# CARE PATH: *Symptoms of Congestive Heart Failure (CHF)*

**Symptoms or Signs of CHF in a resident with known CHF or Risk Factors for CHF ***

- Unrelieved shortness of breath or new shortness of breath at rest
- Unrelieved or new chest pain
- Wheezing or chest tightness at rest
- Inability to sleep without sitting up
- Inability to stand without severe dizziness or light headedness
- Weight gain of > 5 lbs. in 3 days
- Worsening edema

→ **Take Vital Signs**

- Temperature
- BP, Pulse
- Apical heart rate
- Respirations
- Oxygen saturation
- Finger stick glucose (diabetics)

**Vital Sign Criteria**
**(Any Met?)**

- Temp > 102°F (> 38.9°C)
- Apical heart rate > 100 or < 50?
- Respitory rate > 28/min?
- BP < 90 systolic?
- Oxygen saturation < 90%?
- Finger stick glucose < 70 or >400?

or

New or worsening chest pain?

**YES** → **Notify MD/NP/PA Immediately**

**NO** ↓

**Consider Contacting MD/NP/PA for Orders for Lab Testing**

- Portable chest X-ray
- Blood work
  - Complete Blood Count
  - Basic Metabolic Panel
- EKG (if available)

**Evaluate Lab Results and Re-assess**

- Results of chest X-ray suggestive of CHF or pneumonia?
- Critical values in blood count or metabolic panel?
- EKG shows new changes suggestive of an acute MI or arrhythmia?
- Worsening clinical condition?

**YES** → **Consider Transfer to Acute Care Facility**

**NO** →

**Manage in Facility - Options**

- Monitor vital signs q 4-8 hours, and urine output q24
- Oxygen supplementation as indicated
- Contact MD/NP/PA to consider
  - Initiating or increasing diuretic dose
  - Monitor electrolytes & kidney function
  - Initiating or modifying other cardiovascular medications

**NOTIFY MD/NP/PA if any criteria for transfer met**

INTERACT II
Interventions to Reduce Acute Care Transfers

* Risk Factors for CHF: Hypertension, Diabetes, Coronary Artery Disease, Valvular Heart Disease (e.g. aortic stenosis)

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