

Cardiac Care
MEDICINE of THE HIGHEST ORDER

URMC ADVANCED HEART FAILURE PROGRAM

Your LVAD Connection Newsletter

In this issue:

- Have an LVAD Question?
- FAQ for a Patient's Office Visit
- Driveline Site Guidance

Team Work and Collaboration

Welcome to the LVAD connection newsletter. The purpose of this publication is to provide specialized information about LVADs to our regional clinical partners. As clinical care is becoming more complex and specialized, it is important to stay connected. Collaborative care helps us all to not only better understand patient needs but staff needs as well.

You have questions, we have answers!

Q: Where can I go to find AHF resources including LVAD information?

A: We have multiple resources to share!

UR Medicine VAD Program educational resources can be found at www.vadresources.urmc.edu
or scan the QR code



General questions: Please call Monday-Friday (585) 273-3760

Also, add this link to your mobile home screen: hf.urmc.edu

If you have a question for future editions please email me at:
lisa_fowler@urmc.rochester.edu



Q) What is the best way to communicate with our team?

A) Urgent issues call 585-273-3760

Non-urgent: VAD APPs available during clinic hours of **8 am—4:30 pm** at (585) 273-3760

- Email: vad@urmc.rochester.edu
- Fax clinic visit notes routinely: (585) 273-1129

Q) What do we want to know immediately?

A) Please call the VAD APP ASAP for:

- Equipment related issues
- Pump concerns or symptoms that would require RAMP echo
- Bleeding
- Infection concerns— please refer to next page for driveline guidance
- VAD alarms - Notification is not necessary if the patient experiences an isolated alarm. Please do notify us if the patient is having frequent alarms and appears to be not feeling well.

Q) How should medication titrations be handled?

A) Please communicate all heart failure medication changes with us. **Do not** make any adjustments to a patient's anticoagulation without our prior notification.

Q) Who handles a patient's lab work?

A) Our office will continue to manage all labs and results that we order. Lab work ordered by a patient's PCP or other specialty will be managed by that particular office (diabetes, thyroid, etc.) If your office would like lab results prior to visits please have your office call us to request records faxed.

Q) What are some routine tasks that need to be checked during a visit?

A) We can help walk you through the following:

- Checking and potentially charging a patient's emergency battery in their back up controller
- Checking their external batteries expiration date
- Driveline dressing supply changes
- Situations where log files may need to be obtained
- Any indications that the patient may need to return to Rochester for further evaluation

Driveline Dressing Guidance

Driveline Assessment

- **Assess driveline site**
 - Are they having pain/discomfort, erythema, induration, swelling, warmth
 - Assess drainage
- **Review history of driveline infections**

Obtain Culture

- Patients should not have changed their dressing within 24 hours
- To ensure a good sample, obtain Aerobic Culture directly from exit site drainage prior to cleansing, and not surrounding skin

Replace Sterile Dressing

- Caregiver, patient, or nurse to replace the sterile dressing (See QR code)
- Patient will use own dressing supplies

Treatment Options

Localized vs Systemic Infection

Signs and Symptoms

Localized infection- erythema limited to exit site only, pain, drainage, warmth at site

Systemic infection- also includes s/s of induration, tracking, erythema localized to epigastric region, febrile

Just drainage - wait for culture results before treatment decisions

Systemic

Potential admission to hospital
Call VAD Office: 585-273-3760

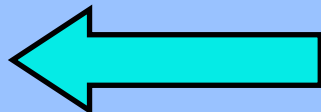
Localized

Oral antibiotics
Call VAD Office: 585-273-3760



SCAN ME

Drive line dressing video



Any concerns?

We are just a phone call away!

1-800-892-4964

585-273-3760