

### 1. Disease Process & Brief Pathophysiology

Congestive heart failure, can be caused by a variety of abnormalities, including pressure and volume overload, loss of muscle, primary muscle disease or excessive peripheral demands such as high output failure. The heart muscle has reduced contractility, which produces a reduction in cardiac output, which then becomes inadequate to meet the peripheral demands of the body.

### 2. Factors for the Development of the Disease/Acute Illness

- Age of 65 or older (P)
- CAD
- High BP (P)
- Previous heart attack (P)
- Ischemia
- Cardiomyopathy

### 3. Signs and Symptoms

- Dyspnea (P)
- Persistent cough
- Wheezing (P)
- Increased HR (P)
- Pedal edema (P)
- Fatigue (P)

### 4. Diagnostic Tests Pertinent or confirming of diagnosis

- Blood tests (P)
- Chest X-ray (P)
- EKG
- Echo

### 5. Lab values that may be affected

- BNP (P)
- ABGs (P)
- BUN/Creatinine (P)
- CBC (P)

### 6. Current Treatment

- Beta blocker (P)
- Diuretic (P)
- Diet change (P)
- Supplemental oxygen (P)

### 7. Focused Nursing Diagnosis:

### 11. Nursing Interventions related to Nursing

### 12. Patient Teaching:

Activity intolerance

**Diagnosis in #7:**

1. Assist patient in performing ADLs

**Evidence Based Practice:**

Focuses on ways to conserve energy such as bundling activities and ensuring periods of rest.

2. Teach the patient the need for a good nutritional status.

**Evidence Based Practice:**

Adequate energy is needed for and during activity.

3. Provide the patient with material to review regarding energy conservation.

**8. Related to (r/t):**

HF syndrome

**9. As evidenced by (aeb):**

Decreased CO. Patient complained of SOB.

**Evidence Based Practice:**

Ensures patient understands education related to energy conservation.

**10. Desired Patient Outcome:**

Patient will state energy conservation techniques by 03/03/2021 by 1500.

1. Give patient activity and exercise recommendations.

2. Educate patient of low sodium diets.

3. Teach patient to recognize signs of physical overactivity or overexertion.

**13. Discharge Planning/Community Resources:**

1. Gradually progress the patient's activity regimen, to increase tolerance.

2. A referral to a nutritionist. Dietary changes are required.

3. Optimum level of activity/functioning attained.

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[Pathophysiology of congestive heart failure - PubMed \(nih.gov\)](#)

[Treatment Options for Heart Failure | American Heart Association](#)