

Your professional health care staff

Nurse: _____

Team Leader: _____

Home Health Aide: _____

Therapist: _____

Social Worker: _____

Important Phone Numbers *(Patient to complete)*



Ambulance/Police/Fire

911 or _____



Hospital



Doctor



Doctor



Non-Emergency Transportation



Pharmacy



Poison Control

911 or _____



HME (Oxygen)



Electric Company



Phone Company



Water Company



Family



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Rev. 11/02

Congestive Heart Failure Patient Education Guide

STATEMENT OF CONFIDENTIALITY

This booklet may contain protected health information. Persons other than you and your health care providers must have your permission to view this booklet.

Understanding Heart Failure

This booklet is designed to help you, your family and caregiver understand your heart condition, Congestive Heart Failure (CHF).

It is important that you, your family/caregivers and your health care providers (doctors, nurses, pharmacist, and other health care professionals) work as a team and be involved in managing your condition. By working with your health care team and following a few simple guidelines, you may live longer and improve your quality of life. The more you know about your disease, the more you can be involved in your care and treatment.

For most patients, heart failure is a chronic condition. This means it can't be cured. However, it is a condition that can be managed and treated. By working with your health care team, you can make the best choices and set your goals so that your life remains interesting and enjoyable.

When you are able to recognize the common early symptoms of your condition, you can keep your doctors and nurses updated on your condition, receive appropriate and timely treatment and help prevent serious complications.

Keep this booklet as a resource for yourself, your family and caregivers. It contains numerous forms that can be used to write down your weight, vital signs, medicines and other important information.

As the home health nurse instructs you in the information contained in this booklet, please ask questions during their visits or feel free to call our office if something is unclear or with your questions and/or concerns.

We look forward to being a member of your health care team!

The Professional Home Care Staff

PATIENT SCHEDULE WORKSHEET

MONTH: _____

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

MONTH: _____

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

PATIENT SCHEDULE WORKSHEET

MONTH: _____

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

MONTH: _____

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

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Purpose: This booklet is for informational purposes only and is not designed to replace your physician's advice or treatments. The information contained in this booklet may change, as practice guidelines change.

Disclaimer: We have attempted to make the information contained in this booklet as accurate as possible; however, MedForms makes no guarantees as to its accuracy and assumes no liability for the use of its forms and publications.

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Editor: Connie King-Sauer, RN, Medical Forms Management, Inc.

SECTION II. The Disease Process

So, you have congestive heart failure. You are not alone. An estimated 4.8 million Americans have congestive heart failure, making it a major chronic condition in our country. Each year, 400,000 new cases of congestive heart failure are diagnosed. That number continues to grow as the number of older Americans increase every year.

Congestive heart failure is the most common reason for hospitalization in patients 65 years of age and older. One in five of all discharged patients age 65 and older have congestive heart failure listed as their primary or secondary diagnosis.

Reports indicate that congestive heart failure occurs just as frequently in men as women; occurs twice as frequently in people with high blood pressure (*hypertension*); and five times more frequently in persons who have had a heart attack (*myocardial infarction*).

WHAT IS HEART FAILURE?

Just the name "heart failure" sounds frightening, doesn't it? Heart failure does not mean the heart has "failed" or stopped beating. Heart failure means that your heart's pumping power is weaker than normal (not pumping as well as it should). Although your heart still beats, a weakened heart pumps too little blood rich with oxygen and nutrients to meet the body's needs. Walking, carrying groceries or climbing steps can be difficult. You may feel short of breath, which means the body is not getting all the oxygen it needs.

CAUSES OF HEART FAILURE

The most common causes of heart failure are listed below.

- Coronary artery disease
- Past heart attack (*myocardial infarction*)
- Heart muscle disease (*cardiomyopathy*)
- High blood pressure (*hypertension*)
- Heart valve disease
- Abnormal heart rhythms (*beats too fast, too slow and/or irregular*)
- Heart defects from birth
- Diabetes
- Severe anemia
- Overactive thyroid
- Severe lung disease

PATIENT/CAREGIVER EDUCATION/TEACHING CHECKLIST

PATIENT NAME: _____ PATIENT ID: _____

Check what was taught and who received instruction patient or caregiver (CG). If both patient and caregiver received instruction, check both areas. Record date instruction was provided. Write initials of staff member providing instruction.

	PATIENT	CAREGIVER	DATE	INITIALS
1. What is congestive heart failure				
2. Causes of heart failure				
3. How your heart works				
4. Symptoms of heart failure				
5. Medications				
6. Diet/Nutrition				
7. Fluid restrictions				
8. Oxygen therapy				
9. Daily activities/exercise				
10. Importance of rest				
11. Ways to conserve energy				
12. Lifestyle changes				
13. Managing stress				
14. Choosing the right clothes				
15. Patient responsibilities				
16. Caregiver responsibilities				
17. Handling emergencies				
18. Medical intervention/followup				
19. Other:				

Item Number	Comments

SIGNATURE TITLE INITIAL	SIGNATURE TITLE INITIAL	SIGNATURE TITLE INITIAL
-------------------------------	-------------------------------	-------------------------------

_____	_____	_____
_____	_____	_____

THREE DAY DIET DIARY

DAILY: ___ Milk ___ Fruit ___ Bread ___ Meat ___ Vegetable ___ Fat

Date: _____ Was this a usual day? _____

BREAKFAST	LUNCH	DINNER	SNACK
___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____ Time: _____ Time: _____

Date: _____ Was this a usual day? _____

BREAKFAST	LUNCH	DINNER	SNACK
___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____ Time: _____ Time: _____

Date: _____ Was this a usual day? _____

BREAKFAST	LUNCH	DINNER	SNACK
___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free Time: _____ Time: _____ Time: _____

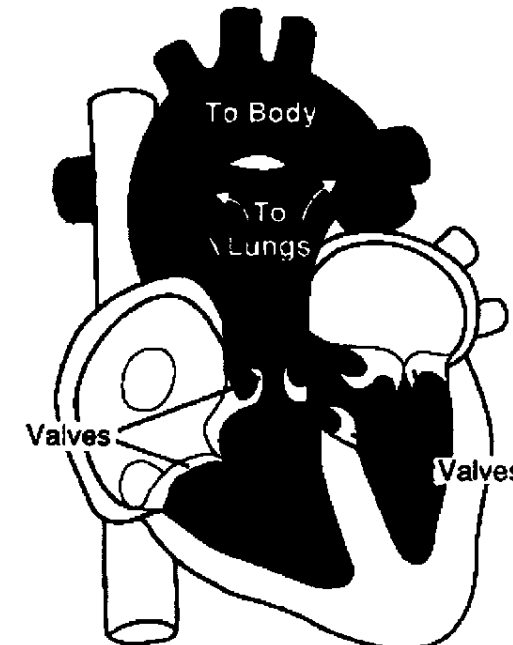
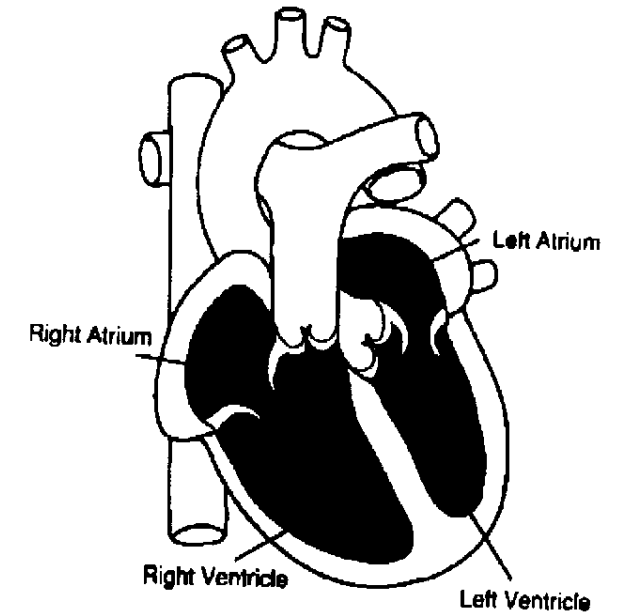
While it is important to know the actual cause of your heart failure, it is more important to know what can be done to improve your condition since your heart has decreased "pumping power."

HOW YOUR HEART WORKS

Understanding how your heart works will help you understand your disease and why your health care team has developed your specific plan of treatment.

Blood moves through four compartments or chambers (*two atriums and two ventricles*) in your heart before circulating through your body. (See picture on right below).

With each heartbeat, blood returns from the body through the veins, enters one of the chambers (*right atrium*) and moves through the valve into the right chamber (*ventricle*) below it. At the same time, blood from the lungs that is rich in oxygen enters the upper chamber (*left atrium*) on the left side of the heart. From the left upper chamber, the blood passes through the valve into the left lower chamber (*ventricle*).



Next, the right lower chamber (*ventricle*) contracts after getting blood from the right upper chamber (*atrium*), sending blood to the lungs to get oxygen. (See picture on left.)

At the same time, the left lower chamber (*ventricle*) contracts after getting blood from the left upper chamber (*atrium*). When the left lower chamber contracts, it pumps blood through the aorta (*blood vessel marked "to body" in picture on left*) to arteries in all parts of the body.

The heart has four valves. Two of the valves prevent blood from flowing back between the upper and lower chambers (*atria and ventricles*). The other two valves prevent blood from flowing backward from the arteries into the lower chambers of the heart (*ventricles*).

Normally, the left ventricle pumps one-half or more of the blood in it with each beat. With heart failure, the left ventricle cannot contract strongly enough, pumping two-fifths less of the blood in it with each beat.

SYMPTOMS OF HEART FAILURE



Usually, by the time heart failure has been diagnosed, the heart has already, little by little, lost some of its pumping capacity. When a heart pumps with less power and force than normal, it cannot pump enough blood to organs and muscles; therefore, your body cannot do as much. Blood and fluids may "pool" in your lungs and this can cause breathing problems, especially when you are laying down flat. Fluids can collect in other parts of the body, as well.

Common symptoms of heart failure are as follows:

- Difficulty breathing (shortness of breath), especially when lying down flat in bed or with exertion; may need to prop up the upper body and head on two or more pillows;
- Waking up breathless at night; wake up tired or feeling anxious or restless;
- Frequent, dry, hacking cough, especially when lying down; cough may produce white or blood-tinged sputum;
- Fatigue, weakness;
- Dizziness or fainting;
- Swollen feet, ankles, and legs (edema) or weight gain; shoes may feel tight;
- Nausea, with abdominal swelling and pain, and tenderness; feeling of being full;
- Confusion, impaired thinking, memory loss and feelings of disorientation;
- Increased heart rate; heart palpitations; a feeling the heart is racing or throbbing.

THREE DAY DIET DIARY

DAILY: ___ Milk ___ Fruit ___ Bread ___ Meat ___ Vegetable ___ Fat

Date: _____ Was this a usual day? _____

BREAKFAST	LUNCH	DINNER	SNACK
___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free
Time: _____	Time: _____	Time: _____	Time: _____
			Time: _____
			Time: _____

Date: _____ Was this a usual day? _____

BREAKFAST	LUNCH	DINNER	SNACK
___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free
Time: _____	Time: _____	Time: _____	Time: _____
			Time: _____
			Time: _____

Date: _____ Was this a usual day? _____

BREAKFAST	LUNCH	DINNER	SNACK
___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free	___ Meat ___ Fruit ___ Fat ___ Vegetable ___ Bread ___ Milk ___ Free
Time: _____	Time: _____	Time: _____	Time: _____
			Time: _____
			Time: _____

FLUID/LIQUID INTAKE DIARY

PATIENT NAME: _____ PATIENT ID: _____

FLUIDS RESTRICTED TO _____ DAILY ONE (1) OUNCE = 30 cc

Date: _____ Total Fluid/Liquid Intake (add breakfast, lunch, dinner & snacks): _____

BREAKFAST	LUNCH	DINNER	SNACK
Record Amount Below:	Record Amount Below:	Record Amount Below:	Record Amount Below: Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____
Total Amount: _____	Total Amount: _____	Total Amount: _____	Total Amount: _____

Date: _____ Total Fluid/Liquid Intake (add breakfast, lunch, dinner & snacks): _____

BREAKFAST	LUNCH	DINNER	SNACK
Record Amount Below:	Record Amount Below:	Record Amount Below:	Record Amount Below: Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____
Total Amount: _____	Total Amount: _____	Total Amount: _____	Total Amount: _____

Date: _____ Total Fluid/Liquid Intake (add breakfast, lunch, dinner & snacks): _____

BREAKFAST	LUNCH	DINNER	SNACK
Record Amount Below:	Record Amount Below:	Record Amount Below:	Record Amount Below: Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____ Time: _____ Amount: _____
Total Amount: _____	Total Amount: _____	Total Amount: _____	Total Amount: _____

SECTION III. Managing Heart Failure

Managing heart failure will reduce symptoms and improve how you feel. It is very important to follow the instructions given to you by your doctor and other members of your health care team.

An episode of CHF can be brought on by eating too much salt, not taking your medicines correctly, high blood pressure, not getting enough rest or exercise, and/or drinking large amounts of liquids. Therefore, medication(s), diet, daily activities, exercise, lifestyle, health habits and family support are all important parts of your heart failure management/care plan.

MEDICATIONS



You will need to take medicine every day. This is extremely important to treating heart failure. You may be on one medication or several medicines. Remember, sometimes it may take a few days or even weeks to find the right medication, the right dose, and the best time of the day to take the medication, so that it works best for you.

Any medication may cause an unplanned result, so always report any side effect to your health care provider since they will know what to do about the side effects. Keep in mind that if you have side effects from medication, there is usually another medication that can be used to treat your heart failure.

The following medications are frequently ordered in the treatment of heart failure:

- **ACE Inhibitors** - to make it easier for the heart to pump;
- **Diuretics** (water-pills) - to help remove the excess water and salt from the body;
- **Digitalis** - to strengthen each heartbeat, allowing more blood to be pumped.

If you have other health problems or heart problems, your doctor may also order other medications. For example, you may have to take blood pressure medicine if you have high blood pressure; or Nitroglycerin tablets if you have chest pain (angina).

NOTE: It is important to take Nitroglycerin as ordered (generally one every five minutes if needed until you have taken 3 tablets. Then if chest pain does not go away, call an ambulance right away.

MEDICATION SCHEDULE WORKSHEET

NAME/DOSE	Morning				Afternoon				Evening				Bedtime			Date			
	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8		9	10	11

Write the name/dose of each medicine(s) in the name/dose section. Place an X in the box under the time you took the medicine.

Sometimes diuretics may also cause the following symptoms:

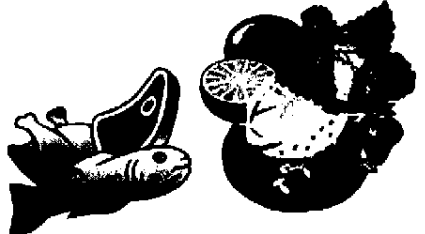
- Leg cramps,
- Dizziness or lightheadedness,
- Urinary incontinence (accidental leakage of urine),
- Gout (a type of arthritis),
- Skin rash.

Check box below if patient is currently taking a **Diuretic**; list name of drug, dose, and frequency.

Name/Dose: _____ Frequency: _____

Foods high in potassium include:

- Bananas, strawberries, watermelon, cantaloupe, oranges
- Raisins, prunes, apricots, dates
- Fresh beets, greens, spinach, peas, tomatoes, mushrooms
- Dried beans and peas
- Fresh turkey, fish, and beef
- Fresh orange and grapefruit juice
- Canned grapefruit, prune, apricot juice



Check box below if patient is currently taking a **Potassium Supplement**; list name of drug, dose, and frequency.

Name/Dose: _____ Frequency: _____

Let your doctor or home health nurse know if any of the above symptoms occur. Keep in mind that urinating more often is not considered a side effect of taking diuretics. Frequent urination is the desired result of the diuretic.

DIGITALIS

Digitalis helps the heart pump more effectively. As a result, the drug may help improve your ability to exercise and to perform activities of daily living. The digitalis drugs, Digoxin or Lanoxin are commonly ordered and taken by many heart patients.

While digitalis is safe for most patients, it is possible to get too much. When that occurs, you can have:

- Nausea,
- Loss of appetite,
- Mental confusion,
- Blurred or yellow-colored vision,
- Palpitations (rapid, forceful heartbeat).

If you have any of these side effects, let your doctor or home health nurse know immediately. Don't stop taking your digitalis unless you are advised to do so by your doctor or other health care provider. It is also important to have your blood tested on a regular basis to monitor the level of the medication.

Check box below if patient is currently taking **Digitalis**; list name of drug, dose, and frequency.

Name/Dose: _____ Frequency: _____

HOW DO I KNOW IF THE MEDICATION IS WORKING?

The following are good indicators that your medication is working:

- Ability to walk for a longer time and distance
- Less difficulty breathing
- Able to sleep with fewer pillows
- Does not have to urinate as often through the night
- Swelling of the feet, ankles, legs, and abdomen decreases

MEDICATION SCHEDULE WORKSHEET

	Morning		Afternoon					Evening					Bedtime			Date			
	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
NAME/DOSE																			

Write the name/dose of each medicine(s) in the name/dose section. Place an X in the box under the time you took the medicine.

FOOD & DRUG INTERACTIONS

Circle areas that are potential interactions: Food interactions assessed Patient instruction provided

Take 1 hour before or 2 hours after meals		Take with meals	
Ampicillin	(various brands)	Amoxicillin/clavulanate	(Augmentin)
Astermizole	(Hismanal)	Benzotropine	(Cogentin)
Azithromycin	(Zithromax)	Carbamazepine	(Tegretol, Eptol)
Captopril	(Capoten)	Cefpodoxime	(Vantin)
Didanosine (ddl)	(Videx)	Cefuroxime	(Ceftin)
Indinavir	(Crixivan)	Dexamethasone	(Decadron)
Isoniazid (INH)	(Laniazid)	Erythromycin	(various brands)
Loracarbef	(Lorabid)	Ganciclovir	(Cytovene)
Mercaptopurine (6MTP)	(Purinethol)	Ibuprofen	(Motrin, Advil)
Methotrexate (MTX)	(Rheumatrex)	Iron preparations	(various brands)
Norfloxacin	(Noroxin)	Itraconazole	(Sporonox)
Ofloxacin	(Floxin)	Lithium	(various brands)
Rifampin	(Rifadin, Rimactane)	Nitrofurantoin	(Furadantin, Macrochantin)
Tetracycline	(various brands)	**Phenytoin	** (Dilantin)
Zafirlukast	(Accolate)	Potassium supplements	(various brands)
Zalcitabine (ddC)	(Hivid)	Prednisone/Prednisolone	(Deltasone, Prelone)
Zidovudine (AZT)	(Ritonovir)	Ritonavir	(Norvir)
Do Not Take with Milk or Antacids		Saquinavir	(Invirase)
*Ciprofloxacin	(Cipro)	Theophylline	(Slo-Bid, TheoDur, etc)
Doxycycline	(various brands)	Valproic Acid	(Depakene, Depakote)
Norfloxacin	(Noroxin)	Take 30 minutes to 2 hours before breakfast	
Ofloxacin	(Floxin)	Alendronate (Fosamax)	
*Tetracycline	(various brands)	Avoid Taking with Grapefruit Juice	
Take 30 minutes to 1 hour before meals		Astermizole	(Hismanal)
Cisapride	(Propulsid)	Cyclosporine	(Sandimmune, Neoral)
Metaclopramide	(Reglan)	Terfenadine	(Seldane)
Sucralfate	(Carafate)	Potassium Losing Diuretic - Furosemide (Lasix)	
Anticoagulant - Warfarin (Coumadin)		This diuretic increases the loss of potassium in the urine. If you have not been prescribed a potassium supplement, the foods high in potassium below should be included frequently in your diet. Consult your physician before making marked changes in the diet.	
No alcohol. Keep vitamin K intake consistent (same intake of vegetables as at home). Avoid Vitamin supplements containing vitamin K. If you have not been eating these foods high in vitamin K, do not add more than 2-3 servings per week.		Apricots	Kiwi
Asparagus	Green beans	Artichokes	Melon
Beef liver	Green peas	Bananas	Milk, buttermilk
Broccoli	Green tea	Beans-white, red, lima	Molasses
Brussel sprouts	Kale	Beef	Oranges, orange juice
Cabbage	Lettuce	Beet greens	Peaches
Cauliflower	Potatoes	Black-eyed peas	Prune juice
Cheese	Spinach	Bran cereals	Potatoes, white and sweet
Collard/turnip greens	Soybean oil	Clams	Spinach, Winter Squash
Potassium Sparing Diuretic		Corn	Tomatoes, tomato juice
Aldactone, Dyazide, Maxide, Midamore - Monitor Potassium; avoid salt substitute; may need to limit high Potassium foods (O), banana). The potential for this food/drug interaction is decreased if patient is on concurrent potassium losing diuretic therapy.		Figs, dried	Yogurt
		Fish	
		* Best if taken on an empty stomach.	
		** Oral tube feeding with Osmolite or Isocal may interfere with absorption. Stop tube feedings 2 hrs. before & 2 hrs. after Dilantin.	

MEDICATION SCHEDULES



It is very important for you to take your medication as ordered by your doctor. It is important to have a system set up that will help you remember when to take your medicine, especially if you have to take medication more than once a day. It is important to know which medicines to take each day; what each pill looks like; when to take the medicine; when each medicine was taken; and what to do if you should miss a dose. Your home health nurse will help you or your caregiver set up a system that will work best for you.

MEDICATION SAFETY






It is important to always follow the medication guidelines listed below:

- Ask your doctor or pharmacist about your medicines. Write them all down or take all of your medication bottles with you and show them to your doctor or pharmacist to keep from combining drugs inappropriately. If there are any changes, add them to the list. Follow your doctor's orders for taking all medicines.
- Be sure you understand the name of the medicine, why you are taking it, how to take it, potential side effects, and side effects to report to your healthcare provider.
- Take your medications exactly as ordered/instructed.
- Do not stop or change medicines -- even if you are feeling better.
- Do not reduce the medication dose unless ordered to do so by your doctor.
- Do not skip doses of medication.
- Do not take more medication than is ordered by your doctor.
- Keep your medicines refilled at all times.
- Use a chart or container system (egg carton or med-planner) to help you remember what kind, how much, and when to take medicine.
- Take your medicine with a light on so you can read the label.
- Do not drink alcohol when you are taking medicine.
- Read the medicine labels and keep them in original containers.
- Store medications safely in a cool/dry place according to instructions on the label of the medication.
- If you miss a dose, do not double the next dose later.

SECTION VIII. Medical Intervention/Follow-up

As with any relationship, it is important to be open, honest and communicate with your doctor and home health care nurse.

They will rely on you to follow their recommendations about your medication, diet, exercise, and lifestyle. They will also depend on you to report back on the progress you make as well as any problems you encounter. They will depend on you and/or your family/caregiver for information about your symptoms and any changes in your condition. Your input will effect decisions regarding your treatment.

- Be sure and keep your doctor appointments. The home health nurse is ordered to work with your doctor, not replace him/her. Your doctor is the only one who can make changes in your medication and order tests that may be needed. Make the most of the appointments by asking questions, raising concerns and sharing you observations and feelings with your doctor. 
- It's a good idea to keep a notebook or use this booklet to record changes you have noticed such as swelling, weight gain, or shortness of breath. Let the doctor know when they occurred, what you did about them and whether it worked or not. 
- Prepare a list of questions in advance so you don't forget to ask them. Write down the doctor's response to your questions.
- Don't withhold information that you think would be minor. It may be very important to your treatment and condition.
- Make sure the doctor knows all the medication (prescribed and over the counter) you are taking. 
- Don't leave the doctor's office until you understand all of the doctor's instructions and don't hesitate to call the doctor later if something comes to mind that you forgot to ask or report.

We are a health care team and by working together, we are better able to control your heart failure so you can have a better quality life.

NEXT DOCTOR'S APPOINTMENT: _____ ; _____ ; _____

BLOOD WORK DUE: _____ ; _____ ; _____ ; _____

This makes the heart work harder to pump adequate blood to the body's organs and tissues. High sodium levels also cause the body to retain fluid, which increases the heart's workload.

Your doctor will specify how much salt you can have on a daily basis. Since making the changes in your diet can be confusing and complicated, your home health nurse or dietician can provide you with your specific dietary instructions and counseling.

They can suggest ways to prepare foods and ways to modify your favorite recipes to lower the salt content in your diet. Your current likes and dislikes, and foods that you can afford, should be considered when planning your diet.

You will also need to use food labels to help you limit your salt (sodium) intake to 2,400 milligrams (mg.) or less a day (or whatever your doctor recommends). Remember, a teaspoon of salt contains about 2,400 milligrams of sodium.

Many foods such as frozen or canned foods, cheeses, and processed meats have "hidden" salt. Foods such as canned soups, hot dogs, and salami often have a lot of salt.

Low sodium foods include fresh fruits and vegetables (except celery), most hot cereals, puffed rice or wheat cereal, rice, pasta (noodles, spaghetti, macaroni), and special low salt and salt free foods.

READING FOOD LABELS

According to Food and Drug Administration (FDA) regulations, it is illegal for a company to advertise a food as being "low-salt" or "low-sodium" unless they can prove it. You can help develop a sensible eating plan if you learn to read food labels.

If the label says....	It means that one serving of the product has...
SODIUM	
Sodium free/no sodium	Less than 5 milligrams of sodium and no sodium chloride ingredients
Very low sodium	35 milligrams or less of sodium
Low sodium	140 milligrams or fewer of sodium
Reduced or less sodium	At least 25% less sodium than the regular product

TIPS ON CUTTING DOWN ON SALT

Since you have probably been eating a lot more salt than what you can now have, it is important to start making diet changes now. As a rule, you should avoid any foods that have more than 150-350 milligrams of sodium per serving. There are numerous forms of sodium, so be alert for anything that has the word sodium with it, for example, sodium hydroxide. The following list will assist you in decreasing your intake of table salt (sodium):

- Remove the salt shaker from your eating table. This can reduce your salt intake by up to 30%.
- Remove the salt shaker from the stove and cook without salt. This can reduce your salt intake by another 30%.
- Salt substitutes can be used, but since these contain extra potassium, check with your doctor first on which ones, if any, are appropriate for you.
- Avoid salty seasonings such as bouillon cubes, meat tenderizer, soy sauce, steak sauce, chili sauce, Worcestershire sauce, seasoned salts, etc.
- Use low salt seasonings such as vinegar, herbs and lemon juice.
- Use fresh vegetables and fruits or low-sodium canned and processed foods instead of regular canned fruits and vegetables.
- Use plain or brown rice instead of chicken/meat-flavored rice that come in a packet and have a flavor packet.
- Avoid high-sodium foods such as:
 - buttermilk;
 - canned soups/dry soup mixtures;
 - canned meats and fish (buy water packed tuna or salmon instead);
 - ham, bacon, or sausage;
 - processed meats (deli meats, hot dogs);
 - salted nuts or peanut butter;
 - instant cooked cereals;
 - salted margarine or butter;
 - prepared cornbread, pancake, muffin mixes, etc.;
 - prepackaged frozen dinners with over 400 milligrams of sodium per serving;
 - snack foods like potato chips, pretzels, olives, pickles;
 - cheese (except low sodium or cottage cheese);
 - salad dressings, and;
 - preseasoned mixes for tacos, chili, sauces, gravies, etc.
- Avoid fast foods since most are very high in sodium.
- Avoid headache or heartburn medications that contain sodium (sodium carbonate or sodium bicarbonate).



SECTION VII. Handling Emergencies

A licensed nurse is on call at our agency at all times, and is available after regular office hours to provide necessary care. However, we do not provide emergency care and do not carry medications with us and cannot give anything unless ordered by the physician.

If you have a change in condition, please contact the office during regular office hours if possible, so we can determine if a visit needs to be made and communicate with your physician if necessary.

Even though a sudden change in your symptoms is not expected, if you are tired and short of breath, certain activities may become harder. Notify your doctor and or the home health nurse if any of the following happens:

- Increasing shortness of breath after using measures to relieve it, especially if accompanied by a very fast heartbeat or fever
- Wheezing at night
- Chest pain (usually requires assessment by your doctor)
- Continuing cough
- Coughing of white sputum or blood
- Bluish color under your fingernails and toenails
- Faster heartbeat

If your heart or breathing stops, medical care and treatment will be provided unless you have made an advance directive that lets others know what to do in case of a medical emergency and what lifesaving measures you want taken if you cannot think clearly or speak for yourself. Specific instructions for family members and others may be needed so they will know how to react in a medical emergency.

If you do not have an advance directive, ask your doctor, home health care nurse or lawyer for more information about advance directives. These decisions may be difficult so discuss your medical care and treatment wishes with your family before making an advance directive.

SECTION VI. Monitoring Your Progress

Managing heart failure requires keeping track of symptoms and monitoring how well you follow the instructions of your doctor and other members of your health care team. **YOU** are an important part of the team and are responsible for reporting changes in your health to your doctor and home health nurse.

YOUR RESPONSIBILITIES

As a member of your health care team, you should:

- Monitor your general health and report any changes in how you feel to your doctor or home health care nurse.
- Report any changes in your symptoms.
- Take your medications as prescribed and report any side effects.
- Follow your guidelines for activities and exercise, and report when you are not able to do an exercise or activity easily.
- Follow your prescribed diet.
- Report any sudden weight changes.
- Report swelling/fluid retention (edema). Measure edema in your feet, ankles, and legs by pushing your finger against those areas. If the skin remains indented where your finger was, then you are retaining fluid.



FAMILY/CAREGIVER RESPONSIBILITIES

Your family and/or caregiver is also part of your health care team. Don't hesitate to ask them to help monitor your condition. They should know what new symptoms or changes in symptoms to report to your doctor or home health care nurse.

When you or your family/caregiver call the health care provider's office, make sure to say you are being treated for heart failure; describe your symptoms; tell your health care provider what has already been done to bring relief or comfort; and give the names and amounts of medicines you take.

Alcohol will decrease your heart's ability to contract. If you drink, you should limit yourself to no more than one drink 2-3 times a week or stop completely. One drink means a glass of beer or wine, or a mixed drink with no more than one ounce of alcohol.

Caffeinated beverages such as coffee, black tea and caffeinated soft drinks act as stimulants and can put more stress on the heart. Therefore, beverages with caffeine should be limited or eliminated. Decaffeinated drinks can be used instead; however, juices and water are always better choices.

Check box below if patient is currently on a **therapeutic diet**, i.e., salt (sodium) restricted diet; list the specific diet and restrictions.

DIET: _____

WATCHING FLUID INTAKE

Your doctor may have you limit the amount of liquids you take in if your body is retaining fluid. Sometimes the diuretic will cause a dry mouth and patients will tend to drink more liquids. You do not need to replace the fluid the diuretics get rid of. If you experience a dry mouth, you might find it helpful to suck on a small amount of sugar-free candy or chew gum to help moisten the mouth.

Talk to your doctor in order to determine how much fluid you should have every day. While many doctors recommend 8 cups (that is 64 ounces) of liquids a day, you need to determine if you should limit your fluid intake to 8 cups a day, or should you have more or less fluids than 8 cups.

If you must limit your fluid intake, keep a record of all the water, ice, coffee, milk, soup, tea, juice, and soft drinks you take in. Some foods, such as yogurt, gelatin, ice cream and pudding also are counted as fluid intake.

Check the size of your glasses and bowls by filling each with water, then pouring the water into a measuring cup. Remember that one (1) cup equals eight (8) ounces (one ounce equals 30 cc). You can record your liquid intake on a sheet of paper to keep up with it on a daily basis. A form is included in the back of this booklet that may be copied to assist you.

Check box below if patient is currently on **restricted fluids**; list the amount of fluids allowed in a 24 hour period.

Fluids limited to _____ **a day.**


EATING OUT

If you have heart failure, you can still go out to eat or have food brought into your home (if you are homebound). However, you must plan ahead in order to select a restaurant that will cook your meal to order (avoid a buffet or fast foods).

Many restaurants offer foods low in sodium (or fat) or will cook your selection limiting salt (or fat) in its preparation. Read the menu carefully and try to select foods that are steamed, baked, roasted, poached, grilled, broiled, or garden fresh. Many restaurants include a heart health/heart smart logo or symbol by selections on their menus that are low in fat and sodium.

Don't be afraid to ask how the food is cooked and what seasonings are used. Ask them to substitute a healthy food (baked potato, unsalted vegetable) for foods such as french fries or onion rings. Ask to have your salad dressings on the side since you can limit how much you put on the salad. Select fresh fruit, sherbet, gelatin or angel food cake instead of creamy, fatty desserts.

WATCHING YOUR WEIGHT



You will need to watch your weight. If you do not have an accurate bathroom scales, you will need to get one. Weigh every morning after urinating, but before breakfast or dressing.

As a rule of thumb, if you gain two (2) pounds overnight or five (5) pounds or more in a week, call the doctor and/or your home health nurse immediately. The weight gain might mean that your body is retaining fluid. Your doctor or nurse may give you other guidelines as to when to call, such as a weight gain of 2 or more pounds. If they don't tell you, ASK!

Report weight gain of _____ pounds in _____ (specify time period).

MANAGING STRESS

Since emotional stress and anxiety make the heart work harder, people with heart failure need to keep stress under control in their lives.

You can reduce stress by the following:

- Talking with others about your concerns and stresses, and ask them for their support.
- Sit quietly for 15-20 minutes each day. Take deep breaths and think about a peaceful scene. Consider music therapy or meditation.
- You don't have to solve all of life's problems, so learn to accept the things you cannot change.
- If you feel angry, count to 10 before answering or responding.
- Since smoking, drinking, overeating, drugs or caffeine make your condition worse, don't use them as a way to cope.
- Look for the good in any situation.
- Exercise regularly within your guidelines.
- Avoid things that you know will upset you.
- If you have a problem, try to plan a productive solution to the problem.
- Don't be afraid to say NO!
- If possible, join a support group.
- If you can't cope on your own, seek help.

SELECTING THE RIGHT CLOTHES

It is important not to slow blood flow to the legs and cause clots, so you should avoid tight stockings or socks (like thigh-high or knee-high hose).










Avoid temperature extremes as much as possible since the body must work harder to keep its temperature normal when it's too hot or cold. A scarf around your nose and mouth can help warm the air you breathe in winter. Avoid being outside during the hottest part of the day.

SECTION V. Lifestyle Changes

You can slow the progression of heart failure, alleviate symptoms and improve your everyday life when you follow recommendations about your diet, medications and other habits. A change in your normal routine may have to occur but the fact is, by doing so, people with mild to moderate heart failure can often lead nearly normal lives. As you learn to live with heart failure, you may discover new pleasures and satisfactions.

Lifestyle changes include the following:

-  • Stop smoking
- Lose weight
-  • Avoid alcohol or limit yourself to one drink 2 or 3 times a week
- Avoid or limit caffeine
-  • Eat a low-sodium, low-fat diet
- Exercise (on your own or in a structured rehab program)
-  • Reduce stress
- Keep track of your symptoms and report changes to your doctor
-  • Avoid exercise that is not within your exercise guidelines
-  • Avoid coming in contact with people who have colds
- Get a flu and pneumonia shot
-  • See the doctor on a regular basis

OXYGEN THERAPY



Your doctor may order oxygen for you as part of your treatment. The additional amount of oxygen is delivered to your lungs and can help prevent weakness, shortness of breath, dizziness and anxiety which may result when your body does not receive a sufficient amount of oxygen. Keep the following principles and precautions in mind at all times:

- Oxygen is a drug and is only effective and safe for use in a prescribed amount.
- Oxygen is supplemental and not considered to be life supporting.
- Substances that do not normally burn or that burn slowly, can ignite explosively in the presence of oxygen. Keep all sparks or flame sources at least 8 ft. away from the area where oxygen is being used.
- Oxygen is non-flammable, but does greatly accelerate combustion.
- Smoking is prohibited in areas where oxygen is in use.
- Caution should be used with electrical devices and toys that produce sparks.
- All combustible materials should be removed from the site.
- Never permit oil, grease or any other readily combustible substance to come in contact with oxygen cylinders or valves.
- Never place blankets or clothing over an oxygen concentrator.
- Store oxygen cylinders in a cart or flat on the floor. Do NOT prop cylinders.

Check box below if patient is on currently on **oxygen therapy**; record the liters per minute and hours per day or night the physician has ordered the patient to receive oxygen therapy.

OXYGEN _____ **Liters/Minute;** _____ **Hours/Day**

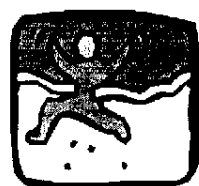
OXYGEN _____ **Liters/Minute;** _____ **Night Only**

SECTION IV. Daily Activities

The severity of your heart failure will determine how heart failure affects your daily activities. What once was easy to do may now be very difficult to do. Talk to your doctor and home health nurse about daily activities like work, recreation, leisure activities and sex.

Don't be afraid to discuss private aspects of your life with your health care team. Most people with heart failure can continue sexual relations once symptoms are under control. You need to choose a time when you are rested and relaxed and avoid having sex after eating a heavy meal. If you start feeling tired or uncomfortable, stop and rest. You can spend more time hugging, kissing and touching if your heart failure is so severe that you can't tolerate sexual activity.

Your doctor should advise you about the kind and amount of exercise for you. Make sure you keep your exercise program within your doctor's guidelines. Exercise is generally limited to walking, cycling, swimming or low-impact aerobic routines.



Check box below if patient is on currently on **restricted activity**; list the restrictions.

ACTIVITIES NOT PERMITTED INCLUDE: _____

REST IS IMPORTANT

It is important for you to sit down and put your feet up for a few minutes every couple hours during the day, especially after meals. These rest times will give your heart a chance to pump more easily.



Sometimes it may be hard to sleep well at night due to coughing, shortness of breath or having to get up frequently to urinate. Daytime rest can make it much easier to cope with the tired feeling from interrupted night time sleep.

To improve your night time sleep, you may have to use more than one pillow to prop your head up in bed. Generally, if you take your diuretic in the morning, you won't have to get up to urinate as much at night.

WAYS TO SAVE ENERGY

Since you may tire easily or become short of breath, it is important to conserve your energy. You can do this by pacing your activities and by planning ahead. Here are some guidelines to follow in order to conserve energy:

- Don't try to fit everything into one day.
- Include "fatigue time" (rest period) in your daily schedule.
- Sit instead of standing for activities.
- Have chairs throughout the house to sit on when you get tired.
- Change your position often to relieve muscle strain.
- Move slowly and take your time getting things done.
- Wear loose clothing and slip on shoes to save energy when dressing.
- Work at a comfortable height.
- Roll, push or pull an object instead of lifting it when you can.
- Eat small frequent meals.
- Avoid individuals with colds or infections.
- Avoid stressful people and stressful situations, when at all possible.