Your Hospital's Logo Here

CONGESTIVE HEART FAILURE (CHF) TREATMENT KARDEX

Here												
DIET / DATE		ACTIVITY	ADVANCED	VITAL	SIGNS	NEUR	O CHE	:CKS	RESP SUPPORT		CODE STATUS	
		DAY 1 - Bedrest	DIRECTIVE?						Pulse Ox now & Q am	DISCONTINUE		
		DAY 2 - OOB as tolerated			4° or as per routine				O ₂ :	IF HYPOXIA		
		DAYS 3 / 4 - ambulate as		YES						RESOLVED		
E tolerated		□ NO					Luss	MODE				
N POSITION			INTAKE/OUTPUT		A-LINI	LINE IABP		FIO ₂		WT:		
TF / RATE HOB elevated 30 degrees				O Shir	ft with 24 hr net				Rate		Admission weight prior to diuretic therapy.	
TF / RATE HOB elevated 30 degrees			totals					PEEP		Weigh daily & record.		
NPO			lotais					PS		" '		
									HT:			
NEXT OF KIN: ALLERGIES						CONDITION		TEAM				
PHONE												
SPECIAL NOTICES KNOWN EJECTION FRACTION %					DATE		IV FLI	UIDS / RATE				
ADMIT TO: TELEMETRY YES							Saline Lock					
ADMITTO: MONITORING NO						ш	Camillo Econ					
DATE								IV Fluids: _		@	ml / hr	
								_				
	Initiate CHF Clinical Pathway						100 mg Lasix in 100mL NS @ ml / hr					
	Nutrition Assessment Screening							Natrecor Bolus 2 mcg / kg IV over 60 seconds;				
	Instruction & Diet Principles							then 0.01 unit / kg / min IV infusion				
	<u> </u>						_					
	Breath Sounds, Cardiac Auscultation q 4 hours						Ш	400 mg Dopamine in 250 D5W @ micrograms / kg / min				
	Measure Peripheral Edema q 4 hours							500 mg Dob	utamine in 250 D5W @	n	nicrograms / kg / min	
	☐ Insert Foley Catheter; discontinue Day 3 if indicated											
	☐ Issue CHF Patient Teaching Booklet											
	☐ Initiate Health Teaching Plan - Day 1											
	<u> </u>											
	☐ Initiate Discharge Teaching Plan - Day 3											
	Review all Patient / Family Teaching - Day 4											
ROOM RELIGION SURGICAL		PROCEDURE		SURGEO	N		* CAR	DIOLOGIST *	(CONSULTS		