

Norma Melchor Heart & Vascular Institute

Mountain View Campus

Information Handbook for Thoracic Surgery and Recovery



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Your Thoracic Surgery Team

Physicians

Vincent Gaudiani, MD
Tom Oka, MD
Pei Tsau, MD
Conrad Vial, MD

Physician Assistants

Ed Hahm, PA-C
Maryam Delucia, PA-C
Wilson Kee, PA-C

Nurses

Kathleen Masket, RN, CNS, MSN
Becky Tam, LVN

Phone Numbers

Medical Questions

Becky Tam, LVN, 650-330-4308

Scheduling Questions – Palo Alto

Mitchell Bennett, 650-853-5745

Scheduling Questions – Mountain View

Antoinette King, 650-404-8250

After Regular Business Hours

Page operator, 650-321-4121

Ask for the cardiothoracic surgeon on call

Visitor Information

At El Camino Health, we strive to provide the best quality healthcare to our community. This section covers many questions our patients and their families commonly ask. If you do not find the information you need here, please call us at 650-940-7000.

Location

El Camino Health

2500 Grant Road, Mountain View, CA 94040

Parking & Transportation

We offer free valet parking to patients and visitors at our El Camino Health hospitals. For more information, visit the El Camino Health website: elcaminohealth.org/parking.

Dining Options

Sandwiches, snacks, hot meals and drinks are available at the cafeteria, located on the ground floor of El Camino Health.

Cafeteria hours, Monday through Friday:

Breakfast 6:30 – 10 a.m.

Lunch 11 a.m. – 3:30 p.m.

Dinner 4:30 – 7:30 p.m.

(Hours subject to change.)

Cafeteria hours, weekends and holidays:

Breakfast 7 – 10 a.m.

Lunch 11:30 a.m.– 2:30 p.m.

Dinner 4:30 – 7 p.m.

(Hours subject to change.)

Wireless Internet Access

El Camino Health is pleased to provide complimentary internet wireless access for our visitors on their laptop or mobile device. Use the network “NewGuest” to sign into the network.

Spiritual Support

Our Meditation Room is located on the first floor of El Camino Health. Visitors of all faiths are welcome.

Visitor Guidelines

El Camino Health does not have formal visiting hours; however, we encourage patients to see family and friends in moderate numbers and for brief periods of time. To ensure uninterrupted patient care, we've established the following guidelines:

- Visitors may not smoke anywhere on the hospital grounds.
- Visitors must dress appropriately and wear shirts and shoes.
- Visitors may be asked to leave the room during tests or treatments or when a doctor or nurse needs to see the patient.
- Visitors should maintain a quiet environment and should be considerate of all patients.
- For your safety, please tell any person with a cold, sore throat, fever or other transmissible illness not to visit you.

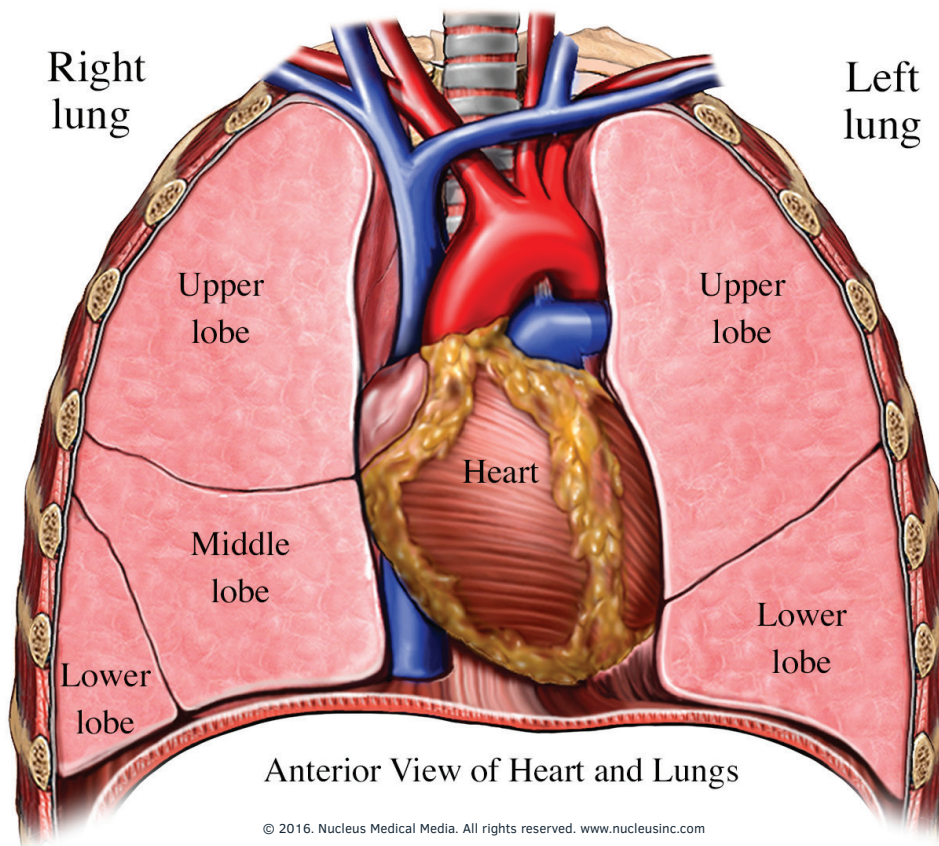
The Respiratory System

To help you better understand your surgical procedure, the following section provides an overview of how the lung functions, common reasons for lung surgery and surgical treatments.

Your lungs are located on either side of your heart. Lungs transport oxygen to your blood stream and remove the waste product, carbon dioxide.

The lungs are divided into three lobes on the right and two lobes on the left. Each lobe has numerous tubes, or bronchioles, that lead to tiny air sacs called alveoli.

Your lungs also have a large number of lymph nodes that help defend your body against infection. This specialized tissue filters blood and traps cancer cells and bacteria.



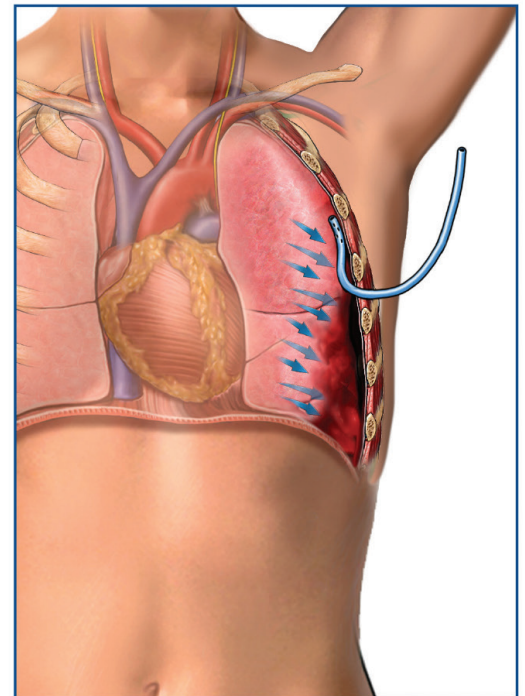
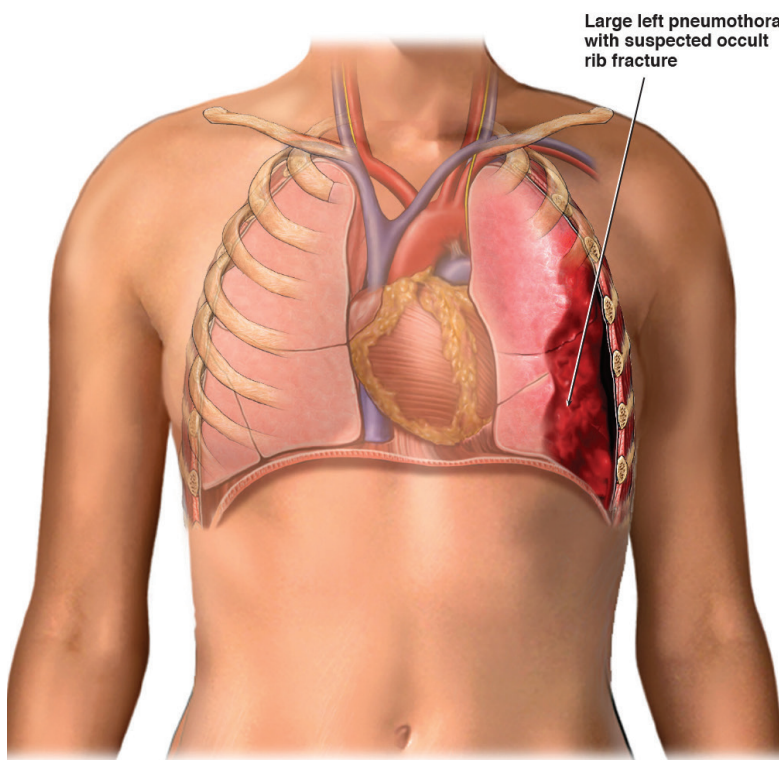
Common Reasons for Lung Surgery

Lung Nodule or Mass

Surgery is often performed to remove a nodule or mass from inside your lungs. Many nodules are initially identified by a chest X-ray or a CT scan. Nodules can be benign or malignant, and have different root causes, such as infection, inflammation or tumors. Your surgeon may remove either a sample of the nodule (called a biopsy), the entire nodule or a piece of the lung. Your lymph nodes in the area may also be biopsied.

Collapsed Lung/Pneumothorax

If the wall of the lung is thin or ruptured, air may leak into the space between the chest wall and the lungs. This will collapse the lung, causing what is called a pneumothorax. Your surgeon will place a chest tube to re-expand the lung and/or remove the ruptured area of the lung so it will not collapse again. Chest tubes are routinely placed after lung surgery to remove air and fluid from the lungs.

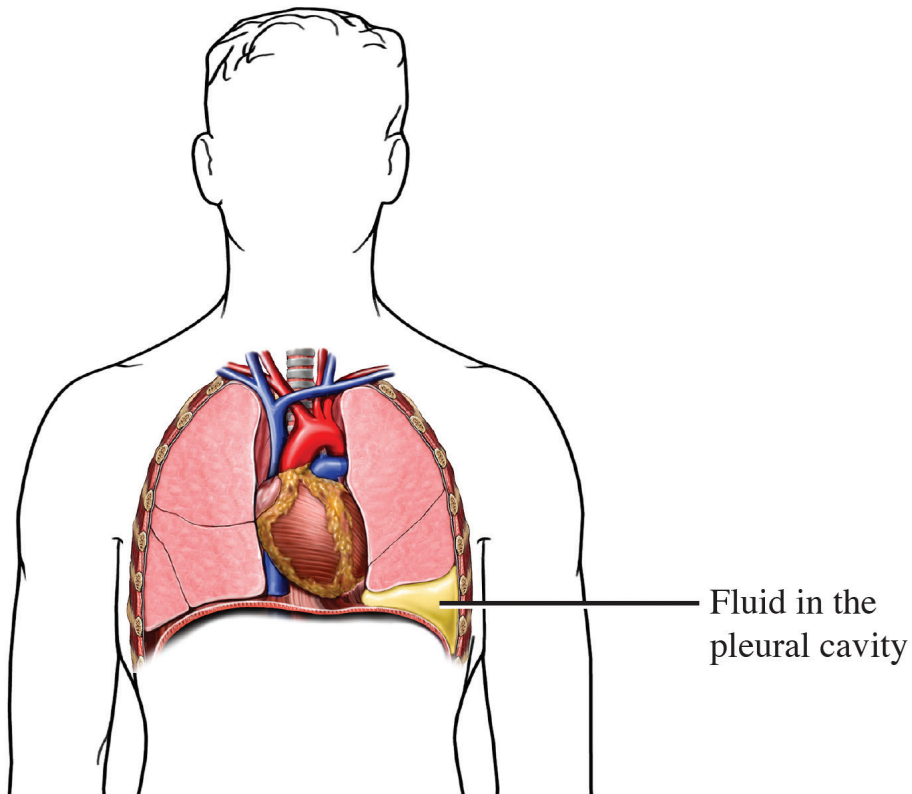


A thoracostomy tube is placed allowing the excess air in the pleural space to escape. The collapsed lung is allowed to re-expand.

Fluid Around the Lungs/ Pleural Effusions

Fluid may accumulate around your lungs, making it difficult to breathe. Common causes of this condition, called a pleural effusion, include recent heart or lung surgery, congestive heart failure, lung infections or cancer. The fluid can be temporarily drained with a needle and then analyzed to determine the cause of the effusion.

Your surgeon may place a tube to drain out the fluid and help the lungs heal. A specialized chest tube called a PleurX catheter may be placed if long-term drainage is required.



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Your Surgery

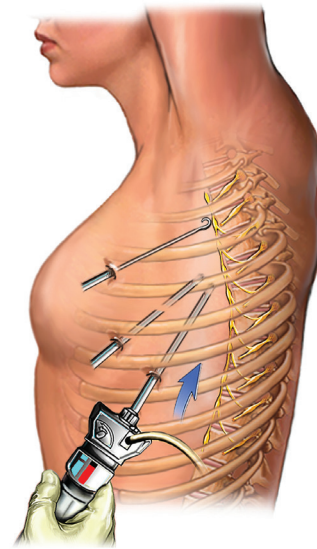
In most cases, there are two approaches to lung surgery. The less-invasive lung surgery is called a video-assisted thoracoscopic surgery. The other type of surgery, called a thoracotomy, is more invasive and requires a larger incision in the chest.

During your lung surgery, you will be under general anesthesia, which means you will be completely unconscious and unable to feel pain. While you are under anesthesia, a chest tube will be placed into your chest to drain fluid or air from around your lungs. This tube will be removed before you leave the hospital. Depending on the type of lung surgery you have, your stay in the hospital will last approximately four days.

Video-Assisted Thoracoscopic Surgery (VATS)

During a VATS procedure, the surgeon makes two to four small incisions in the chest. Surgical tools and a thoracoscope (a tube with a video camera and light source attached) are placed through the incisions. The diseased lung tissue is cut away and removed.

Experienced surgeons can perform most operations through a VATS. However, if the operation is too complex, you may require a larger incision with a thoracotomy. VATS procedures typically incur less pain and a shorter hospitalization and recovery.



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Thoracotomy or Mini-Thoracotomy

In a thoracotomy procedure, the surgeon makes a three- to eight-inch incision in your chest. The incision can extend from under your arm to around your back. Muscles are cut or moved to allow access to the chest wall. Ribs are then spread apart. A thoracotomy is required when the surgeon needs a larger opening to perform the operation.



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Lung Resections

Your surgeon will decide whether a VATS or thoracotomy is the most appropriate approach to removing lung tissue. Depending on the condition, your surgeon will either remove a portion of a lobe (called a wedge resection), an entire lobe (called a lobectomy) or the entire lung (called a pneumonectomy).

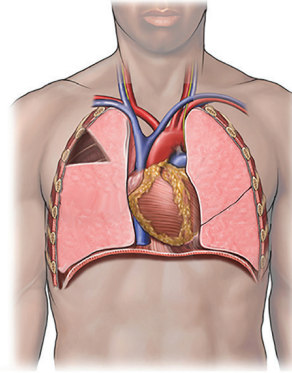
Pleurodesis

A pleurodesis procedure is conducted in cases of recurrent pleural effusions (fluid around the lungs) to prevent the reaccumulation of the fluid. This procedure causes the lungs to stick to the chest wall and prevents the buildup of fluid in the space. During pleurodesis, an irritant is instilled inside the pleural space to create inflammation that sticks the two pleura together. The procedure permanently closes the space between the pleura and prevents the reaccumulation of fluid.

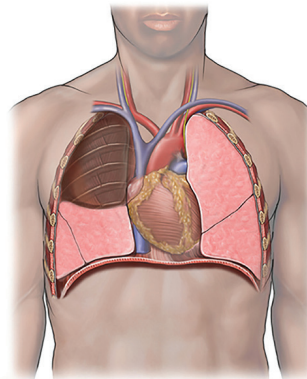
Mediastinoscopy

During a mediastinoscopy procedure, the surgeon makes a small incision above the breastbone and inserts a scope alongside the trachea. This allows the surgeon to see some of the lymph nodes and remove them for further testing.

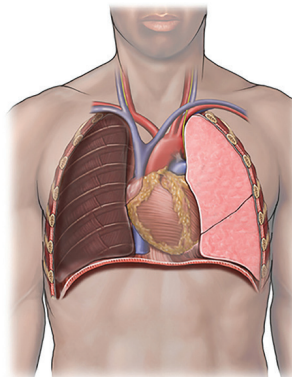
Segmentectomy



Lobectomy



Pneumonectomy



Preparing for Surgery

Arrival and Check-In

Your surgery is scheduled for _____ at El Camino Health, 2500 Grant Road, Mountain View.

Please arrive at this time: _____

Check in at Patient Admitting/Registration, (1B20) located on the first floor by the hospital main lobby entrance.

Preoperative Testing

Your surgeon's office will arrange for your preoperative workup and testing. Several appointments will be needed to prepare for your surgery.

Preoperative Physical Exam with a Physician Assistant

This appointment will also include a preoperative teaching session with our nursing staff. Please bring all your medications in their original containers for this appointment. You will be provided with a surgical consent form to read and sign, and the following tests will be ordered:

- Blood tests
- Urine test
- Chest X-ray
- EKG

Type and Cross

You will need to go to the outpatient laboratory at El Camino Health to have blood drawn for a type and cross. Please complete this task two to seven days before your surgery. Your result will be sent to the hospital's blood bank to ensure that blood will be available if a blood transfusion is required during your surgery.

What to Pack for Your Hospital Stay

Wear comfortable clothing to the hospital. You can wear the same outfit on your return home. A shirt or top that buttons or zips in front is recommended. At the hospital you will receive a gown, pajama bottoms and a pair of non-skid slipper socks. Please pack lightly as storage is minimal, especially in the critical care unit.

Toiletries

- Dental care
- Shaving items
- Lip balm
- Hairbrush and/or comb

Clothing

- Change of underclothing
- Bathrobe, if desired
- Non-skid slippers

Prostheses

- Dentures
- Glasses
- Hearing aids with extra batteries



Other Preparations

Stop Smoking

It is mandatory that you stop smoking before your surgery. Smoking irritates your lungs, and as a result the body may not receive sufficient oxygen. When your lungs are not in top shape, it may take longer for you to recover from your surgery.

Stopping smoking may be very difficult for you. This is especially true when you are under a lot of stress. The support of friends and family can make it easier to stop. They can help by not smoking around you or even joining you in the effort to quit.

Smoking Cessation

El Camino Health offers two smoking cessation programs for those who want to kick the smoking habit. Group and individual sessions are offered. For more information or to register for either program, call the Cardiac & Pulmonary Wellness Center at 650-988-8225.

Report New Health Problems

Let the surgery team know as soon as possible if you have any new health problems. This could include a fever, cough, sore throat, cold, urinary tract infection, or if a doctor or dentist has started you on an antibiotic. It is important for you to be in the best possible health at the time of your surgery. As it gets closer to your surgery date, you should stay away from people who are sick.

Advance Healthcare Directive

If you have an Advance Healthcare Directive or durable power of attorney for healthcare, you should bring this document with you to the hospital. An Advance Directive tells your doctor what care you wish to receive in the rare case that you are unable to communicate or make decisions on your own behalf. If you have not completed this form or discussed these issues with your family,

now is a good time to consider it. All adults age 18 and older should have an Advance Directive.

You can download an Advance Directive form from El Camino Health's website at elcaminohealth.org. The Health Library & Resource Center at El Camino Health offers Advanced Healthcare Directive assistance.

Please call 650-940-7210 for more information. In addition you will also find resources for advance healthcare planning on the Coalition for Compassionate Care of California website, coalitionccc.org.

Discontinuing Medications

If you are currently taking any blood thinner medications, such as Coumadin, Plavix, Aggrenox, Trental, Pletal, Pradaxa or Xarelto, you must stop taking them seven days prior to your surgery. Aspirin, up to 81 milligrams, is allowed. Over-the-counter supplements such as fish oil, ginseng, ginkgo biloba and Vitamin E should be stopped one week prior to surgery.

Please stop _____

on _____

Please stop your blood thinner _____

on _____

Please start _____

on _____

Surgery Schedule

Please understand that the surgery schedule sometimes must change at short notice. If this happens, we will inform you as soon as possible if the date or time of your surgery has changed.

The Day Before Your Surgery

Shower

Germs normally live on your skin and pose no risk to you. A surgical incision disturbs the normal protection the skin provides. To minimize bacteria, the night before surgery, shower and wipe your chest and legs with an antiseptic wipe. Follow these steps when you shower:

- First, shower with regular bath soap. Rinse off completely. Do not shave any area of the body.
- Allow the skin to dry for about one hour. Do not apply lotions.
- After the skin has dried, use the cloths provided in the following order. Use one cloth for each area:
 - Chest
 - Back
 - Right arm, including armpit
 - Left arm, including armpit
 - Right leg, front and back
 - Left leg, front and back

Allow area to air dry for one minute. After wiping with the cloths provided, do not rinse. It is normal for the skin to have a temporary “tacky” feel for several minutes after the antiseptic solution is applied.

The antiseptic wipe is for external use only. Keep out of eyes, ears and mouth. If contact occurs, rinse with cold water right away. If severe irritation occurs, contact a doctor.

When applied to sensitive skin, there may be skin irritation such as a temporary itching sensation and/or redness. If itching or redness persists, rinse affected areas and discontinue use. When you are done:

- Discard cloths in trash can. Do not flush down toilet.
- Dress in clean clothes or sleepwear after skin dries.
- Do not shower or bathe the morning of surgery.

Food and Drink

Do not eat or drink anything (including water) after midnight the night before your surgery.

Please take _____ the morning of surgery with a small sip of water.

Leave Jewelry and Valuables at Home

Remove all jewelry, makeup and nail polish. Please leave jewelry and valuables at home.

Your Hospital Stay

In the Operating Room

- To ensure patient safety, when you enter the operating room, a nurse will greet you and check your name band and other vital information.
- The anesthesiologist will start an intravenous line and give you medication to put you to sleep. Once you are asleep, the staff will apply the monitoring devices and insert breathing and drainage tubes.
- The monitoring devices and tubes will accompany you to the recovery room where you will be taken immediately after surgery. This equipment is not painful, but it can be an overwhelming sight for family members.

Lines, Tubes and Monitoring Devices

Heart Monitors

You will have five electrodes on your chest that transmit a electrocardiogram (EKG) and heart rate onto a bedside monitor, continuously monitoring your heart to watch for abnormal heart rhythms or problems. Each monitor has alarms that are very sensitive to movement, so you and your family should not be frightened if the alarm rings.

Intravenous (IV) Lines

An IV is a small, soft tube that is placed into a vein in your body. Common sites for placement are your hand, arm and neck. You can receive blood, fluids and antibiotics through these IVs.



Chest Tube

Chest tubes are plastic drains that are placed into your chest cavity during surgery. These chest tubes are connected to a plastic drainage container that drains fluids or air from your chest. Often these tubes are removed the morning following surgery, but sometimes one tube may remain for two to three days or longer.

Urinary Catheter

A urinary catheter (also called a Foley catheter) is a small, soft tube that is put through your urethra into your bladder. It is then attached to plastic tubing and connected to a drainage bag. The purpose is to monitor your urine output. It may give the sensation of having to urinate even as it is draining. It will be removed within two to three days.

Sequential Compression Device

A sequential compression device (SCD) prevents the occurrence of deep vein thrombosis (DVT) which is a blood clot in your leg. After surgery SCDs are placed on your legs and connected to a pump that inflates and deflates the compartment with air. This prevents blood from pooling in your lower legs.

Epidural Catheter

You may have an epidural catheter (small tube) placed in your back by the anesthesiologist to help control your pain. You will receive a continuous dose of pain medication. The epidural catheter usually remains in place for two to three days.

Waking Up from Anesthesia

Upon entering the recovery room, you will still be asleep. When you first wake up, you may feel tired, confused, nauseated, thirsty, feverish or cold. You also may experience pain and tenderness around your incision. These reactions and feelings are very normal after surgery. Your nurse will ask you to move your hands and feet and will also assess whether you need pain medication.

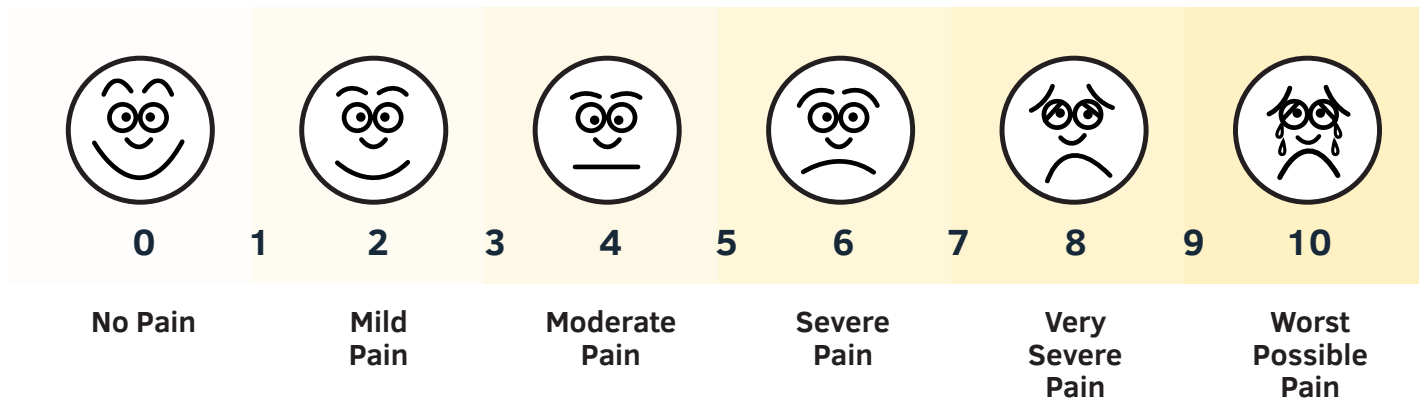
Your Recovery in the Hospital

Managing Your Pain

Pain is an individual experience. Our goal is to keep you as comfortable as possible after surgery. No surgery is painless, but with proper pain management you will be able to move around and do deep breathing exercises. Some patients worry they will become addicted to pain medication. This should not be a concern as you will only take these medications for a short

period of time. The pain measurement scale will help your nurse determine the effectiveness of the medication. You will be asked to describe your pain or discomfort level in a number (see scale below). There is no right or wrong answer. Adequate pain management is necessary and crucial for your recovery. Be sure to ask your nurse for medication before pain prevents you from actively participating in your recovery.

PAIN MEASUREMENT SCALE



Adapted from Wong-Baker Faces Pain Rating Scale

Deep Breathing and Coughing Exercises

One of the most important factors in your recovery is your ability to breathe deeply and cough effectively. Anesthesia, pain and bed rest can lead to poor lung expansion, causing secretions to collect in your lungs. Performing deep breathing and coughing exercises with an incentive spirometer every hour will promote lung expansion and clear your air passages. This is an important step to help prevent pneumonia, which is a common post-operative complication.



Incentive Spirometer

Follow-Up Care

Your surgeon's nurse will call two days after your discharge from the hospital to assess your progress and answer your questions. At that time we will make your seven- to 10-day follow-up appointment with the physician assistant. Prior to your follow-up appointment you will have a chest X-ray.

Activities After Your Hospital Stay

- Get dressed and groomed every morning.
- Continue to alternate between resting, sitting and walking. Lie down for no more than one hour at a time. Sit down for no more than 45 minutes at a time. Avoid crossing your legs. This will prevent sluggish circulation in the legs that can lead to blood clots.
- Daily exercise is a key part of your healing process. Regular exercise will help strengthen your muscles.
- Take daily walks outside on level ground when the temperature is comfortable. Start with five minutes out, five minutes back. Gradually increase the length of your walks. Walk at your own pace. If you feel up to it, repeat your walk later in the day. It is fine to climb stairs, just take it slowly.
- Fatigue is common after surgery. Space your activities to allow for rest periods.
- **Avoid air travel for _____ weeks after surgery.**
- Continue using your incentive spirometer hourly while awake, taking 10 breaths each time. This will help keep your lungs clear until your activity level is back to normal.
- You may return to work in one to two weeks unless otherwise indicated. Our office can assist you with your medical leave paperwork.
- Refer to the Food as Medicine Guide on pages 16-17.
- Gently exercise your arm and shoulder on the operative side. You may feel pulling or tightness but gentle stretching will not tear anything. Use your arms normally and try range-of-motion exercises to keep your joints flexible.

- You may drive once you are not taking narcotics for pain during the day and you can move comfortably. Start with short trips.

- **Avoid lifting anything over _____ for _____ weeks.**

Caring for Your Incisions

- Use gentle soap and water to keep your incisions clean. Carefully clean your incisions first and then wash the rest of your body. Gently pat your incisions dry.
- Avoid pools, hot tubs or tub baths until your incisions are completely healed.
- Check your incisions daily. Watch for increased redness, swelling or oozing. Contact your surgeon if this develops. Do not wait until your follow-up visit.
- All dressings can be removed three days after your chest tube is removed.
- If you have any sutures they will be removed at your post-operative appointment.
- Do not apply lotions, creams or ointments to your incisions unless instructed by your physician.
- Your incisions may feel numb to touch. This numbness will go away in time.
- If you have diabetes you may heal more slowly. You also have an increased risk of developing an infection. It is very important to keep your blood sugar levels in control. Please contact the physician monitoring your diabetes to discuss appropriate blood control therapies.

Managing Pain at Home

- When you are discharged from the hospital you will receive a prescription for pain medication.
- As you increase your activity, you may experience some increased discomfort in the muscles around your incision. Pain in the chest is expected after surgery and increases with movement, coughing, laughing or sneezing.
- Expect to use pain medication for one to two weeks following your surgery. As your pain diminishes,

you should decrease the pain medication. You should take your pain medication as needed to ensure comfort with activity and your ability to take deep breaths and cough effectively.

- Try taking half the dose of pain medication or stretching the amount of time between doses. Alternate prescription pain medications with over-the-counter medications such as Tylenol or Motrin.
- We recommend taking medications at the start of the day when your activity begins and at bedtime to ensure comfortable sleep.

Constipation

- Constipation is common following surgery. Pain medications, anesthesia, lying in bed, a poor appetite and poor fluid intake can lead to constipation.
- You will be sent home with a stool softener, which will make it easier to have a bowel movement.
- You should not be straining or pushing hard when you go to the bathroom. If you are having difficulty, the following may help:
 - Eat more fiber (fruits, vegetables, whole grains).
 - Drink sufficient fluids, approximately six cups per day. Warm fluids are helpful.
 - Increase activity, especially walking.
 - Decrease use of pain medications.
 - Take a laxative of your choice. We recommend warm prune juice in the morning or milk of magnesia at bedtime. Miralax and Metamucil may also be helpful.

When Do I Call My Nurse?


Call us if you experience any of the following:

- Fever higher than 101°F/38.3°C, shaking or chills.
- Changes in incisions such as:
 - Wound separation.
 - Redness that extends more than one inch from the incision edge.
 - Increased warmth in the skin around the incision.
 - Large amount of clear or pinkish drainage.
 - Sudden increased amount of drainage.
 - White, yellow or greenish drainage.
 - Increased swelling, tightness or pain around the incision.
- Tenderness in your calf or calves.
- Long lasting extreme tiredness (fatigue).
- Fast or irregular heartbeats.
- Shortness of breath/winded while resting or with very little exertion.
- Sudden severe shortness of breath.
- Persistent cough.
- Chest pain that may radiate to your left arm or jaw.
- Increased swelling in your legs.
- Weight increase of more than two pounds overnight or more than five pounds in a week.
- General deterioration in your overall condition following a period of recovery.




Food as Medicine

GUIDE TO HEALTHY EATING

	NON-STARCHY VEGETABLES	STARCHY VEGETABLES	FRUIT	GRAINS	HEALTHY FATS
GO!	<p>Fresh, frozen, or canned NO added salt</p> <p>All leafy green vegetables: Spinach, kale, collards</p> <p>All orange, yellow, red, green, white non-starchy vegetables: Carrots, tomatoes, red peppers, summer squash, green beans, mushrooms, broccoli, cauliflower, cabbage, Brussels sprouts</p>	<p>Winter squash: Acorn, butternut, pumpkin</p> <p>Potatoes: White potato with skin, sweet potato, yams</p> <p>Other: Corn, green peas, Lima beans, rutabagas</p>	<p>All whole fruit: Fresh or frozen, unsweetened</p>	<p>All whole grains: Barley, oats, brown rice, wild rice, bulgur, quinoa, millet, whole wheat pasta and couscous, brown rice pasta, whole wheat and whole grain bread, buns, tortillas, pitas</p> <p>Cereals (look for more than 4 grams of fiber per serving): Bran flakes, steel cut or old-fashioned oatmeal, most Kashi® cereal, Uncle Sam® Wheat Berry Flakes</p>	<p>Nuts, seeds, and nut butters</p> <p>All nuts and seeds: Walnuts, almonds, pistachios, Sunflower, pumpkin, chia, ground flax seeds, all natural peanut butter (only ingredients peanuts and salt), almond butter, tahini</p> <p>Other healthy fats: Avocado, olives</p>
CAUTION!	<p>Limit due to high sodium content</p> <ul style="list-style-type: none"> • Sauerkraut • Kimchi • Tomato juice • Pickles 	<p>Mashed potatoes: Be mindful of added fat and salt</p>	<ul style="list-style-type: none"> • Applesauce, unsweetened • Canned fruit, natural juices • Dried fruit, sweetened • Frozen fruit, sweetened 	<p>Breads: Made with white flour/enriched</p> <p>Cereal: Cream of Wheat®, granola, grits, rice cereal</p>	<p>Be mindful of portions</p> <p>One serving = 45 calories and 5 grams of fat</p> <p>1 teaspoon: Extra virgin olive oil, canola oil, flaxseed oil, avocado oil, sesame oil, safflower oil, sunflower oil, grapeseed oil, regular mayonnaise</p> <p>1 tablespoon: Pesto made with olive oil, light mayonnaise</p>
 <p>Healthy Eating Tip</p>					
		<p>PORTION CONTROL: Make at least half your plate vegetables for better portion control and weight management.</p>			
	NON-STARCHY VEGETABLES	STARCHY VEGETABLES	FRUIT	GRAINS	OTHER FATS
STOP!	<p>None that are deep fried</p>	<p>Mashed potatoes with added butter, cream, and salt: French fries, tempura vegetables</p>	<ul style="list-style-type: none"> • Applesauce, sweetened • Canned fruit with syrup • Cranberry sauce • Fruit juice 	<p>Breads: Biscuits, cornbread, croissants, foccacia</p> <p>Cereal: Less than 4 grams of fiber per serving, more than 8 grams of added sugar per serving</p>	<p>Butter, cream cheese, coconut, half and half, lard, margarine, gravy, shortening, sour cream, ghee, whipped cream</p>

Choosing a whole foods, plant-based diet has been shown to prevent and reverse chronic disease. Focus on the foods in the green **GO!** column for the best protection, slow down on the foods in the yellow **CAUTION!** column, and avoid or sparingly use the foods in the red **STOP!** column.

PROTEIN/ LEGUMES	DAIRY SUBSTITUTES	CHIPS/SNACKS/ SWEETS	SWEETENERS	OTHER
<p>All beans and legumes: Garbanzo, kidney, black, navy, lentils, edamame, tofu, tempeh</p>	<p>Choose unsweetened: Almond milk, soy milk, flax milk, cashew milk, coconut almond milk, soy yogurt, almond milk yogurt, non-dairy cheese</p>	<ul style="list-style-type: none"> • Popcorn (air-popped) • Rye crisp breads • Whole grain crackers (Triscuits®) • Whole grain pita chips • Soy crisps • Brown rice cakes 	<ul style="list-style-type: none"> • Stevia • Monk fruit extract • Dried, unsweetened fruit such as dates, apricots, figs 	<p>Cooking ingredients: No-salt-added canned diced tomatoes, low-sodium or no-salt-added tomato sauce, vinegar, salsa, dried herbs and spices and salt-free blends, fresh herbs, cocoa powder (unsweetened), lemon and lime juice, broth (low-sodium)</p> <p>Beverages: Seltzer water, unsweetened tea</p>



Healthy Eating Tip

HEALTHY FATS: Whenever possible choose whole food forms of fat: nuts, seeds, avocados, or olives over processed oils.

PROTEIN	DAIRY	CHIPS/SNACKS/ SWEETS	SWEETENERS	OTHER
<p>Limit to 3 ounces per meal (size of a deck of cards or smart phone)</p> <p>All fresh seafood: Wild salmon, tuna, trout, crab, shrimp</p> <p>Canned seafood packed in water: Tuna, wild salmon, sardines</p> <p>Lean meat: Skinless, white poultry, grass fed beef such flank, roast, round, sirloin, wild game, pork such as tenderloin, nitrate/nitrite free lean cold cuts such as turkey breast, chicken breast, ham</p> <p>Eggs: Limit to 3 yolks per week</p> <p>Cheese: Limit to 1 ounce per day</p>	<p>Recommended: 2 cups per day if not using dairy substitutes</p> <ul style="list-style-type: none"> • Skim milk • 1% milk • Nonfat yogurt • Low fat yogurt <p>Limit due to sodium content: Vegan cheese</p> <p>Limit portion to a light topping on food: Cheese</p>	<p>Chips, snacks, baked: Chips, wheat crackers, pretzels, white rice cakes, graham crackers</p> <p>Sweets: 70% cocoa or higher dark chocolate when limited to 1 ounce, fruit juice bar, fat free pudding, sorbet</p>	<ul style="list-style-type: none"> • Honey • Natural maple syrup • Agave nectar 	<ul style="list-style-type: none"> • Ketchup • Mustard • Soy sauce (low-sodium) • Tabasco® sauce • Worcestershire® sauce <p>Limit to 1 serving per day for women, 2 servings per day for men:</p> <ul style="list-style-type: none"> • Beer (12 ounce serving) • Wine (6 ounce serving)

PROTEIN	DAIRY & DAIRY SUBSTITUTES	CHIPS/SNACKS/ SWEETS	SWEETENERS	OTHER
<p>Canned seafood packed in oil: Anchovies, tuna, sardines, salmon, herring</p> <p>Fatty cuts of meat: Beef such as Porterhouse, prime rib, ribeye, dark meat poultry with the skin, hot dogs, lunch meat, pork such as bacon, ribs, sausage, etc, high fat cold cuts that contain nitrate/nitrites such as salami, pepperoni, bologna</p>	<ul style="list-style-type: none"> • Coconut milk • Whole milk • Full fat yogurt • Kefir 	<p>Chips, snacks, fried: Potato chips, tortilla chips, corn chips</p> <p>Crackers: Saltines, oyster, buttered type, made with enriched flour</p> <p>Sweets: Milk chocolate, soda, sweet tea</p>	<ul style="list-style-type: none"> • Sugar/brown sugar • Corn syrup • High fructose corn syrup • Malt syrup • Powdered sugar • Invert sugar • Molasses 	<ul style="list-style-type: none"> • Salt • Creamer, powdered and liquid • Whipped topping

About El Camino Health

El Camino Health provides a personalized healthcare experience at two not-for-profit hospitals as well as primary care, multi-specialty care, and urgent care locations across Santa Clara County.

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Mountain View Campus

2500 Grant Road
Mountain View, CA 94040



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