

Firelands Regional Medical Center School of Nursing  
AMSN 2023  
Unit 6: Heart Failure online assignment (1.5H)

Directions:

- Read Lewis Chapter 34, review ATI Pharmacology Made Easy 4.0: Cardiovascular Module: Drug Therapy for Heart Failure, and review the Unit 6 Pharmacology List.
- Utilizing the resources above, complete the case study. There will be many items for each question.
- Utilizing the Pharmacology List and ATI/Skyscape, complete three ATI Medication Templates from the Pharmacology List.
- This assignment is due in the Unit 6: HF assignment drop box by March 13, 2023 at 0800.
- Be prepared to discuss this assignment in class.
- You must complete the assignment in full to receive the 1.5H theory credit.

Assignment Objectives:

- Determine overall goals in the treatment of heart failure.

**CASE STUDY:**

Frannie Failure, a patient on 4P, calls the nurse and states, "I feel really puffy. My rings feel so tight on my fingers and I am having trouble catching my breath." The patient is lying flat in the bed and is alert and oriented x 3. NS @ 125mL/HR running.

Assessment:

- Vital Signs: T 97.9 oral, HR 120, RR 24, SpO2 86% RA, BP 152/94, pain 0/10.
  - Respiratory: Lung sounds- crackles throughout bilaterally, non-productive cough.
  - Cardiac: Heart sounds- S3, pedal pulses not palpable, 3+ pitting edema bilateral feet and ankles.
  - Skin intact, pale and cool.
  - Gastrointestinal: Bowel sounds x4 WNL, BM yesterday morning.
  - Intake/Output: Patient has had 900ml in and 200ml out.
- 1. What additional information would you want to know?** What is the patient's EKG status, have the fluids been decreased, what is her baseline, what measures have been taken to increase the patients SPO2, what medications is she on?
  - 2. What assessment/ interventions would be appropriate for this patient?** Sitting the patient up, applying oxygen, decreasing or stopping the fluids, contacting the physician, assessing lung sounds frequently, assessing strict intake and output.
  - 3. What would you anticipate the healthcare provider to order?** I would anticipate a diuretic to be ordered as well as for the fluids to be decreased. I also anticipate an order for oxygen. Possible changing of medications that the patient is already taking.

**4. What medications would be appropriate for this patient (include all pertinent from the Pharmacology List) ? Doses? Nursing Interventions? You will pick three of these medications to complete the ATI Medication Templates.** Hydrochlorothiazide use: treat heart failure.

Administration: Chlorothiazide is available in IV form, Give with food to minimize GI effects, Give last dose of the day by 3p.m to prevent nocturia and sleep loss. Furosemide use: treats edema causes by heart failure not affected by other diuretics, Administration: Available in Oral, IM, or IV, Give IV form undiluted and administer slowly to prevent ototoxicity, Interactions: Digoxin toxicity is a high risk with hypokalemia. Spironolactone use: edema caused by heart failure, Administration: Available orally, take with food to increase absorption, tablets may be crushed and mixed with food or fluid if client is unable to swallow them whole. Digoxin use: second- line drug for HF, Administration: available as oral, and IV, tablets may be crushed and mixed with food if needed, IV form may be given directly over at least 5 minutes while watching for infiltration. Dobutamine Use: Increases cardiac output in severe HF, Adverse reactions: tachycardia, cardiac dysrhythmias, and angina, Administration: available for IV infusion only, dosage based on client's weight, peak effect 10 minutes after infusion begins, correct any fluid volume deficits before administering. And milrinone Use: short- term treatment of low cardiac output in HF, Adverse reactions: hypokalemia, dysrhythmias, angina, Administration: IV infusion only, give a loading dose over 10 minutes then administer dose based on client's weight by continuous infusion.

**5. What patient education would you include?** I would educate on fluid overload as well as left sided heart failure and what that means to the patient. I would also educate them on changing their diet like lowering sodium intake, monitoring blood pressure and heart rate, the patient should also take daily weights, lifestyle changes such as cessation of smoking and drinking. I would also educate on medication adherence.