



**Acute Phase (Patient moves to transition phase once oral diuretic ordered)**

Date Initiated: y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_

Critical Path	Patient Outcomes																								
<p><b>Tests</b></p> <ul style="list-style-type: none"> <li>• Chest X-ray PA &amp; Lateral <input type="checkbox"/></li> <li>• ECG at admission, then PRN <input type="checkbox"/></li> <li>• Consider Echo or Muga <input type="checkbox"/></li> <li>• Hgb, WBC, platelets at admission, then Q Mon., Wed., Fri. <input type="checkbox"/></li> <li>• Lipid profile within 24 hrs of admission <input type="checkbox"/></li> <li>• AST, ALT, ALP, albumin, uric acid, TSH at admission then as ordered <input type="checkbox"/></li> <li>• Na, K, creat, glucose at admission and daily <input type="checkbox"/></li> <li>• INR if on coumadin at admission &amp; then as ordered <input type="checkbox"/></li> <li>• Heparin as ordered <input type="checkbox"/></li> <li>• Urine R &amp; M <input type="checkbox"/></li> </ul> <p><b>Assessments/Treatments</b></p> <ul style="list-style-type: none"> <li>• VS QID and PRN</li> <li>• Weight QAM after first void and before breakfast</li> <li>• Intake and output</li> <li>• Titrate O<sub>2</sub> according to protocol</li> <li>• Assess patient and family understanding of Heart Failure</li> </ul> <p><b>Medications</b></p> <ul style="list-style-type: none"> <li>• Diuretic if patient not losing 1 kg/day consider thiazide or an IV lasix infusion</li> <li>• Betablocker</li> <li>• ACE inhibitor or ARB</li> <li>• Spironolactone</li> <li>• Digoxin</li> <li>• Consider inotrope if evidence of symptomatic hypotension or hypotension associated with poor diuretic response</li> </ul> <p><b>Consult</b></p> <ul style="list-style-type: none"> <li>• Nutrition counseling for all Heart Failure patients</li> <li>• Social work prn</li> <li>• Pharmacist prn</li> <li>• Occupational therapy prn</li> <li>• Physiotherapy exercise counseling only</li> <li>• Physiotherapy prn</li> <li>• Smoking cessation as required</li> <li>• Rehab referral</li> </ul> <p><b>Mobility/Safety</b></p> <ul style="list-style-type: none"> <li>• If on bedrest, explain reasons for: requesting help with ambulation; possible bedrails up &amp; ring bell for help to bathroom</li> <li>• Progress ambulation up in chair for meals, up to bathroom</li> <li>• Increase ambulation in the halls</li> <li>• Assess ability for ADLs</li> </ul>	<p><b>During this phase the patient will verbalize if:</b></p> <ul style="list-style-type: none"> <li>• Feeling better</li> <li>• Less SOB</li> <li>• Able to lie flat</li> <li>• Less peripheral, abdominal edema</li> </ul> <p><b>Objectively the patient will:</b></p> <ul style="list-style-type: none"> <li>• Be able to lie flat</li> <li>• Have less edema</li> <li>• Be starting to mobilize</li> </ul> <p>• During the acute phase the patient should be losing 1 kg/day (1kg = neg 1 litre/day)</p> <p>• Have stable Creatinine (creatinine should not be &gt; 25% over baseline)</p> <p>• Have no complaints of symptomatic hypotension</p> <p><b>Able to verbalize an understanding:</b></p> <ul style="list-style-type: none"> <li>• ACE inhibitors decrease the work of the heart &amp; lower BP <input type="checkbox"/></li> <li>• Diuretics eliminate water &amp; salt and decrease swelling <input type="checkbox"/></li> <li>• Beta blockers decrease work of heart &amp; lower BP and HR <input type="checkbox"/></li> </ul> <p><b>Consults:</b></p> <table border="0"> <tr> <td>Physio consult exercise only</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Physio consult prn</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Nutrition consult</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Smoking cessation consult</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Rehab referral consult</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Social work consult prn</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Pharmacist consult prn</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> <tr> <td>Occupational therapy consult prn</td> <td><input type="checkbox"/> Received</td> <td><input type="checkbox"/> Done</td> </tr> </table> <p>• Patient able to increase activity as tolerated and shows increased tolerance for ADL</p>	Physio consult exercise only	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Physio consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Nutrition consult	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Smoking cessation consult	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Rehab referral consult	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Social work consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Pharmacist consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Occupational therapy consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done
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**Transition Phase (Patient moves to maintenance phase when stable on oral diuretic and other medications)**

Date Initiated: y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_

Critical Path	Patient Outcomes																											
<p><b>Tests</b></p> <ul style="list-style-type: none"> <li>• Hgb, WBC, platelets at admission, then Q Mon., Wed., Fri.</li> <li>• AST, ALT, ALP, albumin, uric acid, TSH as ordered</li> <li>• Na, K, creat, glucose Mon., Wed., Fri. or as ordered</li> <li>• INR if on coumadin daily &amp; then as ordered</li> <li>• For Heparin/LMWH see standard orders</li> </ul> <p><b>Assessments/Treatments</b></p> <ul style="list-style-type: none"> <li>• VS QID and PRN</li> <li>• Weight QAM after first void and before breakfast</li> <li>• Intake Q shift</li> <li>• Titrate O<sub>2</sub> according to guidelines</li> <li>• Assess patient and family understanding of Heart Failure</li> </ul> <p><b>Medications</b></p> <ul style="list-style-type: none"> <li>• Diuretic</li> <li>• Betablocker</li> <li>• ACE inhibitor or ARB</li> <li>• Spironolactone</li> <li>• Digoxin</li> </ul> <p><b>Consult</b></p> <ul style="list-style-type: none"> <li>• CCAC consult as necessary</li> <li>• Telehome monitoring if appropriate</li> </ul> <p><b>Mobility/Safety</b></p> <ul style="list-style-type: none"> <li>• Progress ambulation up in chair for meals, up to bathroom</li> <li>• Increase ambulation in the halls</li> <li>• Assess ability for ADLs</li> </ul> <p><b>Nutrition</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> HI diet</li> <li><input type="checkbox"/> 2 Gm Na diet</li> <li><input type="checkbox"/> Diabetic diet</li> <li>• Fluid restriction: <input type="checkbox"/> 1.2 litres <input type="checkbox"/> 1.5 litres <input type="checkbox"/> Other</li> <li>• Daily intake</li> </ul> <p><b>Discharge Planning</b></p> <ul style="list-style-type: none"> <li>• Plans for discharge should be finalized</li> <li>• Continue updating HF GAP tool</li> </ul>	<p>Patient will be started on oral diuretic</p> <p><b>During this phase the patient will verbalize:</b></p> <ul style="list-style-type: none"> <li>• Feeling better</li> <li>• Less SOB</li> <li>• Able to lie flat</li> <li>• Less peripheral, abdominal edema</li> </ul> <p><b>Objectively the patient will:</b></p> <ul style="list-style-type: none"> <li>• Be able to lie flat</li> <li>• Have less edema</li> <li>• Have improved exercise tolerance</li> <li>• Be able to wean Oxygen</li> <li>• Perform some ADLs independently</li> </ul> <p><b>Able to verbalize an understanding:</b></p> <ul style="list-style-type: none"> <li>• ACE inhibitors decrease the work of the heart &amp; lower BP <input type="checkbox"/></li> <li>• Diuretics eliminate water &amp; salt and decrease swelling <input type="checkbox"/></li> <li>• Beta blockers decrease work of heart and lower BP and HR <input type="checkbox"/></li> </ul> <p><b>Consults:</b></p> <table style="width: 100%; border: none;"> <tr> <td>Physio consult exercise only</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Physio consult prn</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Nutrition consult</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Smoking cessation consult</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Rehab referral consult</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Social work consult prn</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Pharmacist consult prn</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>Occupational therapy consult prn</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> <tr> <td>CCAC consult prn</td> <td style="text-align: center;"><input type="checkbox"/> Received</td> <td style="text-align: center;"><input type="checkbox"/> Done</td> </tr> </table> <ul style="list-style-type: none"> <li>• Increase exercise tolerance</li> <li>• Improved appetite</li> <li>• Able to keep record of fluid intake</li> </ul>	Physio consult exercise only	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Physio consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Nutrition consult	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Smoking cessation consult	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Rehab referral consult	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Social work consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Pharmacist consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	Occupational therapy consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done	CCAC consult prn	<input type="checkbox"/> Received	<input type="checkbox"/> Done
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**Patient Education**

- Explain and reinforce during **Transition Phase** reasons for:
- Weight monitoring and self weight chart
  - Ensure patient has weigh scale at home
  - Salt/fluid restriction
  - Thirst and activity intolerance
  - Heart failure medications
  - Teach signs of condition change and when to contact a physician
  - Review all videos and teaching material
  - Begin reviewing and populating the HF GAP tool

**Patient & family aware:**

- Patient has heart failure
- Able to verbalize understanding of SOB, PND, ankle swelling & orthopnea
- Of reasons for thirst, weight monitoring, salt/fluid restriction

**Comments:** \_\_\_\_\_  
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Date – End of transition phase: y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_



**Maintenance Phase (Patient continues to be stable on oral diuretic and other medications)**

Date Initiated: y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_

Critical Path	Patient Outcomes
<p><b>Tests</b></p> <ul style="list-style-type: none"> <li>• As ordered by physician</li> </ul> <p><b>Assessments/Treatments</b></p> <ul style="list-style-type: none"> <li>• VS QID and PRN</li> <li>• Weight QAM after first void and before breakfast</li> <li>• Assess patient and family understanding of Heart Failure</li> </ul> <p><b>Medications</b></p> <ul style="list-style-type: none"> <li>• Diuretic</li> <li>• Betablocker</li> <li>• ACE inhibitor or ARB</li> <li>• Spironolactone</li> <li>• Digoxin</li> <li>• Patient &amp; family should receive information regarding discharge medications</li> </ul> <p><b>Consult</b></p> <ul style="list-style-type: none"> <li>• Nutrition counseling for all patients</li> <li>• Social work prn</li> <li>• CACC consult prn</li> <li>• Pharmacist prn</li> <li>• Occupational therapy prn</li> <li>• Physiotherapy exercise counseling for all patients</li> <li>• Physiotherapy prn</li> <li>• Smoking cessation</li> <li>• Home monitoring consult prn</li> <li>• Rehab consult</li> </ul> <p><b>Mobility/Safety</b></p> <ul style="list-style-type: none"> <li>• Safe mobility practices being reinforced with patient and family</li> <li>• Plans in place for safe discharge</li> </ul> <p><b>Nutrition</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> HI diet</li> <li><input type="checkbox"/> 2 Gm Na diet</li> <li><input type="checkbox"/> Diabetic diet</li> <li>• Fluid restriction 2 litres</li> </ul> <p><b>Discharge planning</b></p> <ul style="list-style-type: none"> <li>• Reinforce all discharge plans &amp; date with the family</li> <li>• Continue updating HF GAP tool</li> <li>• Address all last minute concerns</li> </ul>	<p><b>During this phase the patient will:</b></p> <ul style="list-style-type: none"> <li>• Be stable on oral lasix</li> <li>• Have stable weight</li> </ul> <p><b>Objectively the patient will:</b></p> <ul style="list-style-type: none"> <li>• Be able to lie flat</li> <li>• Have less edema</li> <li>• Mobilize safely as tolerated</li> <li>• Stable creatinine</li> <li>• Stable BP</li> <li>• Perform all ADLs independently or at base level</li> </ul> <ul style="list-style-type: none"> <li>• Patient and families can verbalize reasons for medications</li> </ul> <ul style="list-style-type: none"> <li>• Consults are complete as needed</li> </ul> <ul style="list-style-type: none"> <li>• Increase exercise tolerance</li> <li>• Improved appetite</li> <li>• Able to keep record of fluid intake</li> </ul> <ul style="list-style-type: none"> <li>• Patient and family able to demonstrate safe mobility practices if needed</li> </ul> <ul style="list-style-type: none"> <li>• Patient and family able to discuss the importance of monitoring fluid and salt intake</li> </ul>

**Patient Education**

**Reinforce during Maintenance Phase:**

- Weight monitoring and self weight chart
- Salt/fluid restriction
- Thirst and activity intolerance
- Patient confirms he/she has a weight scale

**Comments:** \_\_\_\_\_  
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Date – End of maintenance phase: y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_ y \_\_\_\_\_ m \_\_\_\_\_ d \_\_\_\_\_



Patient(e) \_\_\_\_\_ Chart No. – N° du dossier \_\_\_\_\_