Patient & Family Guide

2024

Cardiovascular Intensive Care Unit (CVICU) 5.1

Halifax Infirmary

Phone: 902-473-7554 **OR** 902-473-7555



www.nshealth.ca

CVICU 5.1

This pamphlet explains what to expect when your loved one is a patient in the Cardiovascular Intensive Care Unit (CVICU).

Spokesperson

We ask each patient to choose 1 spokesperson. This is often their Substitute Decision-Maker (SDM), but it does not have to be. For more information about SDMs, see page 8.

- The spokesperson will be the main person to talk with the patient's health care team about their condition and plan of care. They will help share news with the patient's other loved ones and support persons.
- Having one spokesperson keeps patient care from being interrupted by many phone calls. The spokesperson can call the unit to get information about the patient:
 - Phone: 902-473-7554 OR 902-473-7555
 - When you call, ask to talk to the nurse.
 You will be asked to give your name, the patient's name, and your relationship to the patient.

Visiting the CVICU

- You are an important part of your loved one's health care team.
- When you arrive, use the phone at the unit's entrance. The phone calls into the unit. We will make a plan for your visit when you call.
- You can plan your visit by calling the unit before you arrive. Ask to talk with the nurse. They will ask for your name, the patient's name, and your relationship to the patient.
- At times visiting may be limited because of procedures and bedside rounds. If another patient is having a procedure, we may need to ask visitors to leave. This is for the patient's privacy. In the first few hours after your loved one is admitted to the ICU, please keep visits short. This helps us to monitor and care for your loved one. After this time, please talk with a nurse to plan longer visits. There is a limit of 2 visitors at a time.

Visiting times

- Visiting time usually starts at 10 a.m. This gives the health care team time to finish bedside rounds before visitors arrive.
- Try to limit visits and phone calls from:
 - > 6:30 to 8 a.m. and 6:30 to 8 p.m.
 - > These times are when nurses change shifts.

- The nurse who is leaving gives a full report to the incoming nurse. The incoming nurse then reviews the patient's chart and examines the patient.
- Limiting visits and phone calls during the shift change helps the health care team protect patient privacy and safely share patient information between shifts.

Can I visit overnight?

- **Do not** visit or stay at the hospital overnight.
- We understand this is a stressful time for you. It is important that you rest and take care of yourself. Your loved one also needs time to rest and recover.
- You are welcome to call the nurse overnight for updates. If you need help finding accommodations, tell the nurse that you would like to talk with a social worker.

Visiting with children

 Ask the nurse before you bring children into the CVICU.

How can I help keep my loved one safe during visits?

• At times, visiting may be limited due to the risk of infection. This will be decided with the advice of Infection Prevention and Control staff.

Do not visit the CVICU if you are sick. Patients are at high risk of infection.

- When visiting, follow the health care team's instructions about:
 - Cleaning your hands
 - > Wearing gloves, gowns, and/or masks
- Feel free to ask members of the health care team if they have washed their hands.
- For your loved one's safety, clean your hands with hand sanitizer before entering the CVICU.
 - Cleaning your hands with soap and water is best if your hands are dirty. This also helps to lower the spread of some sicknesses.

Can I take photos when I visit?

• To protect the privacy of all patients, talk with the nurse before taking any photos, videos, or sound recordings in the CVICU.

What to expect in the CVICU

- Your loved one may need a lot of equipment and medications to help them feel comfortable. Many people in the CVICU may have a ventilator (a breathing machine) and a breathing tube.
- Your loved one may not look or act like they usually do. They may feel drowsy or not be able to talk.

Lines, monitors, and alarms

Your loved one may be connected to intravenous (I.V.) lines and monitors. The CVICU is noisy and there may be a lot of alarms. The health care team is trained to know which alarms need action.

Heart monitor

A heart monitor helps us closely watch important information (like heart rhythm).

Arterial line

An arterial line helps us watch blood pressure and get blood samples without using a needle each time.

Oxygen saturation monitor

An oxygen saturation monitor checks the amount of oxygen in the body.

Keeping your loved one safe and comfortable

- People in the ICU are at higher risk for more health concerns. We do not want to scare you, but we do want you to know about some risks that the health care team will work to lower. These include:
 - › Delirium
 - > Bedsores
 - Blood clots

Delirium

- This is a type of confusion that commonly affects people in the CVICU. To prevent or lower delirium, we:
 - help people to start moving as soon as they can.
 - lower the dose of their calming medications, when possible.
 - limit nighttime activity to let people get a better sleep, when possible.
- To help us prevent or lower delirium for your loved one, tell us about them. For example:
 - > The name they prefer to go by
 - If they have hearing problems and/or wear hearing aids
 - If they wear glasses
 - Their usual sleep habits
 - What medications they were taking (prescription medication and over-the-counter medications, vitamins, and natural health products) before they came to the hospital
 - Any alcohol or drug use. This information is very important to their care. It will be kept confidential (private).
- Talk to your loved one using clear, simple words. Reassure them. Tell them where they are and what is going on.

Pressure injuries (bedsores)

- This is an injury caused by ongoing pressure on the skin and tissue. The pressure causes skin and tissue to break down.
- People in the CVICU have a high risk of getting bedsores. To lower their risk, we:
 - Check their skin often
 - Keep their skin clean and dry
 - Reposition (move) or turn them often
- Use a bed with a special surface to lower pressure
- Give them the nutrition they need to heal
- Help them start moving as soon as they can

Blood clots

- Blood naturally clots (clumps together) to heal your body. If an abnormal clot forms, it can cause harm. Abnormal clots can happen to anyone, but they are more common in people:
 who are very sick.

 - > who have had surgery.
 - who do not or cannot move a lot.
- To lower the risk of abnormal clots, we give medications or use special stockings. We also help people to start moving as soon as it is safe.

 For more information about preventing blood clots, use the QR code, the link below, or ask

a member of your health care team for pamphlet 1542, Preventing Blood Clots While in the Hospital:

> www.nshealth.ca/patienteducation-resources/1542

Is there a family waiting room?

 The CVICU has a family waiting room. Sometimes this room is crowded. If you hear information about another person, please respect their privacy. Do not repeat this information.

Substitute Decision-Maker (SDM)

- Sometimes a patient is not able to make decisions about their own health care. This may be because they are very sick or they have a serious injury. When this happens, another person is asked to make health care decisions for them. This person is called a substitute decision-maker (SDM). The health care team will ask your loved one to choose an SDM when you are admitted to the unit.
- Your loved one may have questions about what an SDM does and how to choose one. Feel free to ask the health care team any questions.



- For more information on being an SDM, use the QR code, the link below, or ask a member of your health care team for pamphlet 2327, Making Health Care Decisions for Someone Else: Acting as a Substitute Decision-Maker (SDM):
 - www.nshealth.ca/patienteducation-resources/2327



Taking care of yourself

- It is important for you to look after your personal needs during this stressful time. Other people who have gone through this experience suggest:
 - > eating regular, healthy meals.
 - giving yourself time to rest.
 - > taking your medications as usual, if needed.
 - talking with other people about how you are feeling.
 - taking breaks from the CVICU (like going for a walk or visiting the hospital library or the hospital's spiritual room).

When your loved one leaves the CVICU

• Leaving the CVICU can be stressful for patients, their loved ones, and their support persons.

- People do not leave the CVICU until they are ready for a different level of care. Most people in the CVICU are transferred to the Intermediate Care Unit (IMCU) on 7.1.
- Talk with your loved one's health care team if you have questions about this.

Who can I talk to if I have concerns?

- We are committed to giving your loved one the best care possible. If you have a concern, talk with a member of their health care team.
- You can also contact Patient Relations:
 - > Phone (toll-free): 1-844-884-4177
 - › Email: healthcareexperience@nshealth.ca

How can I give feedback?

We welcome and value your feedback. When you share your experience, it helps us to improve our care. We invite you to fill out our anonymous Patient and Family Survey:

- https://surveys.novascotia.ca/TakeSurvey. aspx?SurveyID=7452lm55
- Copies of the survey are in the main family waiting areas.
- There is a locked box near the unit's entrance where you can drop off your survey. You can also mail it to us.



This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any guestions, please ask your health care provider.

> Find this pamphlet and all our patient resources here: https://library.nshealth.ca/Patients-Guides

Connect with a registered nurse in Nova Scotia any time: Call 811 or visit: https://811.novascotia.ca

Prepared by: CVICU 5.1, Halifax Infirmary *Designed by:* Nova Scotia Health Library Services

WZ85-1888 © May 2024 Nova Scotia Health Authority To be reviewed May 2027 or sooner, if needed.

