



Grey Bruce Health Network

## CONGESTIVE HEART FAILURE CLINICAL PATHWAY ACUTE STAGE

GREY BRUCE HEALTH SERVICES

- Lion's Head  
  Markdale  
  Meaford  
 Southampton  
  Tobermory  
  Wiarton

PATIENT ID \_\_\_\_\_

COMORBID CONDITIONS: diabetes

PROCESS	PHASE 1 (Approximately 2 days)	DATE July 4/06			DATE July 5/06				
		INITIAL	DATE	D	E	N	D	E	N
<b>PATIENT OUTCOMES*</b>	IMPROVEMENT OF OXYGENATION - <5L O <sub>2</sub> REQUIRED BY PRONG; 35% BY MASK	BJA	July 4						
	WEIGHT DECREASED SINCE ADMISSION	BJA	July 4						
	RESPIRATORY RATE <30	BJA	July 5						
	IMPROVEMENT OF CRACKLES IN LUNGS	MJA	July 5						
	TOLERATES ACTIVITY LEVEL 2	BJA	July 5						
	ABSENCE OF UNSTABLE ARRHYTHMIAS	MJA	July 4						
	ABSENCE OF CHEST PAIN	MJA	July 4						
	PATIENT REPORTS IMPROVEMENT OF DYSPNEA	MJA	July 5						
<b>CERNER ORDER</b>		CONGESTIVE HEART FAILURE CLINICAL PATHWAY							
<b>ASSESSMENT (OBSERVATIONS/ MEASUREMENTS/ ELIMINATION)</b>	CARDIAC MONITOR IF ORDERED								
	CHEST ASSESSMENT								
	VITALS INCLUDING O <sub>2</sub> SATS Q4H								
	MONITOR INTAKE AND OUTPUT (24 HOURS)								
	PERIPHERAL EDEMA (SEE CHART BELOW)								
	DAILY WEIGHT, DISCUSS WITH PATIENT - DOCUMENTED BY NURSE AND PATIENT								
	ASSESS ANXIETY AND INTERVENE IF NECESSARY								
	OTHER:								

ASSESSMENT OF PITTING EDEMA			
2mm or less = 1 + Edema	2-4mm = 2 + Edema	4-6mm = 3 + Edema	6-8mm = 4 + Edema
✓ Slight pitting ✓ No visible distortion ✓ Disappears rapidly	✓ Somewhat deeper pit ✓ No readably detectable distortion ✓ Disappears in 10-15 seconds (2-4 mm indent)	✓ Pit is noticeably deep ✓ May last more than 1 minute ✓ Dependent extremity looks fuller and swollen (4-6mm)	✓ Pit is very deep ✓ Lasts as long as 2-5 minutes ✓ Dependent extremity is grossly distorted (6-8mm)

*ALL NON-SHADED BOXES TO BE INITIALLED UPON COMPLETION OR MARKED N/A AND INITIALLED*

*Assessment Chart for Pitting Edema adapted from the Guelph General Hospital Congestive Heart Failure Pathway*

PROCESS	PHASE 1 (Approximately 2 days)	DATE July 7/06			DATE July 5/06		
		D	E	N	D	E	N
CONSULTS	2D ECHOCARDIOGRAM IF ORDERED	Done	N/A				
	DIETITIAN	Done	N/A				
	CCAC IF NECESSARY	Done	N/A				
	PHARMACIST IF ORDERED	N/A					
	OTHER:						
DIAGNOSTICS/ LABORATORY	ECG	Done	N/A	N/A	N/A	N/A	N/A
	BLOOD WORK AS ORDERED	Done	N/A	N/A	Done	N/A	N/A
	CARDIAC MARKERS	Done	N/A	N/A	N/A	N/A	N/A
	CHEST X-RAY ON ADMISSION	Done	N/A				
	OTHER:						
MEDICATIONS	SEE MAR SHEET	Done	N/A	N/A	Done	N/A	N/A
TREATMENTS/ INTERVENTIONS	INTERMITTENT SET	Done	N/A	N/A	Done	N/A	N/A
	O <sub>2</sub> AT <u>3</u> L PRN TO KEEP 85-95%	Done	N/A	N/A	Done	N/A	N/A
	OTHER:						
NUTRITION	HEALTHY HEART DIET, 2-3 gm Na	Done	N/A	N/A	Done	N/A	N/A
	SPECIAL DIET IF REQUIRED: <u>Diabetic</u>	Done	N/A	N/A	Done	N/A	N/A
MOBILITY/ACTIVITY *	UP TO ACTIVITY LEVEL 2 AS TOLERATED BY PATIENT		Done	N/A	Done	N/A	N/A
	ACTIVITY LEVEL 1:	BED REST	Done	N/A	N/A	Done	N/A
		BED SIDE COMMUNE PRIVILEGE IF STABLE	Done	N/A	N/A	Done	N/A
		FEED SELF	Done	N/A	N/A	Done	N/A
		ASSISTED BATH	Done	N/A	N/A	Done	N/A
		ANKLE / FOOT EXERCISES	Done	N/A	N/A	Done	N/A
		DEEP BREATHING / COUGHING / CALF PUMPING	Done	N/A	N/A	Done	N/A
	ACTIVITY LEVEL 2:	SIT UP FOR 20 MIN (TID)	Done	N/A	N/A	Done	N/A
		BATHROOM PRIVILEGES	Done	N/A	N/A	Done	N/A
PSYCHOSOCIAL SUPPORT/ EDUCATION *	ORIENTATION TO UNIT AND PROCEDURES		Done	N/A	N/A		
	INTRODUCE PATIENT PATHWAY		Done	N/A			
	BEGIN TEACHING CHECKLIST		Done	N/A	Done	N/A	N/A
	GIVE PATIENT EDUCATION MATERIALS TO PATIENT		Done	N/A			
	ENCOURAGE PATIENT AND FAMILY TO ASK QUESTIONS		Done	N/A	Done	N/A	N/A
DISCHARGE PLANNING *	DISCUSS DISCHARGE PLAN WITH PATIENT AND FAMILY		Done	N/A	Done	N/A	N/A
	ASSESS FOR CCAC		Done	N/A			
	ASSESS DISCHARGE CRITERIA DAILY		Done	N/A	Done	N/A	N/A

ALL NON-SHADED BOXES TO BE INITIALED UPON COMPLETION OR MARKED N/A AND INITIALED  
 Activity Levels (1-4) adapted from the Guelph General Hospital AMI Activity Level Guideline