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HF Online Assignment
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Firelands Regional Medical Center School of Nursing

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Unit 6: Heart Failure online assignment

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?

- I would want to know the patient’s past medical history and family history. I would also want to know if the patient has ever had a heart cath done, look for any tests/labs or diagnostics that were done and what medications the patient may have ordered that could help their current condition.

2. What assessment/ interventions would be appropriate for this patient?

- I would raise the head of the patient’s bed, possibly to a bladder scan, get an order for SCDs, get an order for a diuretic to help remove some of the fluid that she’s holding onto, possibly give a beta blocker to help bring the heart rate down, and call the for possible heart cath, continue to monitor SPO2 stats, and apply oxygen to bring back up above 93%.

3. What would you anticipate the healthcare provider to order?

- I anticipate the provider to order a heart cath to be completed to see if there is any blockages, diuretics would be ordered to help remove fluid that is being retained, possibly order heart failure medications like beta blockers, ACE Inhibitors, ARBs and also order anticoagulants to prevent any clot formation.

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.

- **Ace Inhibitors: Captopril** (25mg, 3 times daily), **Lisinopril** (5mg, once a day), **Enalapril**(2.5mg-5mg, once a day)
 - a. Nursing interventions include assess for signs of fluid overload such as (edema, weight gain, crackles in the lungs, peripheral pulses) and checking daily weights.
- **ARBs: Valsartan** (40mg, two times a day)

- a. Nursing interventions include monitoring daily weights, and assess patient for fluid overload (check for edema, weight gain, crackles, and JVD)
- o **Digoxin** (PO 0.125mg-0.5mg once a day)
 - a. Nursing Interventions include monitoring for signs of toxicity and assessing apical pulse before giving (if below 60, or above 100 hold the medication)
- o **Dobutamine** (2.5mcg-15mcg/kg/min), **Dopamine** (1mcg-5mcg/kg/min)
 - a. Nursing intervention include monitoring ECG, vital signs, intake, and output continuously while taking this medication
- o **Entresto** (Sacubitril 49mg/ Valsartan 51 twice a day)
 - a. Nursing interventions include monitoring daily weights, monitor blood pressure for hypotension, and pulses, assess for signs of angioedema (shortness of breath and facial swelling)
- o **Furosemide** (PO, 20-80mg, once a day), **Bumetanide** (PO, 0.5mg once a day)
 - a. Nursing interventions include assess daily weights and any skin rashes, assess fluid status along with intake and output, notify doctor of any symptoms of dehydration
- o **Hydrochlorothiazide** (PO 12.5mg-100mg once a day)
 - a. Nursing interventions include monitoring blood pressure, intake and output, daily weights, assess for signs of hypokalemia and assess for any new edema daily.
- o **Beta Blockers: Metoprolol Succinate** (12.5mg-25mg once a day), **Carvedilol** (3.125mg twice a day), **Bisoprolol** (5mg once a day)
 - a. Nursing interventions include monitoring blood pressure, heart rate and pulse frequently while taking, monitor daily weights and intake/output, assess routinely for signs of HF (weight gain, crackles in the lungs, shortness of breath etc.)
- o **Milrinone** (IV, loading dose-50mcg/kg, followed by continuous infusion-0.5mcg/kg/min)
 - a. Nursing interventions include monitor heart rate and blood pressure continuously through the infusion, slow or discontinue if BP drops excessively. Monitor ECG continuously during the infusion they're at risk for ventricular arrhythmias.
- o **Nesiritide** (IV 2mcg/kg bolus followed by 0.01mcg/kg/min as a continuous infusion)
 - a. Nursing interventions include monitoring blood pressure, ECG, respiratory rate and cardiac index during administration, reduce rate or discontinue if hypotension occurs, monitor intake and output, daily weights, and assess for a decrease in HF symptoms
- o **Spironolactone** (25mg, once a day)
 - a. Nursing interventions include monitor intake and output, daily weights, assess patient for signs of hyperkalemia (fatigue, muscle weakness, confusion, and cardiac arrhythmias)

5. What patient education would you include?

- o This patient may be educated on lifestyle modifications, such as how to assess for changes in heart rate, pulse, blood pressure. Make sure they are taking daily weights, limiting salt in their diet, stop drinking alcohol and smoking cessation, start to incorporate exercise for at least 30 minutes a day and maintain a steady healthy weight.