

Firelands Regional Medical Center School of Nursing  
AMSN 2024  
Unit 6: Heart Failure online assignment (1.5H)

Directions:

- Read Lewis Chapter 38, 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 11, 2024 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. Normal saline 0.9% @ 125mL/HR is 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 over the last 8 hours.

- 1. What additional information would you want/need to know?** Signs of JVD? How long has the SOB been going on for? Current ABGs. What is the patient's CO?
- 2. What assessment/ interventions would be appropriate for this patient?** Determine the underlying cause, elevate HOB to high-fowlers, obtain blood work (ABGs, CBC, coags, etc.), Chest Xray, 12 lead ECG. Bladder scan due to decreased output versus input.
- 3. What would you anticipate the healthcare provider to order?** Daily weights, O2 via nasal cannula, decrease rate of NS, drug therapy including diuretics, a vasodilator to decrease the workload of the heart, morphine to relieve the patient's dyspnea. Also, positive inotropes to increase the myocardial contractility which helps increase urine output.

- 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.**

Diuretics, furosemide. Vasodilator, nitroglycerin. Morphine. Positive Inotropes like dopamine, dobutamine, norepinephrine, milrinone. Ace inhibitors such as captopril, lisinopril, enalapril.

- 5. What patient education would you include?**

Patient education regarding diet therapy: read labels to assess sodium content, avoid using salt when preparing foods or adding salt to foods, eat small frequent meals, weigh yourself at the same time each day preferably in the morning using the same scale wearing similar clothes.

Activity: increase walking and other activities gradually, avoid extremes of heat and cold.

Monitoring at home: report weight gain of 3 lbs in two days or 3-5 lbs in a week, difficulty breathing especially with activity or lying flat, report frequent dry hacking cough especially when laying down, fatigue/weakness, swelling of the ankles feet or abdomen. Swelling of face or difficulty breathing if taking ace inhibitors. Follow up with HCP on regular basis. For health promotion obtain annual flu vaccines pneumococcal and reduce risk factors including blood pressure control, tobacco cessation, weight reduction, blood glucose control. Rest: plan regular daily rest and activity program, avoid emotional upsets. Regarding drug therapy take each drug as prescribed, count pulse for each day before taking drug (if appropriate), know signs and symptoms of orthostatic hypotension and how to prevent them.