## Multidisciplinary CHF Clinical Pathway/Care Plan

**ValleyCare Health System**

**Addressograph**

### Outcomes/Goals
- **Date**: Day 1 / Admission
  - CHF Admit Orders provided to Physician
  - Reconciled home medication list
- **Date**: Day 2
  - CHF Education Folder Provided (Core Measure)
  - Smoking Cessation Education Provided (with history) (Core Measure)
  - Has LV Function been assessed?
    - Yes – EF% _________
    - No – Ask MD for Echo order
  - LV Function assessed
    - If LV Function is not assessed, reason is documented (Core Measure)
- **Date**: Day 3
  - Weight/Edema down
  - Respiratory status improved
  - CHF Education Folder Provided (if not already done)
  - Smoking Cessation Education Provided (if not already done)
- **Date**: Day 4 and Discharge
  - LV Function assessed
    - If LV Function is not assessed, reason is documented (if not already done)
  - ACE Inhibitor/ARB for LVSD
    - If ACE and/or ARB are not prescribed, reason is documented
  - Smoking Cessation Education Provided (if not already done)

### Diagnostic/Assessment
- **Date**: Day 1 / Admission
  - Weight documented in kg
  - Height documented in cm
  - LABS:
    - BNP
    - BMP
    - Cardiac Profile
  - DIAGNOSTIC TESTING:
    - CXR
    - EKG
- **Date**: Day 2
  - Daily weight documented in kg
  - LABS:
    - BNP
    - BMP
  - DIAGNOSTIC TESTING:
    - Echo done –
      - Ejection Fraction _________%
    - EF not assessed, reason is documented
  - IF NOT ALREADY DOCUMENTED:
    - Echo done –
      - Ejection Fraction _________%
    - EF not assessed, reason is documented
- **Date**: Day 3
  - Daily weight documented in kg
  - LABS:
    - BNP
    - BMP
  - DIAGNOSTIC TESTING:
    - IF NOT ALREADY DOCUMENTED:
      - Echo done –
        - Ejection Fraction _________%
      - EF not assessed, reason is documented
- **Date**: Day 4 and Discharge
  - Daily weight documented in kg
  - LABS:
    - BNP
    - BMP
  - DIAGNOSTIC TESTING:
    - IF NOT ALREADY DOCUMENTED:
      - Echo done –
        - Ejection Fraction _________%
      - EF not assessed, reason is documented

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6/2010
### Multidisciplinary CHF Clinical Pathway/Care Plan

**Activity**

- **Day 1 / Admission**
  - As per MD order:
    - Bedrest
    - Bedrest with BSC privileges
    - OOB in chair for meals
    - Ambulate 3x/day

- **Day 2**
  - Increase activity as tolerated:
    - Bedrest with BSC privileges
    - OOB in chair for meals
    - Ambulate 3x/day
    - PT evaluation if needed

- **Day 3**
  - Increase activity as tolerated:
    - Bedrest with BSC privileges
    - OOB in chair for meals
    - Ambulate 3x/day
    - PT if needed

- **Day 4 and Discharge**
  - Patient tolerating baseline activity level

**Nutrition**

- **Day 1 / Admission**
  - 2 GM Na Diet
  - Other ______________________
  - Intake ≥ 50% of meals

- **Day 2**
  - 2 GM Na Diet
  - Other ______________________
  - Intake ≥ 75% of meals

- **Day 3**
  - 2 GM Na Diet
  - Other ______________________
  - Intake ≥ 75% of meals

**Therapeutics and Medications**

- **Day 1 / Admission**
  - Strict I&O with shift total & 24 hour total documented
  - Instructed patient on I&O and need to save urine
  - Vital signs every 4 hours
  - Telemetry as ordered
  - Maintain O2 to keep sats > 92% as indicated
  - IV diuretics
  - Medications per Core Measures:
    - ACE Inhibitors/ARB (If EF < 40%)
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide
    - Beta Blockers
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide

- **Day 2**
  - Strict I&O with shift total, 24 hour total, and running balance documented
  - Vital signs every 4 hours
  - Maintain O2 to keep sats > 92% as indicated
  - IV diuretics
  - Medications (if not already addressed)
    - ACE Inhibitors/ARB (If EF < 40%)
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide
    - Beta Blockers
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide

- **Day 3**
  - Strict I&O with shift total, 24 hour total, and running balance documented
  - Pulse ox check on room air and document on the graphics
  - IV diuretics as ordered; consider changing to PO
  - Medications (if not already addressed)
    - ACE Inhibitors/ARB (If EF < 40%)
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide
    - Beta Blockers
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide

- **Day 4 and Discharge**
  - Strict I&O with shift total, 24 hour total, and running balance documented
  - Discharge Medications to Include: (if not already addressed)
    - ACE Inhibitors/ARB (If EF < 40%)
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide
    - Beta Blockers
      - Yes
      - No: If no, what is the reason?
      - If no reason is listed, MD asked to provide
### Patient Education
Document the patient’s understanding of teaching on the Education Record in the Plan of Care

- **Given Heart Failure Folder:** With documentation placed in the chart via Krames and page 2 of the discharge instructions (Core Measure)

- **Smoking Cessation Education Provided (with history)** (Core Measure)

Provide teaching for:
- Medications
- Activity
- Teach Back Questions from heart failure folder
- Diuretic name
- Weighs daily
- Low sodium diet
- Signs and symptoms to call MD
- Review HF Zones

Provide teaching for: (if not already done)
- Medications
- Activity
- To anticipate MD follow up appt within 7 days of discharge

### Continuity of Care
- Multidisciplinary Admission Form Completed

Consults Triggered and Notified:
- Social Services x 3353
- PT/OT (MD order)
- Wound Nurse x 5670
- Nutrition Services x 7136

Other Consults:
- Cardiac Rehab x 3619

Confirm consults have seen patient
- Social Services x 3353
- PT/OT (MD order)
- Wound Nurse x 5670
- Nutrition Services x 7136

Other Consults:
- Cardiac Rehab

Confirm consults have seen patient
- Social Services x 3353
- PT/OT (MD order)
- Wound Nurse x 5670
- Nutrition Services x 7136

### Progressing on Path
Prior to Midnight, did the patient meet the pathway for the day?
- Yes
- No, why not?

Prior to Midnight, did the patient meet the pathway for the day?
- Yes
- No, why not?

Prior to Midnight, did the patient meet the pathway for the day?
- Yes
- No, why not?

Prior to Midnight, did the patient meet the pathway for the day?
- Yes
- No, why not?

Was the patient discharged on day 4?
- Yes
- No, why not? Start Plan of Care

### Discharge Finalized:
- Home
- Home Health
- SNF
- Legends
- ECF
- Acute Rehab
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