

Firelands Regional Medical Center School of Nursing
AMSN 2025
Unit 6: Heart Failure online assignment (1.5H)

Directions:

- Read Lewis Chapter 38, review ATI Pharmacology Made Easy 5.0: 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 (see below for further details).
- This assignment is due in the Unit 6: HF assignment drop box by March 10, 2025 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?

- a. Does the patient have a history of:
 - i. Heart failure
 - ii. Diabetes
 - iii. PVD
 - iv. HTN
 - v. CAD/recent MI
 - vi. Valve or congenital heart disease
 - vii. Hyperlipidemia
 - viii. Renal disease

- ix. Thyroid disease
 - x. Lung disease
 - b. How long has the patient been experiencing these symptoms?
 - i. Have they experienced these symptoms before?
 - c. Does the patient smoke or are they a former smoker?
 - i. How many packs per day?
 - d. Does the patient have any pain?
 - e. What are the patient's home medications (names, dosages)?
 - i. Does the patient take these medication regularly and as prescribed?
 - ii. Any OTC medications or herbal supplements?
 - f. CBC/CMP/BNP
 - g. What is the patient's heart rhythm?
 - h. Heart rate regular vs irregular?
- 2. What assessment/ interventions would be appropriate for this patient?**
- a. Vitals Q4hrs
 - b. Stop the Normal Saline
 - c. 2L O2 Nasal Cannula, titrate to keep SpO2 >(or equal to)92%
 - d. Raise the head of the bed
 - e. Bladder scan
 - i. Patient may need straight catheterization if there is retention
 - f. BMP, CBC, BNP
 - g. Assess rings on fingers, take rings off if able and place in personal belongings bag
 - h. Telemetry
 - i. Imaging - echocardiogram, and cxr
 - j. Fluid/Sodium Restrictions as ordered
 - k. Daily weights
 - l. Strict I/O's
- 3. What would you anticipate the healthcare provider to order?**
- a. Echocardiogram to check for ejection fraction and valve function
 - b. Chest x-ray
 - c. 6-minute walk test
 - d. 12 lead ECG
 - e. Daily weights
 - f. Sodium/Fluid Restrictions
 - g. Physical therapy
 - h. Dietary consult
 - i. Respiratory therapy for a potential breathing treatment
 - j. Strict I/O's
 - k. CBC/BNP/BMP
 - l. Medications (see list below)

- 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.**
- a. Furosemide/Bumetanide (loop diuretic)
 - b. Losartan/Valsartan (ARBs)
 - c. Anticoagulant
 - d. Metoprolol succinate, carvedilol, bisoprolol (beta blockers)
 - e. Hydrochlorothiazide (thiazide diuretic)
 - f. Spironolactone (Potassium sparing diuretic)
 - g. Morphine
 - h. Sacubitril/valsartan
 - i. Digoxin
 - j. Dobutamine/dopamine
 - k. Milrinone
 - l. Captopril, lisinopril, enalapril (ACE inhibitor)
 - m. Isosorbide/nitroglycerin (Nitrates)
- 5. What patient education would you include?**
- a. Diet
 - i. Sodium restrictions as ordered by physician
 - ii. How to read food labels to determine sodium content
 - iii. Daily weights at the same time, using the same scale, wearing similar clothes
 - iv. Small and frequent meals throughout the day
 - b. Activity
 - i. Increase walking gradually as long as it does not cause dyspnea or fatigue
 - ii. Cardiac rehab information
 - iii. Avoid hot and cold extremes
 - iv. Reduce risk factors (BP control, tobacco cessation, blood glucose control, weight reduction)
 - c. Monitoring
 - i. Signs/Symptoms of worsening HF (cough, weight gain, fatigue, tiredness with activity, edema)
 - ii. Report changes to the provider:
 - 1. Weight gain of 3lbs in 2 days, or 3-5 lbs in a week
 - 2. Difficulty breathing, especially when lying flat
 - 3. Waking up breathless at night
 - 4. Dry, hacking cough especially with lying down
 - 5. Fatigue/weakness
 - 6. Swelling of ankles, feet, abdomen
 - 7. Nausea with abdominal swelling, pain, and tenderness
 - 8. Dizziness/fainting
 - d. Rest
 - i. Plan for a rest period following exertion (ADL's, exercise)

- ii. Shorten working hours if able
 - iii. Avoid emotional upsets and share concerns with provider
- e. Medications
 - i. Take all medications as prescribed
 - ii. Develop a system to ensure medications are taken on time daily
 - iii. Take BP regular, how to take BP at home, limits for BP
- f. Vaccines
 - i. Annual influenza vaccine
 - ii. Pneumococcal and COVID-19 vaccine