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### Objectives

- · At the end of the unit, the student will be able:
  - ☐ To indicate three principles of cardiopulmonary bypass (CPB)
  - ☐ To mention indications and contraindications of Coronary Artery Bypass Grafting (CABG)
  - □To indicate the differences between valve regurgitation and valve stenosis disorders.
  - ☐ To discuss preoperative nursing care of the patient undergoing cardiac surgery.
  - ☐ To discuss Nursing management of the patient post cardiac

### Cardiothoracic surgery

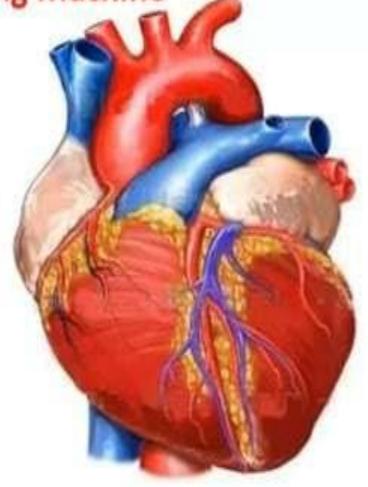
► Also known as thoracic surgery is the field of medicine involved in surgical treatment of organs inside the thorax (the chest)

(Generally treatment of conditions of the heart and lungs)

### Cardiopulmonary bypass

 Is a technique that temporarily takes over the function of the heart and lungs during surgery, maintaining the circulation of blood and the oxygen content of the patient's body. **About Heart Lung Machine** 





# Principles of cardiopulmonary bypass (CPB)

- ■Anticoagulant
  - · (heparin) × (protamine sulfate)
- ☐ Hypothermia
  - 28-32 (The cooled blood slows the body's basal metabolic rate, decreasing its demand for oxygen)
- Hemodilution

# Coronary Artery Bypass Grafting (CABG)

 Is a surgical procedure to restore normal blood flow to an obstructed coronary artery.

(A normal coronary artery transports blood to and from the heart muscle itself, not through the main circulatory system)

## indications of Coronary Artery Bypass Grafting (CABG)

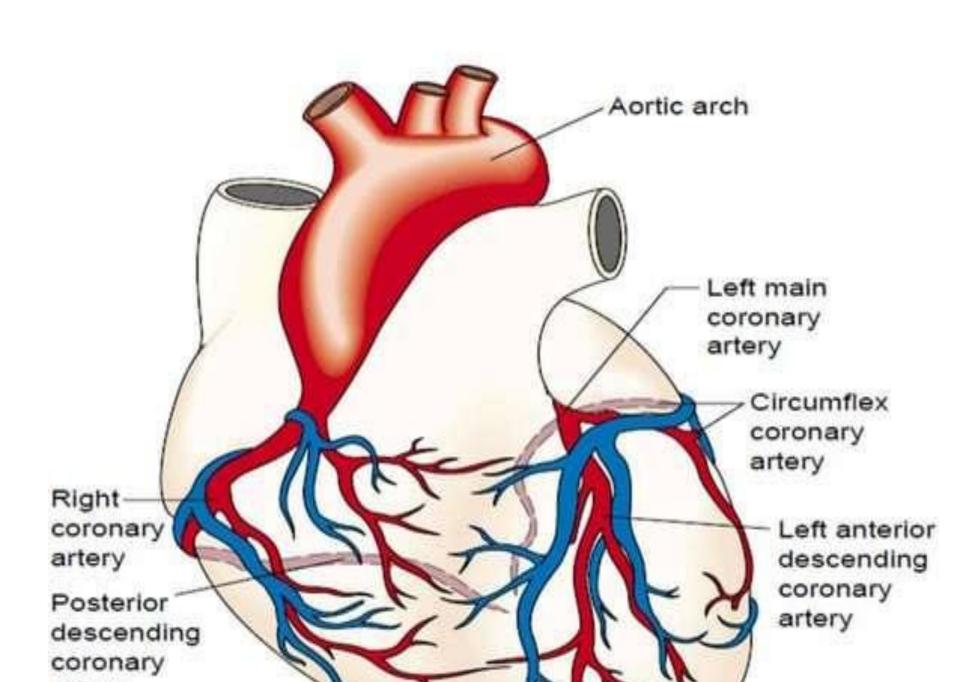
- ■Over 50% left main coronary artery stenosis
- □Over 70% stenosis of the proximal left anterior descending (LAD) and proximal circumflex arteries
- ☐Three-vessel disease in asymptomatic patients or those with mild or stable angina
- ☐One- or two-Vessel disease and a large area of viable myocardium in high-risk area in patients with stable angina
- □Over 70% proximal LAD stenosis with either an ejection fraction (EF) below 50% or demonstrable ischemia on noninvasive testing

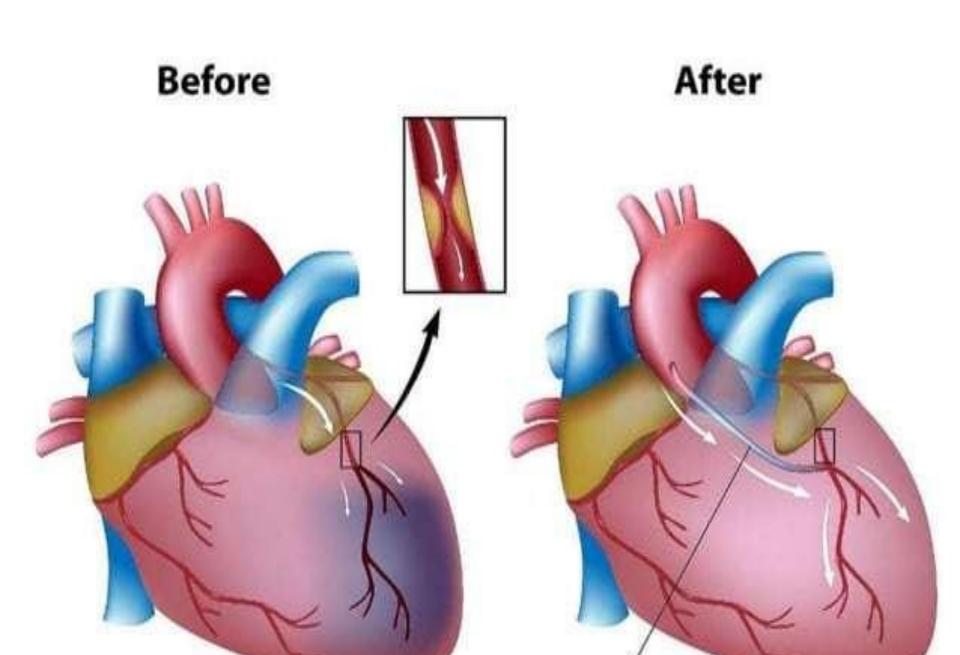
## contraindications of Coronary Artery Bypass Grafting (CABG)

□ Aneurysms

(when artery wall weakens and causes an abnormal large bulge can cause rupture and internal bleeding)

- ■Valvular diseases
- □ Congenital diseases
- ☐ Diseases of blood





### valve disease

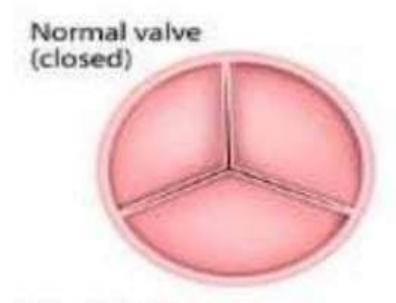
#### Stenotic Valve

A narrowed or stenotic valve requires the heart to pump harder, which can strain the heart and reduce blood flow to the body.

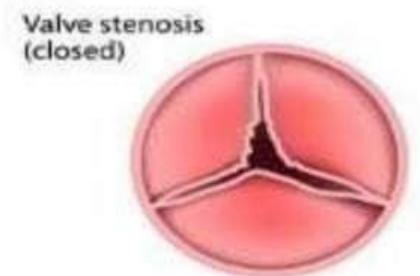
#### Regurgitation Valve

A regurgitate (incompetent, insufficient, or leaky) valve does not close completely, letting blood move backward through the valve.

#### **HEART VALVE DISEASE**



Normal valve (open)



Valve stenosis (open)

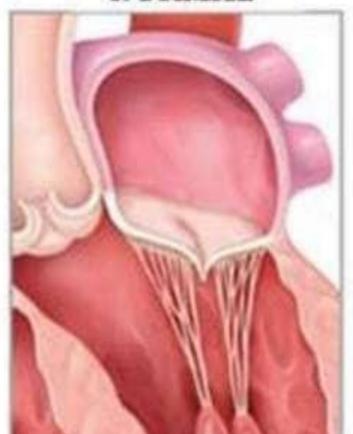


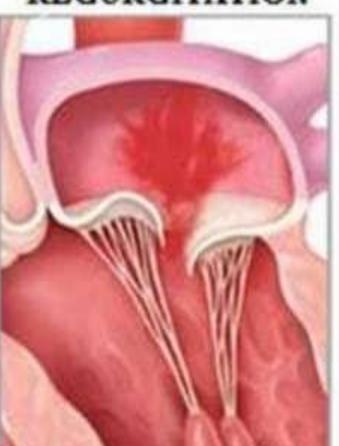
Mitral Valve Disease	Aortic Valve Disease
Mitral Stenosis	Aortic Stenosis
Postinflammatory scarring (rheumatic heart disease)	Postinflammatory scarring (rheumatic heart disease) Senile calcific aortic stenosis Calcification of congenitally deformed valve
Mitral Regurgitation	Aortic Regurgitation
Abnormalities of leaflets and commissures Postinflammatory scarring Infective endocarditis Mitral valve prolapse "Fen-phen"-induced valvular fibrosis Abnormalities of tensor apparatus Rupture of papillary muscle Papillary muscle dysfunction (fibrosis)	Intrinsic valvular disease Postinflammatory scarring (rheumatic heart disease) Infective endocarditis Aortic disease Degenerative aortic dilation Syphilitic aortitis
Rupture of chordae tendineae	Ankylosing spondylitis
Abnormalities of left ventricular cavity and/or annulus Left ventricular enlargement	Rheumatoid arthritis Marfan syndrome

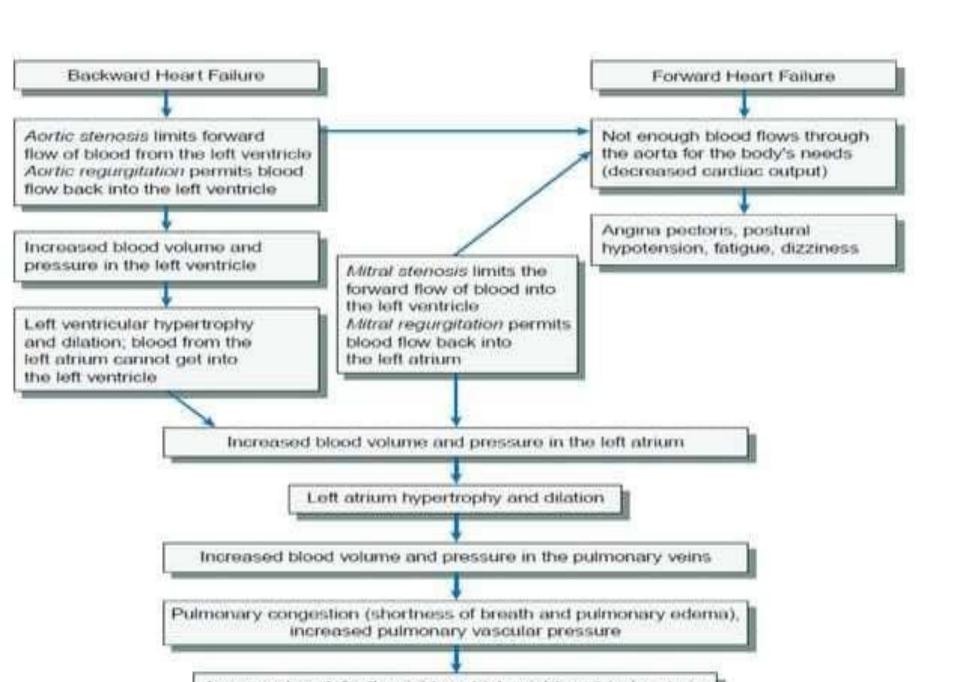
#### B) Valve Regurgitation

#### NORMAL

#### REGURGITATION







### Valvuloplasty

■ A commissurotomy
• Closed or open

☐An annuloplasty

## preoperative nursing care of patient undergoing cardiac surgery

- **□** Assessment
- **□**Medications
- **□**Teaching

### Assessment

- ☐ Systematic assessment
- physiologic assessment
- ☐ Assessment psychosocial spiritual factors, concerns
- ☐Past history of medicine
- ☐ Lab investigation
- □ Radiographers assess

### Medications

- Medication history.
- DASpirin and non-steroidal anti-inflammatory products must be discontinued at least 7 to 10 days prior to surgery.
- **Openicillin** interfere with platelet function.
- Digoxin is withheld 1 to 2 days prior to surgery (except in patients with atrial fibrillation)
- □All anti-anginal agents such as nitrates, beta-adrenergic blocking agents, calcium channel blockers are continued to prevent exacerbation of ischemic symptoms or myocardial

## Teaching

- Description of the surgery
- ☐The disease process and the risk factors necessitating surgery.
- □ Expectations about the anticipated events during the postoperative period.

# nursing care of patient post cardiac surgery

- Assessment
- ☐ Restoration of Cardiac Output
- ☐monitor Intake / Output
- ☐ Adequate Gas Exchange
- **□**Airway Clearance
- ☐Pain Relief

### **Nursing Diagnosis**

- Decrease Cardiac tissue perfusion
- ☐Risk for bleeding
- Decreased Cardiac Output related to, Hypothermia, Anesthesia, Myocardial edema, Electrolyte imbalances.



