

Patient: Nicky Heartbreaker DOB: 1/1/59

- Nicky is a 64-year old male who developed diaphoresis and mid-sternal chest pain at 10/10 this morning while at work. He drove himself to the local Emergency Department.
- Past medical history: HTN, Hyperlipidemia, DM Type II, Smokes 1 ppd; Noncompliance; Family History CAD; Erectile dysfunction.
- Social history: Divorced, 2 adult children, 3 grandchildren, rents apartment, factory laborer
- **Home medications:** (patient has not refilled the first three medications and has not taken since beginning of April)
 - Atorvastatin 20 mg po QHS
 - Metformin 500 mg PO BID
 - Enalapril 10 mg PO BID
 - Sildenafil 25 mg PO Daily PRN
- Weight: 90kg
- Allergies: Contrast Dye

Emergency Department

- Vital Signs: T- 98⁰ F (oral); HR-55; RR-18; BP 80/60; SpO2-92%. Weight: 90kg
- A 12-Lead ECG was done which showed ST elevation in Leads II, III, and aVF. He was started on O2 2L per NC, and 2- 18-gauge IV's were started. Fast patches placed.

Diagnosis: inferior STEMI

- He was given the following: four- ASA 81 mg tablets (chewed), three- 0.4 mg SL NTG (has not taken Sildenafil within last 24 hours), Brilinta loading dose (180 mg), Morphine Sulfate 4 mg IV, a Heparin bolus and started on a drip per protocol, and an IV bolus of 2,000 mL of NS.
- The time between his arrival to the Emergency Department and arrival to the Cardiac Cath Lab was 30 minutes.

Cardiac Catheterization Lab

- Procedure: Left Heart Catheterization with PTCA to: RCA
Right radial: ___TR Band_____
- 2 drug eluting stents
- Medications:
 - o Versed 2 mg IV
 - o Fentanyl 50 mcg IV
 - o Bivalirudin (Angiomax): Supply 250 mg in 50 mL NS
 - Bolus: $0.75 \text{ mg/kg} (90 \text{ kg} \times 0.75 \text{ mg} = 67.5 \text{ mg}/250 \text{ mg} \times 50 = 13.5 \text{ mL})$
 - Drip: $1.75 \text{ mg/kg/hr} (90 \times 1.75 = 157.5 \text{ mg/hr}/250 \text{ mg} \times 50 = 31.5 \text{ mL/hr})$
 - o Verapamil 5 mg IV
 - o Diphenhydramine 50 mg IV
 - o Solumedrol 125 mg IV
 - o Famotidine 20 mg IV
- TRB band placed
- Stent card placed in chart

4C

- He has just arrived to 4C from the Cath Lab.
- Vital signs: T- 98.9^O F (oral); BP 108/56; HR- 118; RR- 24; SpO2- 91% on 2L NC
- You performed a 12-Lead ECG with the following findings: ___A-Fib_____
- Present condition: Chest pain free currently; complaint of fatigue & dyspnea; crackles present; low back pain 3/10; EF 35%
- Ecchymosis at right radial site; TR Band in place
- Medications: All but the IV fluid are medications the patient will also be prescribed at discharge
 - o ASA 81 mg PO Daily
 - o Brilinta 90 mg PO BID
 - o Atorvastatin 40 mg PO QHS
 - o Metformin 500 mg PO BID- Hold for 48 hours
 - o Enalapril 10 mg PO BID
 - o Acetaminophen 500 mg PO Q 4-6 hours PRN non-cardiac pain
 - o D5 0.45 NS at 80 mL/hr- slowed this due to probable HF and fluid overload

1-hour post simulation assignment and survey: due April 24, 2023 at 1600

Discharge Education: A copy of this document is on Edvance360 under Simulation Resources- use this electronic version to complete and submit the assignment.

Firelands Regional Medical Center School of Nursing
 AMSN 2023: Comprehensive Simulation
Discharge Education (1H-Sim)



Directions: For each education topic, include specific information you would provide to Nicky Heartbreaker at discharge. The information must be specific to the patient, scenario, social determinants of health concerns, and be thorough and detailed (this will not be a brief list). Include handouts, video links, pictures, etc. that you could present for **at least 4** of the education topics. This assignment is due in the Comprehensive Simulation dropbox on Edvance360 at **1600 on April 24, 2023 (along with the simulation survey)**. If the assignment is late or not completed in full it will result in 1-hour missed simulation time, and will have to be completed prior to beginning the final exam on 4/28/2023 at 0800.

Topic	Education
Diagnosis	<p>“You had an inferior STEMI, which stands for an ST-elevation myocardial infarction. This is a heart attack that affects the heart’s lower chamber. The STEMI involved your right coronary artery (RCA) because it had a blockage in that artery. They sent you to the cath lab to place a stent into the right coronary artery. Once you came into 4C, we noticed you were having A-fib. This is when your heart is not pumping correctly, and the chambers are weaker than they should be. We noticed you were having heart failure because of the fluid overload and crackles in your lungs. This can be the effect of a heart attack. We want to make sure you fully understand your diagnosis. Please watch this video to help you understand this diagnosis more. Video Link: https://www.youtube.com/watch?v=D6787Jd-dgo</p>
Medications	<p>These are your daily medications and need to be followed to help manage your heart diagnosis.</p> <ol style="list-style-type: none"> 1. ASA 81 mg PO daily: You will take this each day, once daily, by mouth. This will reduce your chance of getting a blood clot. Since you have a family history for CAD, this will help prevent another heart attack from happening. 2. Brilinta 90 mg PO BID- You will take this medication with aspirin to work to reduce clot formation in the stent that they placed. This will also lower your risk of having another heart attack or forming a clot. You will take this by mouth twice a day. 3. Atorvastatin 40 mg PO QHS- This medication was prescribed to you because you have a history of hyperlipidemia. This med will lower the “bad” cholesterol and fats and raise the “good” cholesterol in the blood. This was a home medication you were supposed to be taking but now it is 40 mg instead of 20mg. You will take this by mouth every night at bedtime. 4. Metformin 500 mg PO BID- You can start taking this 48 hour after the procedure. This is given to you because you have type 2 diabetes. It is used to control your high blood sugar. You will take this medication by mouth twice a day. 5. Enalapril 10 mg PO BID- Enalapril is prescribed for high blood pressure, this was also a medication that you were supposed to be taking. The dosage has not changed, but it is important to control your hypertension. You will take this medication by mouth twice a day. 6. Acetaminophen 500mg PO every 4-6 hours for non-cardiac pain- You will be able to take acetaminophen 500mg by mouth every 4-6 hours if you are having any pain that is not from your cardiac pain. I know you stated you had back pain, so if that continues, maybe try to take some pain medication for that.

<p>Follow-up/ Compliance</p>	<p>Follow-up appointments are very important because the doctor will be able to check your health progression and improvement or decline after your stent placement. Follow-up care involves regular checkups and blood work. Early follow-up with a physician can decrease your chance of being admitted to the hospital. Compliance with your medication is also very important. Each medication that I listed above has a reason that it was prescribed. Each of them was prescribed for your health history and the MI that you just had. If you do not take these medications, it could be detrimental to your health. This could have you back in the hospital for the same reason as today. If you are not able to afford these or need help, I can give you resources that can help you get medication. Please let me know if you have any questions or need to talk to someone about resources. This link is to a website that is a prescription assistance program in Ohio. You can fill out the application on this website to see if you qualify: https://papofohio.com/</p>
<p>Puncture site care</p>	<p>In the cardiac catheterization lab, they went through your radial artery in your wrist. It has a TR band on it right now to keep the pressure in that artery keeping it from bleeding out. We will place a bandage over the insertion site before you leave. It is normal for the catheter site to be black and blue for a couple days. You can take off the bandage when you get home. It may be swollen or pink as well. You will want to wash the site once daily with soap and water, but do not rub the site. Keep the area clean and dry when you are not showering. Do not use lotions around or on the wound site.</p> <p>For 4 days, keep wrist supported on a pillow as well as rest it throughout the day. Avoid dangling your arm as well. Also, do not participate in strenuous activity for a least 2 days after the procedure (running, golfing, bowling) Gradually increase activity with that arm.</p> <p>If bleeding occurs: Keep your wrist straight and apply firm pressure to the site using gauze. Hold the pressure there for at least 15 minutes. Call 911 if you can't get the bleeding to stop.</p> <p>Here is a great PDF handout to follow for care after your cardiac catheterization: https://www.islandhealth.ca/sites/default/files/2018-05/cardiac-catheterization-radial-approach-going-home.pdf</p>
<p>Diet</p>	<p>Since you had an MI and heart failure, we would like to see you continue a heart healthy diet once you get home. Sodium is a salt found in foods and can affect the body if too much is used. This is found in fast foods, prepackaged foods, and soup cans. Salt attracts fluid, so eating too much sodium can increase your blood pressure. Try eating more food like fruit, vegetables, seafood, and some nuts.</p> <p>We like to see a limit of around 2g sodium restriction daily.</p> <p>A heart healthy diet is:</p> <ul style="list-style-type: none"> High in omega-3 fats (fish-salmon) High in fiber High in fruits and in green, red, and orange vegetables Low in saturated fats and trans fats Low in sodium Low in sugar Low in cholesterol Low in alcohol or alcohol-free <p>Here is a list of foods that might be an option for you to try for a heart healthy diet: Vegetables, fruits, whole grain products, salmon, walnuts, almonds, olive oil, broccoli, sweet potatoes, avocados, black beans, kidney beans, green tea, bell peppers, soy, and tomatoes.</p> <p>Minimize processed foods, added sugars, red meats, and oils.</p> <p>Follow a Mediterranean Diet for protecting your heart.</p> <p>Here is a great website from the American Heart Association: https://www.heart.org/en/healthy-living/healthy-eating/eat-smart/nutrition-basics/aha-diet-and-lifestyle-recommendations#:~:text=Eat%20an%20overall%20healthy%20dietary%20pattern%20that%20emphasizes%3A,6%20minimized%20intake%20of%20added%20sugars%20More%20items</p>
	<p>Since you had a severe heart attack, it is important to follow certain guidelines when talking about activity and</p>

<p>Exercise/ Activity</p>	<p>exercise. Start slowly and gradually increase walking pace over a 3-minute period. If you ever get short of breath during activity you should stop and sit down or slow your walking pace. Keep adding time to your workouts (First day walk for 5 minutes, second day walk for 10, so on) This will allow your heart to work up to those longer workouts and walks. Make sure to walk with someone or let someone know just in case something goes wrong and they can help or find you. This can reduce the risk of injury. Talk to your doctor before doing vigorous exercise such as weightlifting. We can also talk about getting you enrolled in a cardiac rehab program. They assist you with exercise and help you develop a good exercise routine to follow. They are also there to help with lifestyle changes. I would highly recommend this to you. You should still be able to do daily activities for yourself including bathing, dressing, chores, and eating. But it is okay to take multiple breaks during the day. Do not push or pull heavy objects right away. It is important to talk to your doctor about what activity is okay for you to do.</p>
<p>Smoking cessation</p>	<p>I know you have a history of smoking one pack per day. It would be great for your health if you looked into smoking cessation. Cardiovascular disease, hypertension, hyperlipidemia, and a heart attack all go hand in hand with cigarette smoking. It is a fact that smokers are up to 6x more likely to have a heart attack than non-smokers. Cigarette smoke thickens and narrows your blood vessels, leading to plaque buildup in the arteries. This is another reason that your artery was 100% blocked. Tips to quit: Find a plan that best fits you. Set a quit date and stick to it. Do not make excuses. Remind yourself why you are quitting. Avoid people and other activities that encourage you to smoke. Find a program that can help you quit. Do not give up. Find alternative options (nicotine gum or patches) Celebrate small successes. You can also replace that smoking urge with other things such as exercise, support groups, watching TV, talking on the phone, reading a book, and taking a walk. This is a great handout to follow for advice: https://www.acc.org/latest-in-cardiology/articles/2018/05/14/24/42/cardiosmart-a-day-without-tobacco</p>
<p>Signs and symptoms to report/Seek medical care</p>	<p>If you experience any of these symptoms it is important to seek medical care right away (911): Shortness of breath suddenly, chest pain or tightness, feeling weak or lightheaded, pain in jaw, neck, or back, pain in arms or shoulders. Since you have had a heart attack it is very important to watch out for more signs and symptoms that could occur leading to another heart attack. Watch out for signs of bleeding from your radial site, if it doesn't stop bleeding with pressure, call 911 right away. Signs and symptoms of heart failure: Congested lungs, shortness of breath, fluid retention, edema, weight gain, faint, confusion, tiredness, weakness, pink-tinged sputum, ascites, and feeling anxious. If you have any of these symptoms it is important to seek medical help and make an appointment with your physician.</p>
<p>Other</p>	<p>A-fib education: When you started to develop heart failure, we realized you were having A-fib. This is when your heart doesn't pump as efficiently as it should. If you have any of these symptoms it is important to seek medical care: Heart palpitations, weakness, tiredness, chest pain, confusion, reduced activity, and fast heart rate.</p>

	<p>It is very important to follow all our recommendations because it can lead to a healthier life. Try to stop smoking, eat healthier, and keep your appointments with your physician. It is also very important to keep compliance with your medications. If you are unable to purchase medications, please reach out to the number I provided for you. You can also contact your local health department for more information.</p>
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