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Cardiac rehab at Methodist more than just post-op care

By Kim Carpenter / World-Herald Correspondent

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Brian Choquette, RN for Methodist Hospital's cardiac rehab program leads the group through their exercise session.

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Hearth disease. Whether you've had quadruple bypass surgery or have just been diagnosed with high blood pressure, those two words can be intimidating.

In most cases, cardiopulmonary rehabilitation, best known simply as cardiac rehab, will be part of your lifesaving — and life changing — treatment.

While it may sound daunting, cardiac rehab is exactly what's needed to get the heart muscle strong. And keep it that way.

Most people think cardiac rehab comes into play only following a major heart procedure, such as a bypass or open heart surgery. While Methodist Hospital offers that level of care, it also offers two other phases of cardiac rehab. One benefits patients with heart disease who have not required surgery. And another offers long-term opportunities for people to maintain good health.

What is known as Phase I rehab plays an important role following surgeries, said Brian Chouquette, a cardiac rehab nurse with Methodist.

“Following open heart surgery, rehab gets people up on their feet, walking and talking. It's what you need to do — get on your feet — and where you go from there to get stronger. That's the first step to making people stronger and healthy.”

The average hospital stay after open-heart surgery is five days, and during that time rehab nurses work with patients to get them first sitting up and then walking three to four times a day. They also focus on the importance of a healthy diet, regular exercise and quitting smoking.

Nurses additionally talk with patients about their plan for going home.

“We work with a lot of families,” said Chouquette. “A lot of times people don't remember everything because of the anesthesia, so we figure out who the primary caretaker will be, such as a child or a spouse, and talk to them about the cardiac program.”

Phase II cardiac rehabilitation is for people who have had both inpatient and outpatient procedures performed or who have been diagnosed with cardiac disease and have not had surgery.

Patients begin this phase with an interview that allows cardiac nurses to evaluate the patient, assess health issues and determine a plan of action.

“There are lots of components to rehab, and we ask them what their goals are,” Chouquette said. “What do they want to accomplish in rehab? Maybe they want to focus on weight. Maybe they want to focus on nutrition.”

Once that’s accomplished, a workout regimen is established with exercise classes scheduled three times a week that each last anywhere from 20 minutes to an hour and a quarter. Patients frequently find this aspect of rehab worrisome.

“Some people have never exercised a day in their life,” Chouquette said. “They can be fearful and hesitate. But we assure them that we’re not going to give them more than they can handle.

“We also emphasize why exercise is so important, that the whole point of aerobic exercise is to burn fat and calories and to benefit the heart muscle.”

Methodist is careful to ensure patients are using the proper type of exercise equipment.

“A large percentage of our patients are older, so we have equipment geared toward being easy on the hips and knees,” Chouquette said. “For older people with joint issues, we have them work out on machines that let them move their arms and legs and aren’t painful. You have to have equipment appropriate to their condition.”

Evaluations occur constantly during the exercise sessions. “Patients are all hooked up to monitors. We are always monitoring the heart for arrhythmias and irregular heartbeats,” stressed Chouquette.

Mary Jane Thompson Wyma, 84, recently received two stents at Methodist and is in Phase II cardiac rehab.

“They get you into a mindset of being constant and intentional with exercise,” she said. “I think I’ll retain that for the rest of my life.”

Patients also take classes that help them better learn about their risk factors and how best to manage them.

“You can’t control all your risk factors such as genetics and age,” Chouquette said, “but you can learn about how to modify those that apply, such as changing a sedentary lifestyle and quitting smoking.”

Methodist’s classes address a wide range of subjects, including diabetes, smoking cessation, hypertension and nutrition. Classes are taught by experts in the field, such as by dietitians who provide instruction on basics such as how to read labels, what kind of cooking fats and oils to use and how to order healthy choices at restaurants.

One of the offerings is particularly appealing to Chouquette.

“One of the things we do, which I think is really neat, is behavioral health counseling,” he said. “Counselors can address stress and depression and provide further support. That part is really important.”

Thompson Wyman enjoyed the classes.

“The educational sessions are just great,” she said. “The people are very knowledgeable and present the material in an interesting way. They make it fun and interesting.”

Phase III rehab is for the long term. This is lifetime maintenance that stresses the ongoing commitment to exercise and remaining healthy.

Methodist has a maintenance program available at several locations, with existing partnerships at community health and fitness centers in the area.

“Cardiac rehab is really for patients diagnosed with heart disease. It helps reduce risk factors,” Chouquette said. “Our philosophy at Methodist for rehab is the sooner, the better. You can catch problems before they become problematic.”

Thompson Wyma agreed.

“Cardiac rehab just makes you more conscious,” she said. “I’ve been amazed, and I think it’s just an excellent program.”