



**Mount
Sinai**
Heart

Managing your Heart Health

Patient Pathway for Heart Failure Recovery

This pathway shows you what you might expect during your hospital stay. Your stay may be different than what is pictured here.

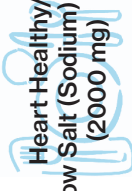
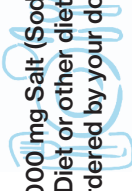















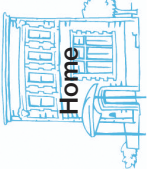

	Day 1	Day 2	Day 3	Target Day for Discharge (Day 4)	After Discharge
Diet	Heart Healthy/Low Salt (Sodium) Diet (2000 mg) 	Heart Healthy/Low Salt (sodium) diet (2000mg). Your physician may want you to limit fluids.			2000 mg Salt (Sodium) Diet or other diet as ordered by your doctor 
Activity	Out of bed as able 	Walk 2-3 times a day as able 	Walk 2-3 times a day as able 		Slowly work up to 30 min of physical activity most days of the week 
Medication	IV Heart Failure Medications 	IV Heart Failure Medications 	Heart Failure Medications 		Follow written medication plan 
Treatments	Oxygen if needed You will be weighed 	Oxygen if needed. You will be weighed 	Oxygen may not be needed You will be weighed 		Check weight daily 
Medical Tests	EKG Daily lab work Chest X-ray 	Echocardiogram if needed 	Your doctor may order additional tests if needed.		
Planning for Home Care	Discharge Planning Begin to learn how to manage heart failure when at home	Arrange home health agency if needed 		Home 	<ul style="list-style-type: none"> Follow up appointment with physician or clinic Community resources as needed
Your Responsibility	Inform your nurse or physician immediately if you experience: chest discomfort, difficulty breathing, dizziness, or irregular heartbeat. 				

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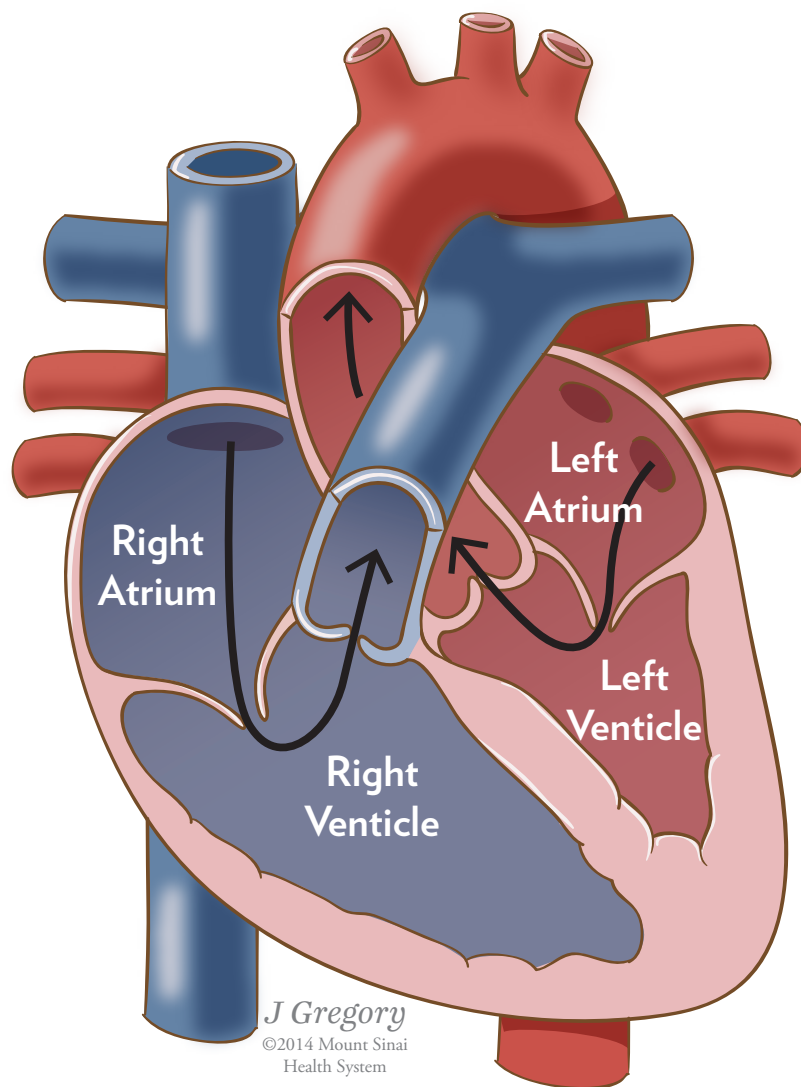
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The Heart

Your heart is a muscle that pumps blood continuously through your body. Blood circulates to provide nutrients and oxygen to the entire body.

The heart has four chambers: the right atrium, right ventricle, left atrium, and left ventricle.

Blood travels from the body to the right side of the heart and then off to the lungs, where it picks up oxygen. This oxygen rich blood enters the left side of the heart where it is then sent to the rest of the body, delivering oxygen.



What is heart failure (HF)?

Heart failure is a chronic and terminal condition in which the heart muscle has become weaker or stiffer than normal. This usually occurs gradually over a period of time.

The heart is unable to pump enough blood and oxygen to meet the body's needs. This can cause shortness of breath, fluid retention (swelling in your body – “edema”) and or fatigue. When this happens, blood that should be pumped out of the heart backs up in the lungs and other parts of the body. This is why many people with heart failure may have swelling of the legs and or stomach. You may hear heart failure called “congestive heart failure” or CHF, as the body can become “congested” with extra fluid.

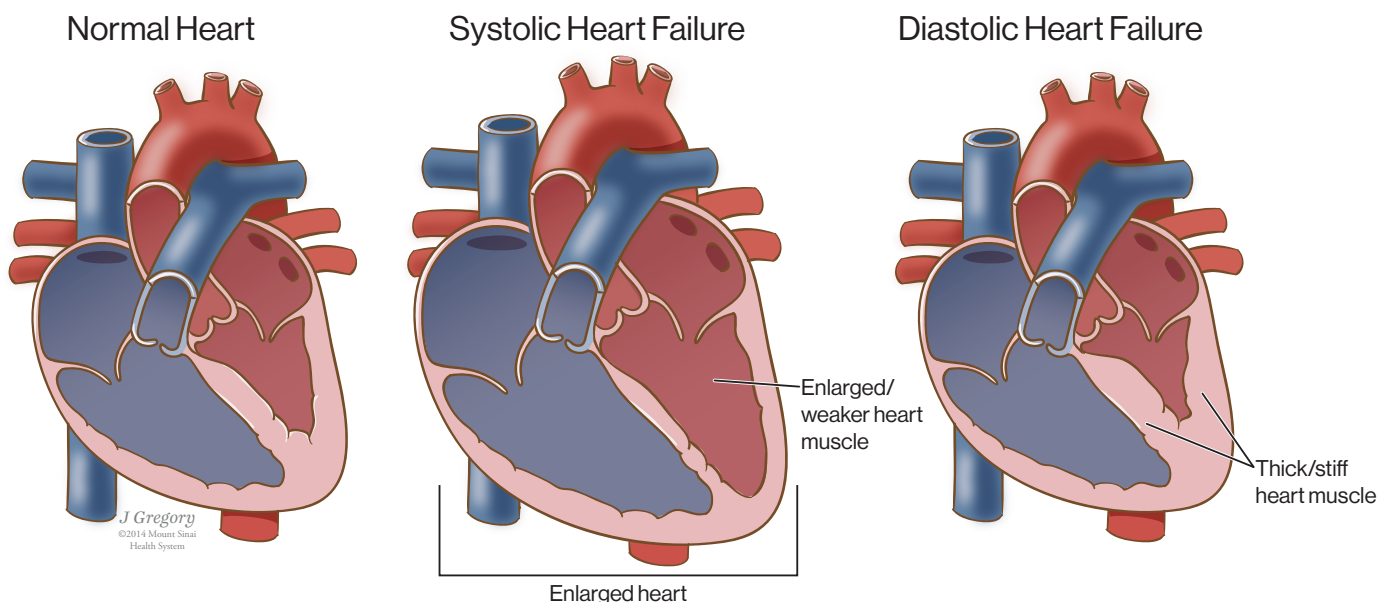
As the heart strains to do its work, the heart muscle fibers stretch and the chambers of the heart get weaker and/or become stiffer. This further decreases the heart's ability to perform, making you feel tired and weak.

If the heart muscle becomes weaker and enlarged it is known as **Heart Failure with Low or Reduced Ejection Fraction (Systolic Heart Failure)**. The heart muscle cannot contract or pump blood well.

If the heart muscle becomes stiffer it is known as **Heart Failure with Preserved Ejection Fraction (Diastolic Heart Failure)**. The stiff muscle cannot relax between contractions, which keeps the ventricles from filling with enough blood.

Many patients may have a combination of both.

Regardless of the type of HF you may have, you may at times feel short of breath, tired and less able to enjoy the things you enjoy doing. Talk to your team about ways in which you can manage to feel well while living with HF.



What causes heart failure?

A number of conditions can cause heart failure including:

- A heart attack
- Certain infections
- High blood pressure
- Problems with heart valves
- Irregular heart rate or rhythm
- Severe lung problems
- Alcohol
- Drug use
- Chemotherapy
- Thyroid problems
- Pregnancy
- Sometimes the cause of heart failure is unknown (idiopathic)

What are the signs and symptoms of heart failure?

Because blood flow is less than normal, people with heart failure can experience some of these symptoms:

- Shortness of breath
- Fatigue or a decrease in your ability to do your usual activities
- Swelling of legs, feet, hands, or abdomen
- Persistent cough or chest congestion
- Weight gain of two or more pounds in one day, or five or more pounds in one week
- Difficulty sleeping and restlessness
- Loss of appetite or nausea

Testing for Heart Failure

Heart Failure can be caused by many different things. To find out what kind of heart failure you have, your health care provider may order an echocardiogram or “echo”. An echo is a sonogram of your heart to look at its size, shape, pumping ability, valves and ejection fraction. There are other tests that may be done as well.

Ejection fraction is a measure of how well your heart pumps with each beat. In a normal heart, between 55% to 70% of the blood in the heart is pumped out (ejected) with each beat. This percentage is called the ejection fraction or “EF”. An ejection fraction below 40% shows some weakness in the strength of your heart.

What can I do about Heart Failure?

If you have heart failure, there are many things you can do to feel well and to stay healthy.

The things you do (or don't do) can greatly affect your health and well-being. Careful attention to these key points will help you feel better and stay out of the hospital.

- Watch for worsening signs and symptoms. (shortness of breath/ fatigue).
- Weigh yourself daily.
- Follow your recommended diet.
- Take medications as prescribed.
- Keep active and follow your health care provider's recommendations on exercise.
- Call your health care provider with any change in your health.

Heart failure symptoms can get worse very quickly. These symptoms are usually due to too much fluid in your body. Paying attention to how you feel and reporting changes to your health care provider can keep you well, help avoid serious problems and keep you out of the hospital.

Be sure to call your health care provider as soon as you notice any change in your signs or symptoms. The sooner you report changes in symptoms the better it is. It is easier to correct the problems early and you will feel better sooner.

Weigh yourself daily

Extra fluid from heart failure causes your weight to go up quickly. Weighing yourself every day is an easy way to monitor your health and prevent worsening symptoms.

Follow these easy steps:

- Weigh yourself first thing in the morning before you eat or drink anything and after you urinate; wearing the same clothes (for example, pajamas).
- Use the same scale every time, and place the scale on a hard, flat surface.
- Write down your weight each time on your weight log and bring it to all medical visits.
- Call your health care provider if you experience a weight gain of **two or more pounds in one day or four pounds in one week.**

Your weight should be almost the same every day. This is normal. If your weight goes up or down quickly, it may be a sign of your heart failure getting worse.

Be sure to weigh yourself and record your weight every day.

Monitor Your Health

You may see changes that are due to your heart failure getting worse. Check yourself daily, and contact your health care provider if you notice any major changes in how you feel.

Look for:

- More swelling in your feet, legs or stomach
- Feeling more tired, having a lack of energy
- Sweating
- Having difficulty sleeping, especially due to breathing problems
- Increased urination at night
- Confusion or impaired memory
- Decreased appetite
- Other changes you cannot explain

It is best to contact your health care provider as soon as you notice changes because it is easier to correct them early.



Be sure to weigh yourself and record your weight every day.

Healthy Lifestyle for Heart Failure Patients

Diet

Making healthy food choices and eating a well-balanced diet can make you feel better. Your doctor may recommend that you limit the amount of sodium (salt) in your diet. Sodium makes the body hold on to water, and can worsen your symptoms of shortness of breath or fatigue and cause fluid to build up within your body.

Salt and Sodium

A teaspoon of salt contains 2,300 milligrams (mg) of sodium. Sodium is the major ingredient in table salt, so a good first step is to take the salt shaker off your table. About one-half of our salt intake comes from processed foods. So a next good step is to avoid those processed foods that contain large amounts of sodium. The following foods contain a large amount of sodium and should be avoided (unless they are specifically labeled as low sodium or sodium free).

- Processed meats (hot dogs and cold cuts).
- Frozen prepared meals.
- Canned soups and vegetables.
- Canned fish in oil or fried fish.
- Cheeses and cheese spreads.
- Pickles, olives, sauerkraut.
- Tomato sauce and vegetable juices.
- Most “fast food,” for example, Chinese food.
- Condiments: soy sauce, Worcestershire sauce, catsup, and mustard.
- Peanut butter.
- Spices that contain salt in their name like garlic salt, onion salt or celery salt.
- Ham, bacon, sausage.
- Snack foods that are salted: chips, pretzels and crackers.

Instead choose:

- Fresh meat or fish.
- Fresh or frozen vegetables.
- Spices that do not have salt in their name.
- Snack foods such as nuts (unsalted), fresh fruit, raisins and unsalted pretzels.

There may be hidden sodium in other foods. Reading the food labels is a good way to find out how much sodium is in the canned/prepared food. Be sure to ask your health care provider how much salt or sodium you are permitted to eat (in milligrams [mgs] per serving), per day.

Reading Nutrition Labels

All packaged foods have labels that say how much sodium is in the product. Reading your food labels will help you learn which foods contain the most sodium.

Total Fat: Limit fat in your diet. “Low fat” means less than 3 grams per serving.

Saturated Fat: This is “bad fat”. Limit this fat to 1 gram per serving.

Cholesterol: Limit this to 20 mg per serving.

Sodium: Limit salt to 2,000 mg per day.

Nutrition Facts			
Serving size 1 cup (228g)			
Serving Per Container 2			
Amount Per Serving			
Calories	280	Calories from Fat	120
Percent Daily Value*			
Total Fat	3g		5%
Saturated Fat	0g		0%
<i>Trans Fat</i> 0g			
Cholesterol	30mg		10%
Sodium	250mg		10%
Total Carbohydrates	31g		10%
Dietary Fiber	0g		0%
Sugars 5g			
Protein 5g			
Vitamin A	4%	•	Vitamin C 2%
Calcium	15%	•	Iron 4%
*Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.			
		Calories	2,000 2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	26g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Find the sodium (salt) content on the label. In this case, a single serving has 250 mg of sodium.

Think about how many servings you may eat. In this case, the package contains two servings. Eating the entire package would give you 500 mg sodium.

Cooking at Home

When cooking at home, there are many small things that you can do or change in order to make dishes that are heart healthy. Some seasonings are flavorful without having extra salt in them.

Low Salt: Try These	High Salt: Avoid
<ul style="list-style-type: none">• Basil• Bay leaves• Mrs. Dash• Dill• Parsley• Nutmeg• Lemon juice• Ginger• Dry mustard• Cocoa powder	<ul style="list-style-type: none">• Fish sauce• Lite/Regular soy sauce• BBQ sauce• MSG• Celery salt• Stir-fry sauce• Pickle relish• Teriyaki sauce• Worcestershire sauce• Taco seasoning

Preparing foods that can be frozen and reheated later is a good idea for those days when you are just too tired to cook.

Remember to check the nutrition label if you're not sure how much salt is in your seasoning or food!



Potassium

Water pills help your body get rid of extra fluid and can also cause potassium to leave the body. Discuss your diet with your health care provider, and know if you need to increase or decrease your intake of potassium rich foods. The following foods are good sources of potassium:

- banana
- orange
- orange juice
- prune juice
- prunes or dates
- nectarines
- dried apricots
- cantaloupe
- raisins
- figs
- baked or boiled potato
- tomatoes
- winter squash
- spinach
- sweet potato
- baked beans

Alcohol

Alcohol weakens your heart and can cause worsening heart failure. It also interacts with medications that you may be taking. Ask your health care provider if it is safe for you to drink alcohol.

Smoking

Smoking can cause your heart to beat too fast. When your heart is already weak, smoking will only make it much worse! Cigarettes contain toxic chemicals that increase your blood pressure, which damages your blood vessels. Ask your health care provider about ways to quit smoking.



Drinking Fluids

Many heart failure patients take water pills to help remove extra fluid. It is important not to increase your fluid intake. You may feel thirsty because of your heart condition. If you are thirsty, try sucking on small amount of hard candy or gum to help relieve dry mouth.

The following are considered fluids and should be taken in small amounts:

- water
- coffee
- soup
- ice cream
- juice
- tea
- pudding
- yogurt
- soda pop
- milk
- Jell-O
- Popsicles
- ice cubes

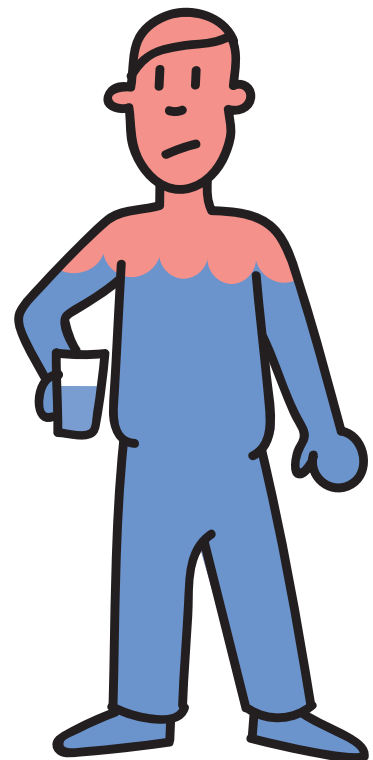
Living with Fluid Restriction

- You may be told to restrict the amount of fluid that you drink, which can be difficult to do.
- It is helpful to keep a written record of your total fluid intake each day.
- Refer to your discharge instructions for your specific fluid restriction instructions.

Tips for Fluid Control

- Chew on ice. (Remember to include in daily fluid allowance)
- Keep your home well humidified.
- Rinse your mouth with mouthwash.
- Try lemon wedges and sugar free hard candy to stimulate saliva.
- Measure out fluids allowed for the day in the morning.

- **Remember that 2 cups of retained fluid is equal to 1 pound of fluid gained**
- **1 Liter of fluid = 1 kg of body weight (2.2 lbs)**



Making Better Choices

Heart Healthy Cooking Tips

- ♥ Use cooking methods that require little or no fat such as boil, broil, bake, roast, poach, steam, sauté, stir-fry or microwave
- ♥ Chill soups and stews after cooking so you can remove the fat on top
- ♥ Trim off any visible fat on meat and poultry
- ♥ Drain the fat after browning
- ♥ Consider the fat you use for cooking, baking, salad dressings, and spreads
- ♥ Avoid breading your meat, poultry, or fish because it increases the fat content of the food
- ♥ Read food labels carefully for the amount of fat, specially saturated fat and cholesterol
- ♥ A “low fat product” must contain 3 grams or less of fat per serving
- ♥ “Sodium-Free” is less than 5 mg of sodium per serving
- ♥ “Low Sodium” is 140 mg or less of sodium per serving



Dining Out

Be an informed diner!

- Ask your server about ingredients and how the food is prepared
- Ask for food to be prepared with little or no salt
- Order salad dressing on the side and use only a little bit
- Try fresh fruit salad, Jell-O, or angel food cake for dessert
- Avoid fast foods and fast food restaurants

Foods to avoid	Foods to choose
<ul style="list-style-type: none">• Olives• Pickles• Croutons• Bacon bits• Cheese• Mayonnaise• Marinated salads• Muffins or croissants	<ul style="list-style-type: none">• Fresh fruit• Steamed vegetables• Salad with oil and vinegar• Grilled, baked, or broiled food• “Plain” foods (baked or boiled potatoes, plain rice or pasta)• Whole grain breads

Something to think about... are “healthy” fast foods really healthy?

Most are not and you must realize that if you do eat in fast food restaurants (like McDonald’s or Popeye’s or Taco Bell) even their “healthy” choices can be a problem.

A honey mustard grilled snack wrap and a honey BBQ grilled snack wrap will amount to

- 25% of your daily calories (500 calories)
- 35% of your daily saturated fat (7 grams)
- **66% of your daily salt intake!**

4 piece chicken nuggets, regular-sized mashed potatoes, and corn on the cob will amount to

- 23% of your daily calories (450 calories)
- 33% of your daily saturated fat (6.5 grams)
- **41% of your daily salt intake!**

A bean burrito and a Fresco Country taco will amount to

- 26% of your daily calories (520 calories)
- 28% of your daily saturated fat (5.5 grams)
- **65% of your daily salt intake!**

Exercise

Talk with your health care provider about the types and amount of exercise that are right for you. Your doctor may refer you to a cardiac rehabilitation program or to a physical therapist to help get you started.

There are many benefits to regular exercise:

- Exercise can reduce stress, depression, and anxiety.
- Short walks are a good way to begin exercise.
- Avoid any exercise that causes discomfort, chest pain, shortness of breath, dizziness or lightheadedness. Listen to your body.
- Avoid exercising when it's too hot, cold or humid.
- Resume sexual activity according to your health care provider's instructions.
- Avoid heavy lifting. Light weight training is good for your heart. Talk to your health care provider about recommendations.
- Stick with it! If you exercise regularly, it will soon become a part of your lifestyle. Finding an exercise "buddy" will also help you stay motivated.
- Rest is as important as activity. Balance your activity with rest.



Cardiac Rehabilitation Program

Mount Sinai's Cardiac Rehabilitation Program is a medically supervised program that helps improve the health and well-being of people who have heart problems. Patients who have had a heart attack, bypass surgery, coronary interventions and/or heart failure may be good candidates for this program. Cardiac rehabilitation is a comprehensive, individualized program that focuses on exercise, diet education, counseling, and emotional support. The team includes cardiologists, advanced practice nurses, an exercise physiologist, and other health professionals, who work closely with your referring physician to develop a 6-12 week program to meet your needs.

There are many benefits to participating in a cardiac rehabilitation program:

- Exercise training program
- Education on managing your risk factors
- Education and counseling to reduce stress
- Help with promoting healthy living in order to return to a high functioning life



Sexual Activity and Heart Failure

Many people with heart failure, as well as their partners, are not sure if they should or could have sex because of their heart condition. This uncertainty may leave you and your partner feeling embarrassed or uncomfortable to ask questions or speak with your health care provider. The good news is that most people with heart failure can continue to enjoy sexual relations once their symptoms are under control.

Feelings such as stress, anxiety and depression are natural and can be expected after learning of a diagnosis like heart failure and can often lead to a loss of interest in sex/ intimacy. Communicating with your partner and health care providers can help you manage your feelings and concerns.

People with heart failure can frequently have physical challenges with sex such as erectile dysfunction (impotence), problems with ejaculation, or the inability to have an orgasm or climax. Some medications that are prescribed to manage heart failure may cause these problems. Feel comfortable to speak with your health care provider about any concerns or issues you may be experiencing. There are many options available to you to help you enjoy a healthy sex life.



Keep in mind that you should avoid sex if you are: not feeling well, very short of breath, or having chest pains, just as you would avoid other activities or exercise. Here are some suggestions to help you feel more comfortable to engage in sexual relations:

1. Choose a time for sex and intimacy when you are rested, relaxed and not feeling pressured
2. Avoid having sex immediately after eating a heavy meal
3. Choose to have sex in a comfortable and familiar room and slowly increase your activity and listen to your body.
4. Choose less strenuous positions that are comfortable for you and your partner. Take a break if you start to feel uncomfortable, breathless, or tired - you can resume after you have rested.

Sexual health is an important part of wellbeing. Most people with heart failure can and do enjoy a rewarding sexual and intimate life.

Medications

Medications are very important for treating your heart failure. They maintain health, improve symptoms, and help prolong life. It is important to take them as instructed by your health care provider. Avoid missing a dose of your cardiac medications.

It is very important that your health care provider is aware of all the medications that you are taking. This includes over-the-counter medications, vitamins, home remedies and herbal medicines.

PLEASE REMEMBER TO KEEP ALL MEDICATIONS AWAY FROM CHILDREN

Tips for Taking Your Medications

- Always carry a list of your medications in your wallet or purse. Write down the dose of each drug and the time of day that you take them. There are many “apps” to help you keep track of your medications. Ask your health care provider.
- Learn what each medication does and what it looks like.
- Don't be afraid to call your health care provider or pharmacist if you have any questions. They are there to help you.
- Make sure you have enough medications. Plan ahead so you don't run out.
- Take ALL of your medications as prescribed. If you think you may be experiencing a side effect from medicine, call your health care provider right away.



- Keep all medications in their original labeled container. DO NOT mix different medications into the same container for storage, unless you are using a pill organizer to help you manage your medications.
- Do not double up on medications. If you miss a dose, call your health care provider.
- If you get sick and can't take your medications, contact your health care provider.
- Write down any questions you may have about your medications and bring them to your health care provider appointments and pharmacy visits.
- When traveling keep your medication in their original containers and do not pack them in your luggage. Always carry them with you.

Heart Failure Medications

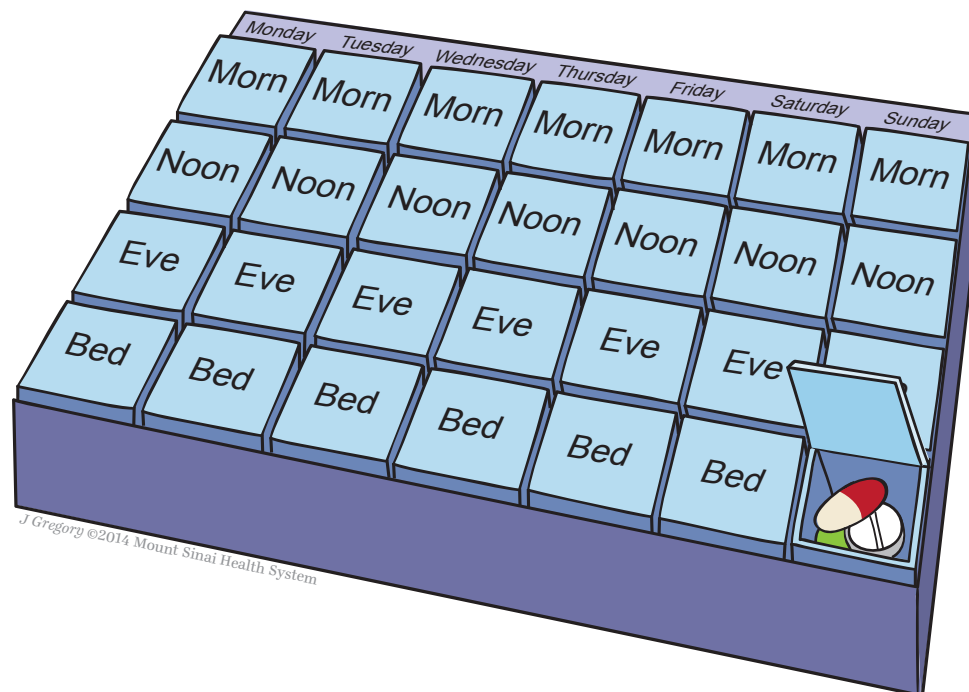
There are several types of medications that are commonly used to treat heart failure. Used together or separately, they improve the functioning of your heart because they:

1. Help to make your heart pump stronger
2. Control heart rhythm and heart rate
3. Relax blood vessels
4. Control fluid
5. Slow progression of the disease

Most people with heart failure take several medications.

A standard medication regimen for people with heart failure includes:

- An ACE inhibitor/ARB or ARNI
- A Beta-blocker
- An Aldosterone antagonist
- A Diuretic



Heart Failure Medications

medication	name	actions	possible side effects
ACE inhibitors	Benazepril (Lotensin) Captopril (Capaoten) Enalapril (Vasotec) Fosinopril (Monopril) Lisinopril (Zestril) Quinapril (accupril) Ramipril (Altace)	<ul style="list-style-type: none"> • Blocks harmful stress hormones that make heart failure worse • Help heart muscle work better • Can help you feel better and keep you out of the hospital 	<ul style="list-style-type: none"> • Chronic cough • Kidney problems • Can lower your blood pressure • Weakness or dizziness • Altered taste • Swelling of face or lips (rare but serious – seek medical help immediately) • Elevated potassium levels
ARNI (Angiotensin Receptor neprilysin inhibitor)	sacubtril/Valsartan (Entresto)	<ul style="list-style-type: none"> • The combination medication works by relaxing blood vessels so that blood can flow more easily and effectively to the rest of the body 	<ul style="list-style-type: none"> • Swelling of face or lips (rare but serious –seek medical help immediately) • Low blood pressure • Elevated potassium levels • Cough • Dizziness

medication	name	actions	possible side effects
Beta-blockers	Bisoprolol (Zebeta) Carvedilol (Coreg) Metoprolol Succinate (Toprol XL)	<ul style="list-style-type: none"> • Help the heart muscle not to have to work so hard • Helps the heart pump better (by lowering the heart rate) • Blocks harmful stress hormones that make heart failure worse • Can help you feel better, live longer and keep you out of the hospital 	<ul style="list-style-type: none"> • May make you feel tired • May cause more fluid to build up – tell your provider • May worsen asthma symptoms (wheezing) • Can lower your blood pressure
Hyperpolarization-activated cyclic nucleotide-gated channel blocker indicated	Ivabradine (Corlanor)	<ul style="list-style-type: none"> • The medication works by affecting your heart’s electrical activity in order to slow the heart rate. This helps the heart pump more efficiently 	<ul style="list-style-type: none"> • Lower heart rate • Temporary visual disturbance (flashes of light)
Aldosterone antagonist	Spironolactone (Aldactone)** Eplerenone (Inspra) ** Can cause breast swelling and or tenderness especially in men	<ul style="list-style-type: none"> • Blocks the body from holding on to sodium (salt) and water • Needs careful monitoring of potassium levels • Helps prevent further damage to the heart 	<ul style="list-style-type: none"> • High potassium, low sodium levels

medication	name	actions	possible side effects
Diuretics (water pills)	Bumetanide (Bumex) Furosemide (Lasix) Torsemide (Demadex) Metolazone (Zaroxolyn) Hydrochlorothiazide	<ul style="list-style-type: none"> • Improves your symptoms by getting rid of excess water in your body 	<ul style="list-style-type: none"> • Tiredness • Low blood pressure • Dizziness • Poor kidney function • Low potassium levels
Cardioglycoside	Digoxin	<ul style="list-style-type: none"> • Helps your heart pump better • Increases hearts strength • Helps keep you out of the hospital • Not all people with heart failure need digoxin • Needs monitoring of blood levels 	<ul style="list-style-type: none"> • Bad taste and loss of appetite • Nausea and vomiting • Decreased kidney function • Headaches • Skipped heartbeats • Blurred or colored vision
Angiotensin II receptor antagonists	Candesartan (Atacand)* Valsartan (Diovan)* Irbesartan (Avaparo) Losartan (Cozaar) Olmesartan (Benicar) *indicated for systolic heart failure	<ul style="list-style-type: none"> • Decreases harmful stress hormones (similar to ACE inhibitors) • Helps heart muscle work more efficiently • May help improve symptoms and extend your life 	<ul style="list-style-type: none"> • Dizziness • Weakness • Diarrhea • Can lower blood pressure • Decrease kidney function • Can raise potassium levels
Vasodilators	Hydralazine/nitrates (BiDiL) Isosorbide dinitrate (Isordil) Isosorbide mononitrate (Imdur)	<ul style="list-style-type: none"> • Opens up vessels of the heart • Makes it easier for the heart to pump • Heart muscle works more efficiently • Lowers blood pressure • Makes you feel better and may extend life 	<ul style="list-style-type: none"> • Dizziness and or lightheadedness • Headaches • Flushing • Fast heart rate • Palpitations • Congestion in nose

medication	name	actions	possible side effects
Calcium channel blockers	Amlodipine (Norvasc) Nifedipine* Diltiazem (Cardizem)* Verapamil * *these medications should be avoided if you have heart failure from poor pumping function (Systolic Heart Failure)	<ul style="list-style-type: none"> • Relaxes blood vessels and increases blood and oxygen to the heart • Lowers blood pressure • Can reduce symptoms 	<ul style="list-style-type: none"> • Headaches • Flushing of face • Dizziness • Ankle swelling
Blood thinners (Anticoagulants)	Warfarin (Coumadin)** Dabigatran (Pradaxa) Apixaban (Eliquis) Rivaroxaban (Xarelto) Aspirin Clopidogrel (Plavix) Ticlopidine (Ticlid) **needs blood checked regularly	<ul style="list-style-type: none"> • Prevent blood clots • Reduce chance of heart attack and stroke 	<ul style="list-style-type: none"> • Increased risk of bleeding and bruising • May restrict you from certain activities – speak to your health care provider
Anti-arrhythmics	Pacerone (Amiodarone) Dofetildine (Tikosyn) Dronedarone Mexiletine Sotalol (Betapace)	<ul style="list-style-type: none"> • Helps your heart maintain a regular rhythm 	<ul style="list-style-type: none"> • Dizziness • Numbness and tingling in arms • Facial flushing • Headaches • nausea • Shortness of breath
Supplements	Potassium Chloride (K-Dur, Klor-Con) Magnesium oxide	<ul style="list-style-type: none"> • May be needed as a supplement for taking water pills • Take only as directed 	<ul style="list-style-type: none"> • High potassium and high magnesium • Nausea and vomiting • Abdominal pain • Diarrhea • Muscle cramps

Caution with medications

Be sure to talk to your health care provider before you use any over the counter medications especially antacids, laxatives, cough medicines and pain medications.

Avoid nonsteroidal anti-inflammatory medications (NSAIDs). These include ibuprofen (Advil, Motrin), naproxen (Aleve) Celebrex and Mobic. It is OK to take acetaminophen (Tylenol).

Because a few of your heart failure medications can cause dizziness, spacing them out at different times through the day may help prevent dizziness.

Please inform your health care provider if you are having problems with getting your medications

Additional Medications

Cholesterol lowering drugs: High cholesterol increases your risk of heart attacks and strokes, and heart failure patients are often prescribed drugs to lower cholesterol. There are a variety of cholesterol drugs available, each with special instructions for use. Speak to your health care provider or pharmacist about any cholesterol drugs you may be taking.



Devices

Depending on your heart condition you may be advised to consider an implantable device that could help to treat your heart and or an irregular heart rhythm that you may be at risk for. These devices include:

Implantable cardiac defibrillator (ICD)

An ICD is a small device that is placed under the skin in the upper chest area. It has wires that go into the right side of your heart and act as a pacemaker and can monitor your heart's electrical rhythm.

If you have a life threatening irregular heart rhythm, the device can help restore a normal heart rhythm. ICDs have been shown to save lives in select patients with heart failure.

Biventricular pacemaker (CRT - cardiac resynchronization therapy)

This device is similar to an ICD, but it has an extra wire that goes to the left side of the heart. This extra wire helps to “synchronize” (keep time with) the pumping of the right and left sides of your heart. In some patients, these devices have been shown to help improve heart function and save lives. Some patients may feel better with this device.

If you need both devices, a CRT device and an ICD come in one device (CRT-D).

Your health care provider will discuss whether these devices are an option for you.

Advanced therapies

For patients that have severe symptoms that are difficult to control with medication and the implanted devices, advanced therapies may be an option for you. Your health care provider will discuss whether advanced therapies are an option for you.

Three options that your heart failure provider may suggest are:

Left Ventricular Assist Devices (LVAD) – a machine implanted into your abdomen that takes over the pumping needs of the left side of the heart.

Total Artificial Heart (TAH) – This device replaces the heart with a mechanical device until a heart transplant becomes available

Heart Transplantation – replacing your heart with a donor heart.

Talking with Your Health Care Provider

It is important to feel comfortable calling your health care provider for any questions or concerns about your health. We are here to help you and your health and well-being are our priority.

Call your provider as soon as you notice a worsening in symptoms (shortness of breath/ fatigue) and you are in the **yellow zone** of the Heart Failure Action Plan (see next page). Our goal is to help you stay out of the **red zone** and out of the hospital. (See **Heart Failure Action Plan** at end of book.)

Please keep a daily weight log and help us to help you feel the best that you can. (See **My Daily Weight Chart**)



Common signs and symptoms people with HF call for help to manage:

- Shortness of Breath/Cough
- Fatigue
- Pain
- Insomnia
- Weigh Gain

My Daily Weight Chart

Name: _____

Month: _____

1		17	
2		18	
3		19	
4		20	
5		21	
6		22	
7		23	
8		24	
9		25	
10		26	
11		27	
12		28	
13		29	
14		30	
15		31	
16			

Palliative and Supportive Care

What is Palliative Care?

Palliative care is specialized whole-person care for patients and families with chronic serious illnesses like heart failure. It provides an added layer of support by providing relief from bothersome symptoms and assists in decision making to ensure your treatments are consistent with your hopes and goals. The overall goal is to help to improve quality of life for both the patient and family/caregiver.

Palliative care is provided by a specialty team of doctors, nurses and other health care professionals who work together with a patient's primary doctor, and heart failure team, to provide extra support. Palliative care is appropriate at any age and at any stage of a chronic serious illness and can be provided at the same time as standard medical treatment.

Improves Quality of Life

Palliative care focuses on symptoms such as shortness of breath, fatigue, pain, constipation, nausea, loss of appetite, difficulty sleeping and depression. The goal is to improve your quality of daily living so you can feel the best that you possibly can as you live with advancing heart failure.

A Partnership of Patient, Specialists and Family

Palliative care is a team approach to care. The core team includes doctors, nurses and social work palliative care specialists. Massage therapists, pharmacists, nutritionists, chaplains and others may also be part of the team.

The team becomes a partner with you, your family and your other doctors. They support you and your family every step of the way, not only by controlling your symptoms, but also by helping you to understand your treatment options and goals.



Preparing for End of Life

Many patients and families find it helpful to talk about end-of-life planning. Some topics that your team may be helpful in discussing with you and your family include: Health Care Proxy, Living Will, and orders for treatment at end of life, including DNR.

Discussing end-of-life planning can be stressful and upsetting. However, by clearly expressing your wishes and needs, you, as well as your family and caregivers, can avoid having to make some of the difficult decisions that need to be made during an overwhelmingly stressful time.

What are advance directives?

Advance directives are legal documents that let people share their wishes regarding the treatment to be followed if they are too sick or unable to make decisions about their own medical care.

Advance directives include:

- Health Care Proxy
- Living Will
- Do-Not-Resuscitate (DNR) Order

Health Care Proxy

New York State's preferred form of an Advance Directive is the Health Care Proxy. It allows you to choose someone you trust – for example, a family member or close friend – to speak for you and make health care decisions if you can no longer make decisions yourself. You fill out a form called a Health Care Proxy. The person you choose is called your health care agent. By appointing a health care agent, you can make sure that health care providers such as doctors and nurses will follow your wishes. Hospitals, doctors and other health care providers must follow your health care agent's decisions as if they were your own.

Living Will

A Living Will is a legal document that you can create when you are feeling well. A Living Will expresses your specific instructions and choices about various types of medical treatments that are acceptable to you if your health worsens. Living Wills are recognized as evidence of your wishes if you are, or become, seriously ill and not able to communicate.

You need to be specific about your wishes regarding your care. Examples include nutrition and hydration (nourishment and water) whether through an IV tube or a feeding tube.

Your health care team can help you, and your caregivers, discuss and plan your living will.

Do-Not-Resuscitate (DNR) Order

When death is expected from being at the end stage of an illness, many patients wish to be allowed to die with dignity outside of a hospital and in the comfort of their own home, if possible. Discussing such wishes is an important part of your care plan.

To assure that your wishes are followed, hospitals and health care providers have developed Do-Not-Resuscitate (DNR) policies in accordance with New York law.

When a patient requests, a DNR order is written by the doctor and put in the medical chart. It instructs the doctors and nurses not to try to start emergency treatment if your heart stops or you stop breathing. This means that doctors, nurses and other health care practitioners will not begin such emergency procedures as mouth-to-mouth resuscitation, external chest compression, electric shock or insertion of a breathing tube. Instead, careful measures will be taken to ensure that all of your symptoms are managed and that you are comfortable and surrounded by your loved ones.

Notes

CHF Patient Care Discharge Checklist

Name _____

Date ____/____/____

Please fill out this checklist in the hospital prior to going home. If you have any questions, please reach out to your CHF team (Physician, Nurse Practitioner or Nurse)

- Do you have all your medications?
 Yes NO plan for resolution?

- Do you have a Rapid Follow up (RFU) clinic follow up appointment?
 Yes NO plan for resolution?

- Do you have a follow up appointment with your Cardiologist/Primary Care Doctor?
 Yes NO plan for resolution?

- Do you understand your Discharge Care Plan?
 Yes NO plan for resolution?

- Do you have a working weight scale at home?
 Yes NO plan for resolution?

- Do you have your heart failure water pitcher?
 Yes NO plan for resolution?



**Mount
Sinai**
Heart

Patient's Name: _____

Doctor or Health Care Provider's Name: _____

Doctor or Health Care Provider's Phone Number: _____

Green Zone

ALL CLEAR

- No chest pain
- No shortness of breath
- Normal activity level
- No weight gain.

Green Zone Means:

- Continue taking your medications as directed
- Continue weighing yourself daily
- Follow a low-salt diet
- Follow an exercise plan as directed by your doctor or health care provider

Yellow Zone

CAUTION

If you have any of the following:

- Weight gain of 2 to 3 pounds within 24 hours, or 5 pounds or more in 1 week
- Increased swelling in legs or feet
- Increased shortness of breath
- Increase in number of pillows needed to sleep at night

Yellow Zone Means:

Your symptoms may indicate that you need an adjustment of your medications.

Call your physician, nurse coordinator, or home health nurse.

Name: _____

Number: _____

Instructions: _____

Red Zone

MEDICAL ALERT

- Difficult breathing at rest
- Wheezing or chest tightness at rest
- Need to sit in a chair to sleep
- Weight gain of over 5 pounds in one week
- Dizziness or increased fatigue or tiredness

Red Zone Means:

This indicates that you need to be evaluated by a physician right away.

CALL YOUR PHYSICIAN RIGHT AWAY.

If you have unresolved Red Zone symptoms or if you have unrelieved chest pain, shortness of breath, confusion, or fainting call 911 or go to an Emergency Room

