Guideline: Heart Failure Discharge Readiness, Inpatient/Observation

Clinical algorithm:

Demonstrates clinical stability X 24 hours prior to DC:

- HR ≤ 100 beats/minute
- BP: SBP ≥ 90 at rest and with activity
- Absence of symptomatic orthostatic hypotension X 24h hours (Goal: ambulation before discharge)
- Absence of systemic HTN X 24 hours (Goal BP < 140/90)
- Afebrile X 24 hours (T < 100.0 F)
- SPO2 ≥ 92% (> 90% with COPD)

Resolution of ADHF Symptoms X 24 hours prior to DC:

- SOB/orthopnea/dyspnea at baseline
- Absence of abdominal bloating/ascites
- Absence of JVD and rales, and peripheral edema/weight returned to baseline
- Tolerate ADLs/ambulation and fatigue improved

HF Treatment Maximized 24 hours prior to DC:

- Adequate diuresis on oral diuretic regimen AND can demonstrate diuresis and stable renal function (Creat. within 30% of baseline - exclusion Cardio-Renal Syndrome patients) and electrolytes (K >3.8/<5.0, Mg>2.0, Na+ ≥ 134 mEq/L). Target weight loss ≥ 3 kg.
- Consider Nephrology Consult for CKD Stage 4 or greater, ESRD, oliguria/anuria
- Off of IV Inotropes/Vasodilators or if on home IV inotrope- no titration of dosage within 24 hours of discharge
- Absence of Mechanical Ventilation X 48 hours (excludes CPAP for OSA).

Comorbidities addressed:

- Anemia
- Hypo/Hyper Thyroid
- HTN
- CKD
- Valve disease
- Ischemic Heart Disease
- DM
- COPD
- Anxiety/depression
- Sleep Apnea
Clinical guideline summary

CLINICAL GUIDELINE NAME: Heart Failure Discharge Readiness, Inpatient/Observation

PATIENT POPULATION AND DIAGNOSIS: New or existing diagnosis of acute congestive heart failure on the problem list, as primary or secondary diagnosis, for adult patients admitted to Observation or Inpatient units.

APPLICABLE TO: All Spectrum Health Sites

BRIEF DESCRIPTION: Basic care of patients with new or existing acute heart failure, with a goal of preventing 30-day readmission.

OVERSIGHT TEAM LEADER(S): Dr. Michael Vredenburg and Dr. Michael Dickinson

OWNING EXPERT IMPROVEMENT TEAM (EIT): Heart Failure Expert Improvement Team

MANAGING CLINICAL PRACTICE COUNCIL (CPC): Cardiovascular Health

CPC APPROVAL DATE: 3/2/2021

OTHER TEAM(S) IMPACTED (FOR EXAMPLE: CPCs, ANESTHESIA, NURSING, RADIOLOGY): Acute Health, Cardiology, Nursing, Pharmacy, Nutrition, Care Management

IMPLEMENTATION DATE:

LAST REVISED: 2/23/2021

FOR MORE INFORMATION, CONTACT: Dr. Michael Vredenburg, Angela Malone, or Ashly Sweet

References


