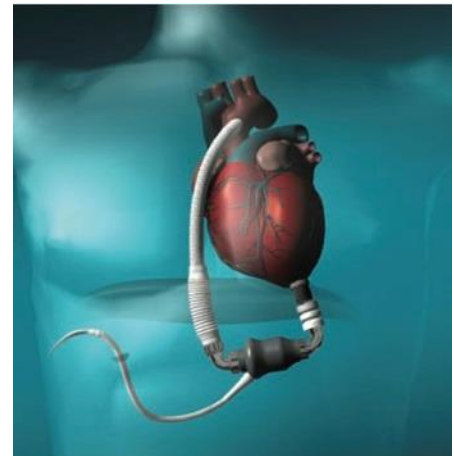
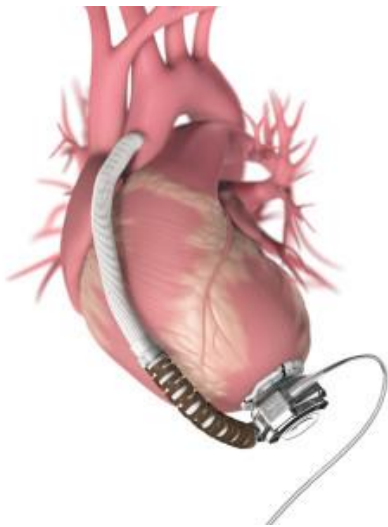


# Mechanical Circulatory Support (MCS) Program

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Mechanical Circulatory Support (MCS) consists of a mechanical pump that helps a weakened heart pump blood throughout the body. The device does not replace the heart. It assists the heart to pump blood, decreasing the workload of the ventricle. The device can be used as a **bridge to transplant**, which means it can help a patient survive until a donor heart becomes available. The device can also be used as **destination therapy**, which is an alternative to heart transplantation. Destination therapy provides long-term support in patients who are not candidates for heart transplantation.



- Always notify MCS Team if you get ANY alarms
- Always notify MCS Team if you notice any signs of bleeding
- Always notify MCS team if you experience Heart Failure symptoms
- Always notify MCS team if you notice any signs or symptoms of driveline infection

## Who to call for assistance

### During Business Hours

MCS Office  
408-851-3870

### After Hours

Page Operator  
408-851-1000 x 0

Ask for “MCS Team On Call”

# Dressing Change Procedure

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## ☐ Supplies

- 1 roll of silk, paper, or blue tape
- 1 Cloraprep 2% sponge
- 2 split 4x4 gauze
- 2 pair clean gloves
- 2 masks
- 1 4/x gauze

**\*\*Remember, this is a CLEAN procedure done as instructed by your MCS Coordinator to maintain integrity of the driveline and exit site\*\***

## ☐ One Person Procedure

1. Clean and clear surface for driveline dressing change
2. Wash hands
3. Put on clean gloves
4. Remove old dressing; ensure that the driveline doesn't tug when removing the old dressing
5. Inspect the dressing site for signs of infection. Report these to your provider and take photo if necessary
6. Open/drop Chloraprep, gauze, and split gauze onto field and tear tape, then remove gloves
7. Put on 2nd pair of clean gloves
8. Pinch the "wings" of Chloraprep to release the antiseptic solution
9. Your dominant hand should remain "clean." Use the "clean" hand to grasp Chloraprep and the "dirty" hand to grasp the driveline
10. Time and friction disinfects the site. Clean around the driveline and the surrounding area for at least 2 minutes in back-and-forth strokes. Use the "dirty" hand to lift the driveline as necessary to get around the site.
11. Allow the area to dry completely **\*\*DO NOT BLOT, BLOW, OR WIPE AT THE CLEANED SITE\*\***
12. Use "Clean" hand to place the split gauze around the lifted driveline.
13. Place the 4x4 gauze over the site
14. Place the tape over the site, ensuring that the dressing is completely occluded on all 4 sides

## ☐ Change Dressing:

- As instructed
- When dressing is not sticking or lifting from your skin
- When dressing is wet or dirty
- When there are any signs/symptoms of infection (Call MCS Coordinator).

# Important Points to Remember

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- ☐ NEVER sleep on batteries unless you are instructed to do so by one of the MCS team members.
- ☐ Change batteries ONE at a time. Only one person at a time can change batteries.
- ☐ ALWAYS carry your backup bag with you wherever you go!  
this includes 1 backup controller and 2 backup batteries.
- ☐ Avoid static electricity
- ☐ Take your Coumadin every night unless the MCS team tells you differently
- ☐ If you don't have ALL of your discharge medications, please call the MCS team @ 408-851-3870.
- ☐ **Call the MCS team for any alarms @ 408-851-3870 during business hours or page operator @ 408-851-1000 x 0 and ask for MCS Team On Call after hours.**
- ☐ It is not normal to feel dizzy, lightheaded or short of breath. Please call the MCS coordinators if you feel any of these symptoms.
- ☐ MCS Coordinators work Monday-Friday 8:30am to 5:00pm. After hours please call the Santa Clara Page Operator @ 408-851-1000 x 0 and ask for MCS Team On Call.
- ☐ Please call if you notice any changes in your driveline site; color, temperature, pain, and/or drainage. Please also call if your driveline has been pulled or caught on anything.
- ☐ Please call if:
  - Receive a shock from your defibrillator
  - If you have a fall
  - If you notice any excessive bleeding or blood in your stool or urine
- ☐ No driving until cleared by the MCS team. Do not sit in a seat that has an active airbag.

# Caring for your VAD

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## ☐ Medications

- Coumadin (Warfarin) and Aspirin (antiplatelet therapy) are medications that slow the clotting process in your blood; while you have a VAD implanted you are **REQUIRED** to take these medications regularly and comply with anti-coagulation service recommendations for blood testing.
- Some precautions to consider while on Coumadin:
  - Coumadin should be taken at the same time every day
  - If you miss a dose, **DO NOT** double your next dose.
  - Please notify your provider if you notice any bleeding from your gums, bruising, bloody nose or dark or bloody stools.

## ☐ Helpful Reminders

- Report any chest pain or shortness of breath to your MCS Coordinator
- CT (CAT) scans are okay while on a VAD, however, MRI scans are **NOT OKAY** while on VAD support.
- Check your equipment daily
- Change your exit site dressing as instructed
- Follow prescribed medication schedule
- Monitor vital signs and daily weight and record in home log.

# Visit Preparation

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## Clinic Visit

- Before every clinic visit you must have your labs drawn
- You must bring your MCS Home Log to every clinic visit
- You must bring a list of your current medications to every clinic visit

## Readmission to hospital

- Bring all of your equipment with you to the hospital
  - **HeartMate II**
    - Emergency Back-up bag
    - Power Module
    - Cable
    - Display Module
    - Batteries
    - Battery Charger
  - **HeartWare**
    - Emergency Back-up bag
    - AC Adapter
    - Batteries
    - Battery Charger

## Labs

- Please have labs drawn **MONTHLY**, even if you do not have a clinic visit

## Other

- If another provider prescribes medication for you, call the MCS team to let us know about it **BEFORE** you start taking it