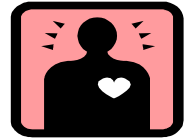






# Heart Failure: PROVIDER DOCUMENTATION

## Hospital Quality Measures

### Documentation Protocols



	Measure	When	What to Document	Where to Document	*Special Situations	Why?
	<b>Discharge Instructions</b>	Discharge	Utilize ____ or write discharge instructions that include a complete list of pt medications, contraindications, follow up appt, and weight gain for the nurse to provide to the pt.		Do NOT document "continue home meds".	Non-compliance with physician's instructions is often a cause for re-hospitalization. Thus it is important that pts and families understand their condition and what they should to do after discharge. (Journal of American College of Cardiology, 1995)
	<b>Smoking Cessation Counseling</b>	On Admission	Utilize _____ or provide counseling to patient			Cigarette smoking accounts for 1 out of 5 deaths in the United States. Pts who receive even brief smoking cessation advice from their provider are more likely to quit than those who receive no counseling (Public Health Service, 2000)
	<b>LVEF Assessment</b>	On Admission	Utilize _____ or determine LVEF note Ejection Fraction.		If pt has never had an echo performed, plan to have assessment this admission or document that assessment is planned after discharge.	The combined use of history, physical examination, chest x-ray, and electrocardiography cannot reliably distinguish between the major categories of heart failure: left-ventricular systolic dysfunction, left-ventricular diastolic dysfunction, or a non-cardiac etiology. If a measurement of ventricular performance is not obtained in patients presenting with heart failure, appropriate treatment may be withheld. Specifically, patients with left ventricular systolic dysfunction will not be identified and treated with agents known to prolong life. (Clinical Practice Guidelines, 1994; Journal of American College of Cardiology, 1995).
	<b>ACEI at Discharge for LVSD</b>	Ejection Fraction < 40%	Utilize _____ or note pt discharged on ACEI or contraindications (allergy, moderate/severe aortic stenosis, other reason)		Renal failure is not a hard fast contraindication according to the literature. If you would like to withhold RX of ACEI, note "not prescribing ACEI, due to X,Y,Z reason" in your DC summary	Treatment with ACEI reduces morbidity and mortality in pts with heart failure and Left Ventricular Systolic Dysfunction (Journal of American College of Cardiology, 1995; New England Journal of Medicine, 1991 and 1992)