times a week.

Do

- Light house-keeping activities.
- Light gardening.

Don't

- Do not sweep.
- Do not shovel or dig.
- Do not use your arms to do strenuous activities, unless advised otherwise by your physician.

WEEKS FIVE AND SIX

Walking

- Increase your walking time to 30 to 60 minutes.
- Try to walk every day of the week.

Do

- Gradually resume your usual level of physical activity.
- Continue to avoid excessive lifting, pushing, pulling, or straining until approved by your doctor.

Remember:

- After 6 weeks your long-term goal should be to exercise 30 to 60 minutes per day, 5 to 7 days a week.
- Consider increasing the pace of each walk as your exercise becomes easier, and gradually add hills or grades as tolerated.
- You also may add other exercises, such as cycling, dancing, or swimming. If you had surgery, be sure there are no concerns regarding your incisions.
- As the intensity of your exercise increases, include a 5 to 10 minute warm-up, starting at a slow pace and increasing gradually, and end with a 5 to 10 minute cool down, gradually slowing your pace.

Sex

Most patients can begin to have sex 3 to 4 weeks after a heart attack. The energy used during sex with your usual partner is less than it takes to climb two flights of stairs. If you can tolerate two flights of stairs without shortness of breath or pain, you should be able to tolerate sexual intercourse. Be rested, don’t rush, and assume a more comfortable position.

Caution

Avoid any physical activities or intensities that cause the following:

- Burning, tightness, pressure, or heaviness in your chest, neck, jaw, shoulders, back, or arms.
- Nausea or indigestion, unrelated to eating.
- Unusual or increased shortness of breath.
- Sweating, unrelated to activity.
- Palpitations, or a pulse that is much faster or slower than expected.
- Dizziness or lightheadedness.

If you have stopped the activity and the above symptoms continue, call 911.

HOME EXERCISE PLAN

After leaving the hospital it is suggested that you exercise each day. If you are not used to exercise, begin slowly to make exercise a regular part of your life. Your home exercise plan will start with a walking program. Before you leave the hospital to go home, your cardiac rehab specialist will fill in specific guidelines for your walking program.

Ask about whether you can use home exercise equipment, such as a bike, treadmill or elliptical, at this time.

Why Exercise?

Regular aerobic exercise, such as walking, will help increase muscle strength, lower blood pressure, raise “good” cholesterol, control blood sugar levels, help you lose weight, and lower stress. Be steady and never quit. Exercise will only have lasting results if you keep it up.

When to Exercise?

You can exercise any time of the day, but be sure to space your sessions equally throughout the day.

Wait at least 1 hour after meals and 30 minutes after other activities before exercising. Do not exercise outdoors if temperature is below 35° F, above 85° F, or if humidity is greater than 80 percent.

Week # 1:

Walk _____ minutes continuously;
_____ times per day.

Week # 2:

Walk _____ minutes continuously;
_____ times per day.

Week # 3:

Walk _____ minutes continuously;
_____ times per day.

Special Considerations

If you feel dizzy, have increased shortness of breath, chest pain (not caused by surgical incision), or intense tiredness during exercise, it could be a sign you are doing too much. Stop and rest. If symptoms last, contact your doctor or call **911**.

Your Plan

Your cardiac rehab specialist believes that walking is the right exercise for you at this time. Always walk at a pace that is comfortable. You should NOT become out of breath, and should be able to talk or chat during exercise. If you become short of breath, slow down.

Your long-term goal should be to exercise 30 to 60 minutes per day, five to seven days per week. Think about increasing the pace of each walk as your exercise becomes easier, and slowly add hills or grades as tolerated. You also may add other exercises, such as cycling, dancing, or swimming. A 5 to 10 minute warm-up (start at a slow pace increasing slowly) and/or stretch, and 5 to 10 minute cool down (gradually slowing your pace toward end of walk) also is important as the length of exercise increases.

Week # 4:

Walk _____ minutes continuously;
_____ times per day.

Week # 5:

Walk _____ minutes continuously;
_____ times per day.

Week # 6:

Walk _____ minutes continuously;
_____ times per day.



CARDIAC REHABILITATION: AN IMPORTANT STEP TO RECOVERY

Outpatient cardiac rehabilitation is usually recommended after heart surgery, heart attack, or heart stent placement. Your cardiopulmonary rehab specialist will give you a brochure and let you know what program is available close to you. Participation in outpatient cardiac rehab promotes a speedier recovery, longer life, and better health outcomes.

Cardiac rehabilitation, or cardiac rehab, provides the knowledge, tools, and support you need to succeed in developing healthy lifestyles. Specially trained medical professionals will design a program to meet your individual needs.

This is a service that is covered by most insurers and is offered at a time that is the most convenient for you. Cardiac rehab typically runs 6 to 12 weeks, 3 days a week for 1 hour.

Talk to your doctor to get a referral.

What to Expect

An exercise and health improvement plan is designed to help you meet your personal health improvement goals. At cardiac rehab, you will be on a continuous EKG monitor, and will have your blood pressure checked. At each visit, staff will meet with you to ask about signs and symptoms, and review your progress.

Rehab centers offer a variety of equipment, including treadmills, bikes, rowers, elliptical trainers, recumbent trainers, upper body cycles, and weights. Staff will train you to exercise on the equipment that is appropriate for you and your goals.

Benefits

Through one-on-one sessions and demonstrations, staff will teach you what you need to know to manage your heart condition and recover successfully. Topics that may be covered include:

- How the heart works, and what went wrong.
- Details about your heart condition or procedure.
- Treatments and tests you have had, or may have.
- Support to quit smoking.
- Living with diabetes.
- Energy conservation.
- Nutritional counseling.
- Weight management.
- Stress management.
- Medications.

How Do I Get Started?

At your next office visit, talk to your physician about cardiac rehab. Ask if he or she advises outpatient cardiac rehab for you. If so, ask them for a cardiac rehab prescription. Then call a cardiac rehab program near you.

SAFETY TIPS FOR TAKING YOUR MEDICINE

Your medicines are strong drugs. It is important to know the right way to use them. Only take the medicines that we prescribed for you, as your medicines may have changed.

Follow your discharge instructions carefully.

DO!

- Learn the right 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 mix them up.
- Store your medicines properly in a place that is dark, cool, and dry.
- 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.
- Tell your doctor and pharmacist about your past health. Include your allergies and drug reactions.
- Always carry an updated list that shows your medicines, type of surgery or procedure, doctors' names, and emergency numbers.
- Wear a medical alert bracelet if you have allergies or take the drug Coumadin®.

DON'T!

- Chew, crush, or break any pills or tablets unless you are told to do so.
- Take your medicine in the dark. You may take the wrong medicine if you cannot see what you're taking.
- Wait until your last dose to ask for a refill. Don't run out of medicine.
- Stop taking your medicine without your doctor's consent.
- Take an over-the-counter medicine unless your doctor clears it.
- Take someone else's medicine.
- Count on family or friends for information about medicines. Ask an expert.

You can learn more about your medicines on UPMC's website at UPMC.com.

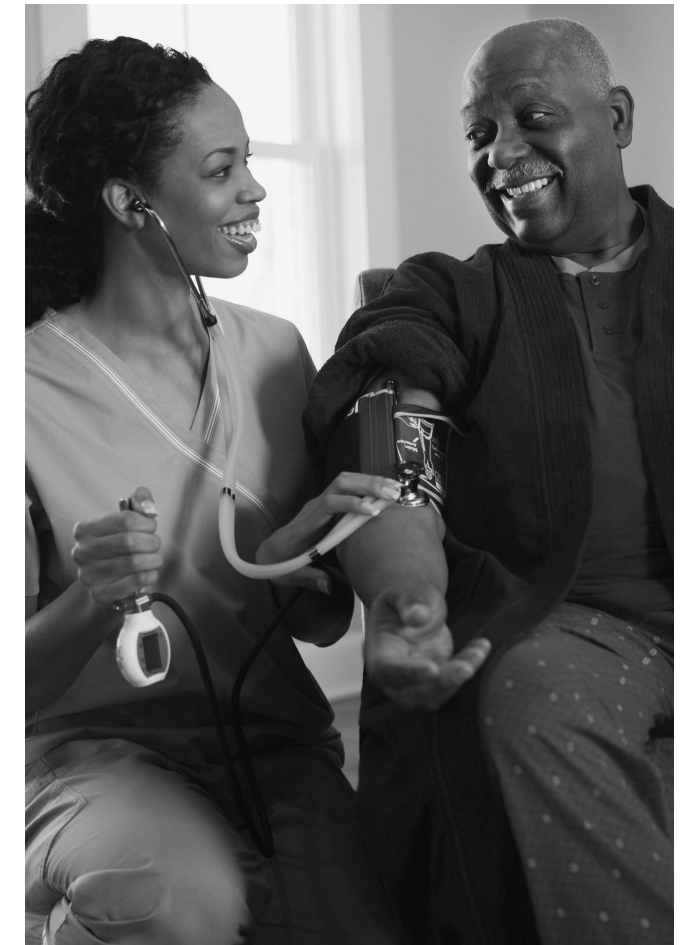


HEART HEALTHY WAY OF LIFE

A number of things can put you at an added risk for heart disease or a heart attack. Each risk factor that you have increases your total risk. To lower your risk, you need to change to a heart-healthy way of life.

Follow these guidelines:

1. **Quit smoking.** Quitting smoking is the most important action you can take to better your health now and in the future.
2. **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.
3. **Control your diabetes.** Take your medicine, exercise daily, and follow your diabetic meal plan. Check your blood glucose daily or as directed by your doctor. You should have your hemoglobin A1C checked 3 or 4 times per year. A good hemoglobin A1C is less than 7.
4. **Lose weight.** Exercising regularly and eating a low-fat and healthy food plan can help you lose weight.
5. **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 steadily. Increase your walking time to 30 to 60 minutes. If you are not able to walk, try swimming or cycling.
6. **Care for your emotional health.** Feelings are an important part of your overall health. If you feel stressed, alone, angry, or sad, it might be hard to make healthy changes in your life. You can help to control stress by exercising, deep breathing, and meditating. It also is important to talk about your feelings with a family member or close friend.



7. **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.

Reach your cholesterol goals

This chart shows the ideal numbers for each type of cholesterol.

HEALTHY CHOLESTEROL NUMBERS

Total Cholesterol: Less than 200

LDL ("bad cholesterol"): Less than 100

HDL ("good cholesterol"): Greater than 40

Triglycerides: Less than 150

HEART HEALTHY FOOD PLAN

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 in the following tables.

PROTEIN 6 ounces daily (3 ounces is about the size of a deck of playing cards)	
CHOOSE	AVOID
<ul style="list-style-type: none"> Lean cuts of beef, pork, veal or lamb: <ul style="list-style-type: none"> > Round, sirloin, tenderloin or flank > 90% lean ground meat > Pork tenderloin > Reduced sodium deli meats with no more than 2 grams of saturated fat per serving Chicken and turkey without skin Fish, salmon, tuna Shellfish: clams, crab, lobster, scallops, shrimp (no more than 3 ounces per week and not fried) Cheeses with 2 grams of saturated fat or less per ounce Cottage cheese (fat free, 1% or 2%) Eggs (limit to 3 egg yolks per week), egg whites, egg substitutes Nut (peanut, almond, soy) butters and spreads (1 tablespoon limit) Tofu Meatless burger (soy, vegetable, or starch-based) Venison and other wild game 	<ul style="list-style-type: none"> “Prime” grade fatty cuts of meat like prime rib, highly marbled meat, and Delmonico Regular ground beef Corned beef Beef brisket Short ribs, spareribs Organ meat, such as liver Sausage, bacon, and ham Regular deli meats: (for example) <ul style="list-style-type: none"> > Bologna > Salami > Chipped ham Hot dogs, kielbasa, bratwurst, or knockwurst Fried fish or fish prepared in butter Pepperoni Regular cheese (with more than 2 grams of saturated fat per ounce)

MILK 2 servings per day (1 serving = 1 cup of milk; 4 to 6 ounces of yogurt)	
CHOOSE	AVOID
<ul style="list-style-type: none"> Skim milk, 1% milk, super skim milk, non-fat <ul style="list-style-type: none"> > Evaporated milk or fat-free, or 1% lactose reduced milk Yogurt (fat-free, low-fat, plain) Soy milk, almond milk, or rice beverage 	<ul style="list-style-type: none"> Whole milk, 2% milk, evaporated whole milk, or 2% lactose-reduced milk Cream, half-and-half, many non-dairy creamers and products Whole milk yogurt, chocolate milk, coconut milk, buttermilk, milkshakes

FRUIT 2 to 4 servings per day (1 serving of fruit = 1 small piece of fresh fruit, 17 grapes, 1 small banana, 1/2 cup of fresh or canned fruit, 1/2 cup unsweetened fruit juice, or 2 tablespoons of dried fruit)	
CHOOSE	AVOID
<ul style="list-style-type: none"> Fresh, frozen, canned, or dried fruit Unsweetened fruit juice 	<ul style="list-style-type: none"> Coconut Fruit canned in syrup

VEGETABLES 2 to 3 servings per day (1 serving of vegetables = 1/2 cup of cooked or 1 cup of raw)	
CHOOSE	AVOID
<ul style="list-style-type: none"> Fresh and frozen vegetables Low-sodium vegetable juice Low-sodium or no salt added canned vegetables 	<ul style="list-style-type: none"> Vegetables prepared in butter, cream, or cheese sauces Canned vegetables (regular) Fried vegetables Sauerkraut Pickled vegetables, pickles, and olives Vegetable juice and tomato juice

BEVERAGES

CHOOSE

- Water
- Unsweetened:
 - > Soft drinks
 - > Iced tea
 - > Lemonade
 - > Flavored seltzer
- Drink mixes without sugar, such as Crystal Light®
- Club soda
- Coffee or hot tea

AVOID

If you are a diabetic or need to lose weight or don't want to gain weight, or if you need to lower your triglycerides, you should avoid:

- Regular soft drinks
- Regular iced tea (sugared), regular lemonade (sugared)
- Fruit punch or sugared drink mixes
- Caffeinated beverages (if instructed not to use by your physician)
- Energy drinks
- Sports drinks



STARCHES: BREADS, CEREALS, PASTA, RICE, SOUPS, DRIED PEAS, AND BEANS

6 to 11 servings per day (1 serving = 1 slice of bread, 1/2 English muffin, 1/2 small bagel, 1/3 cup of cooked rice or pasta, 1 cup of ready-to-eat cereal, 1/2 cup cooked cereal)

CHOOSE

- Breads: whole wheat, pumpernickel, rye, and white
- Bagels, English muffins, sandwich buns, dinner rolls, rice cakes, pitas, tortillas (corn or flour)
- Crackers: low-fat, low-sodium (whole wheat preferred):
 - > Matzoh
 - > Bread sticks
 - > Rye crisp
 - > Saltines
 - > Melba Toast
- Unsweetened dry and hot cereals (oatmeal, low-fat granola)
- Plain noodles, spaghetti, macaroni (whole wheat preferred)
- Brown, white, and wild rice, quinoa
- Dried peas and beans: split, black-eyed, chick/garbanzo, kidney, navy, black, white, lentils, soybeans
- Baked, boiled or mashed potatoes, yams and sweet potatoes
- Homemade soups made with low-fat protein source, beans, potatoes or vegetables (fresh or frozen) and a low-sodium broth or low-sodium canned soup
- Cookies:
 - > Graham crackers
 - > Animal cookies/crackers
 - > Vanilla wafers
 - > Ginger snaps
 - > Low-fat cereal or granola bars
- Baked potato or tortilla chips
- Popcorn (air popped, stove popped, or low-fat, low-sodium microwave)
- Low-sodium pretzels
- Low-fat or no sugar added ice cream, sherbet, or pudding or fat free frozen yogurt (limit to 1/2)

AVOID

- Croissants, sweet rolls, Danish, pastry, doughnuts, cake, pies, cookies, brownies, and pancakes
- Snack crackers with more than 2 grams of saturated fat per serving
- French fries and fried potatoes
- Pasta and rice prepared with cream, butter, cheese sauces or Alfredo
- Egg noodles
- Sugar-sweetened cereals
- Seasoned rice and noodle packets
- Regular canned or boxed soup or broth, creamed soup, dried soup mixes, or bouillon cubes
- Ice cream
- Buttered popcorn
- Potato chips, corn chips, nachos
- Chocolate, candy bars
- Licorice, hard candy, or gummy candies

FATS AND OILS

6 to 8 teaspoons per day (1 serving = 1 teaspoon of canola or olive oil, 1 to 2 teaspoons of tub margarine, 2 tablespoons of low-fat salad dressing or 4 to 7 unsalted nuts)

CHOOSE	AVOID
<ul style="list-style-type: none"> • Oil: <ul style="list-style-type: none"> > Olive, canola, safflower, soybean, corn • Margarine: <ul style="list-style-type: none"> > Tub or squeeze, low-fat, fat-free or trans-fat free • Salad dressings: <ul style="list-style-type: none"> > Low-fat, fat-free, oil and vinegar, vinaigrette • Cream cheese (low-fat or fat-free) • Sour cream (low-fat or fat-free) • Mayonnaise (low-fat or fat-free) • Nuts: unsalted nuts and seeds, for example: <ul style="list-style-type: none"> > Almonds, peanuts, pecans, walnuts > Sunflower seeds • Avocado • Hummus • Non-stick vegetable, cooking, or butter sprays 	<ul style="list-style-type: none"> • Oil: <ul style="list-style-type: none"> > Coconut > Palm or palm kernel • Butter, lard, shortening, or bacon fat • Stick margarine • Regular salad dressings, for example: <ul style="list-style-type: none"> > Ranch > Bleu cheese > Caesar • Regular cream cheese, sour cream, or mayonnaise

SAMPLE HEART-HEALTHY MENU

BREAKFAST	LUNCH	DINNER
<ul style="list-style-type: none"> • 1/2 cup orange juice • 1 cup whole grain cereal • 1 small banana • 1/4 cup egg substitute • 1/2 English muffin • 2 teaspoons light margarine • 1 cup fat-free milk • 1 cup coffee or tea 	<ul style="list-style-type: none"> • 2 slices whole wheat bread • 2 to 3 ounces turkey breast • Lettuce and tomato • 1 to 2 teaspoons mustard or low-fat mayonnaise • 1 cup fresh fruit salad • 1/2 cup low fat pudding • Water 	<ul style="list-style-type: none"> • 3 ounces baked or grilled chicken breast • 1 small, baked, regular or sweet potato • 1 cup green beans • 1 small whole grain roll • 1 to 2 teaspoons low-fat margarine • 1 sliced apple • Water

KEEPING TRACK OF YOUR NUMBERS

To remain healthy while you recover, it is a good idea to write down and track your blood pressure, blood lipids, and body weight.

Blood Pressure

Your blood pressure is one of a few critical vital signs health care professionals use to evaluate your heart's risk for future problems. There are two numbers that are important.

- The top number (or first) is called your systolic blood pressure, and reflects the pressure against the walls of your arteries when the heart is beating.
- The bottom (or second) number is the diastolic pressure, which reflects the pressure against the walls of the arteries between beats, or when the heart is relaxed.
- An optimal blood pressure goal is 115/75 or less than 120/80

Body Weight

Body weight is another independent risk factor for coronary artery disease. Exercising regularly, eating nutrient rich, low-fat foods, and portion control can help you lose weight. To reach your ideal body weight requires discipline and a plan. Your plan begins by setting a goal, and then tracking your progress toward that goal.

GOAL: Lose _____ pounds per week (usually one to two pounds), to a final body weight of _____ pounds.

For weight loss, it is not necessary to weigh yourself more than once a week.

Blood Lipid Panel

Periodically a lipid panel will be done, and it is important for you to understand whether you have reached your goals. The goals are listed above. Write your numbers here.

- Total Cholesterol: _____
- LDL (bad cholesterol): _____
- HDL (good cholesterol): _____
- Triglycerides: _____



RESOURCES

UPMC Physician Referral Service
1-800-533-UPMC (8762)

UPMC CARDIAC REHABILITATION PHONE NUMBERS

UPMC Bedford Memorial: 814-623-3538
UPMC Horizon-Greenville: 724-589-6278
UPMC Horizon-Shenango: 724-983-7521
UPMC McKeesport: 412-664-3010
UPMC Mercy: 412-777-6849
(Ohio Valley Hospital)
UPMC Passavant: 412-367-5430
UPMC Presbyterian: 412-623-1684
UPMC Shadyside: 412-623-1684

UPMC NUTRITION COUNSELING SERVICES

UPMC Passavant: 412-367-6468
UPMC Shadyside: 412-623-2421

UPMC DIABETES COUNSELING SERVICES

UPMC Mercy: 412-232-5908
UPMC Passavant: 412-367-6398
UPMC Presbyterian: 412-586-9700
(UPMC Center for Diabetes
and Endocrinology, Oakland)
UPMC Shadyside: 412-586-9700
(UPMC Center for Diabetes
and Endocrinology, Oakland)

[www.upmc.com/services/diabetescenters/
pages/diabetes-centers.aspx](http://www.upmc.com/services/diabetescenters/pages/diabetes-centers.aspx)

PA Quit Smoking Hotline:
1-800-QuitNow (1-800-784-8663)

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



MY MEDICATION LIST

MEDICATION NAME/STRENGTH	WHAT TIME DO I TAKE MY MEDICINE?	HOW MUCH DO I TAKE?	HOW DO I TAKE MY MEDICINE?

FOR QUESTIONS AND NOTES

Please use this space to write a list of questions or concerns you may have. The list will help you remember issues you want to talk about. Take this list to your office visits and to the hospital.



UPMC

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