

This guide contains important information. Learn how to manage your heart failure.

Work with your doctor • Take your medicine • Change your lifestyle

Take Care *of* YOUR HEART

keep and refer to often

Have you been told you have heart failure? This means your heart is not able to pump enough blood to meet the needs of your body. Heart failure cannot be cured. It can be treated with drugs and lifestyle changes. This brochure can help you.

Your Weight - You Can Help Yourself

Weigh daily – it's important. Rapid weight gain may be a sign you are retaining water.

- Weigh every morning after using the bathroom.
- Always use the same scale.
- Wear the same amount of clothing.
- Record your weight every day.
- Place the scale on a hard, flat surface.
- Take your daily weight record to every doctor appointment or hospital visit.

Your Diet - Make Healthy Choices

Make healthy food choices. Visit the hospital dietitian if you need help.

- Ideal weight reduces your heart's workload.
- Limit fluid intake, as directed by your doctor.
- Avoid drinking alcohol.
- Eat a low-sodium (low salt) diet.

- Read food labels.
- Do not add salt when cooking or at the table.
- Limit eating canned food. (drain and rinse to lower salt content)
- Limit the amount of cholesterol and fat in your diet.
- Follow your diet, as directed.

Take Care of Yourself

Manage your heart failure. Follow these self-management goals, and work with your doctor.

- Keep all your doctor appointments – your doctor is there to help you.
- Wear or carry identification of your medical condition and current medications.
- Decrease your stress level, when possible.
- Get plenty of rest.
- Get a yearly flu shot and be up-to-date on your pneumonia shot.
- Get educated – ask your doctor and nurse all your questions.

**Heart failure is manageable.
Make these goals part of your life
and take care of yourself!**

Take Medications Correctly

Follow the directions – it's important.

- Take your medicine at the time your doctor ordered.
- Use a daily event (like brushing your teeth or a certain meal) to remind yourself.
- Do not stop taking your medications. If cost is an issue, ask about a generic or programs that can help you pay.
- Place medications in a daily or weekly pill box. Do not skip a dose. If you do, take it right away, but do not double dose.
- Read the instructions that came with your medication.
- Know the side effects and call your doctor if you have any.
- Avoid drinking alcohol.
- Tell all your doctors about all medications and herbs you take (include cold or flu medications).

Special Situations

People with diabetes and people who smoke have an increased risk for heart disease – take special care of yourself. Prevent complications of diabetes by keeping up-to-date on your A1C test, lipid profile, dilated eye exam and other care. Smoking puts strain on your heart. If you smoke, you should quit.

- Set a date to quit or begin cutting down the number of cigarettes you smoke each day.
- Line up support; friends, family or a support group can help.
- Avoid situations that make you want to smoke.
- Ask your doctors about medications to help you quit.
- Look for a smoking cessation program or join a toll-free quit line to help you.

For more information, call 573-302-2253.

What is Heart Failure?

The heart loses its pumping power. When the heart does not pump blood properly, the blood backs up in your lungs and other body parts.

What Causes Heart Failure?

Weakness in the heart muscles may happen because of past heart attacks, high blood pressure, heart valve disease and infections of the heart valve or heart muscles.

What are the Signs and Symptoms of Heart Failure?

- Shortness of breath
- Chest pain
- Swelling of hands, feet, ankles and/or legs
- Trouble sleeping
- Need more pillows to sleep
- Weight gain
- Tiredness, weakness or dizziness
- Decreased desire for food
- Palpitations – sudden fast heartbeats
- Decreased urine output
- Shoes are too tight and/or clothes become too tight at waist
- Trouble getting rings on and off

Diagnostic Testing

- **Electrocardiogram (EKG)** – can detect past heart attacks or abnormal heart rhythms that may weaken the heart
- **Chest X-ray** – can show fluid in the lungs or enlargement of the heart
- **Echocardiogram** – can show faulty heart valves and enlargement of the heart's chambers

Rehabilitation/Exercise

Talk with your doctor about the amount of exercise you can do. Your doctor may refer you to a cardiac rehabilitation program. This is a medically supervised program to help you recover.

As you begin exercising:

- Start slow and build to 20 or 30 minutes, three-to-four times a week.
- Stop activity immediately if you feel:
 - increased shortness of breath
 - an irregular heartbeat
 - faint or dizzy
 - chest pain

Call your doctor if symptoms do not quit after 15 minutes of rest.

Self-management

GOALS

Medications

The medications your doctor ordered you to take are important. Do not stop taking them without talking to your doctor. Some heart failure medications include:

- **Diuretic “water pill”** – decreases fluid retention and swelling. A potassium supplement may be given to replace lost potassium.
- **Ace inhibitors/ARBs** – lowers blood pressure, decreases strain on the heart and helps it “pump” better
- **Beta Blockers** – helps lower blood pressure, slows heart rate and lessens the workload of the heart
- **Digoxin** – strengthens the heart and slows the heart rate
- **Warfarin “blood thinner”** – prevents blood clots

When to Call Your Doctor

Talk with your doctor about the amount of exercise you can do. Your doctor may refer you to a cardiac rehabilitation program. This is a medically supervised program to help you recover.

- Weight gain of three pounds in one day or five pounds in one week
- Swelling of hands, feet, ankles, legs or abdomen
- Shortness of breath or difficulty breathing
- A feeling of fullness (bloating) in your stomach
- Nausea or poor appetite
- Extreme fatigue or loss of energy
- Difficulty sleeping
- A respiratory (lung) infection or a worsening cough
- Fast heart rate (around 120 beats per minute)
- New irregular heartbeat
- Chest pain or discomfort that occurs during activity and is relieved with rest
- Decreased urination
- Restlessness, confusion
- Constant dizziness or lightheadedness
- Decreased exercise tolerance

When to Seek Emergency Care

Go to your local emergency department or call 9-1-1 if you have:

- New chest pain or discomfort that is severe, unexpected and occurs with shortness of breath, sweating, nausea or weakness
- Fast heart rate (more than 120 - 150 beats per minute) – especially if you are short of breath
- Shortness of breath not relieved by rest
- Sudden weakness or paralysis (inability to move) in your arms or legs
- Sudden onset of severe headache
- Fainting spell with loss of consciousness



54 Hospital Drive • Osage Beach, MO
573-348-8000 • www.lakeregional.com

Chronic Condition Education

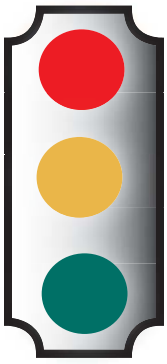
A service of the hospital to provide support and education to patients and families who have been diagnosed with chronic illness:

- Appropriate for all patients who have a life-altering, life-limiting or chronic illness
- This consult is appropriate at diagnosis or at any point during hospitalization to provide education and help with symptom management related to illness.
- Palliative care team services assist patients and families with end-of-life symptom management and decision making.

If you think you or a family member may benefit from a chronic care consult for education or palliative care services, please discuss this with your physician or nurse. Outpatient education consult may be made by your primary care physician or specialist.

Role of Social Work Services

- Establish a trusting relationship and open communication with patient and family.
- Partner with the patient/family to understand the expected outcomes of care. Facilitate communication between physicians, health care providers and community and government agencies.
- Address the patient's emotional reaction to the illness and the impact of the disease on the patient and their families.
- Offer support and resources to the patient
- Identify stressors related to hospitalization and illness, promote sound decisions and assist in developing coping mechanisms.
- Educate patient/family about advance directives, guardianship and power of attorney.
- Complete psychological assessment to evaluate resources, strengths and support systems, as well as addressing the psychological needs of the patient.
- Coordinate discharge planning needs:
 - home care
 - skilled care
 - hospice care
 - durable medical equipment
 - transportation resources
- Guide the patient/family to more effectively navigate the health care system and social systems for optimal outcomes.



Heart Failure

Know and Follow Your Signals

PRIMARY CARE DOCTOR: _____

PHONE NUMBER: _____

CARDIOLOGIST: _____

PHONE NUMBER: _____

GOAL WEIGHT: _____

Medical Alert

Stop and call your doctor if you have:

RED MEANS

- No relief from chest pain
- No relief from shortness of breath with activity
- Shortness of breath at rest
- Wheezing or chest tightness at rest
- You need to be evaluated by a doctor right away!
- **Call your doctor immediately!**

Caution

Go with caution if you have two or more of these warning signs:

YELLOW MEANS

- Increased weight _____ lbs. in a day or _____ lbs. in a week
- Increased cough when lying down or after activity
- Increased swelling of hands, ankles, feet or legs
- Increased shortness of breath with activity
- Increased use of pillows or need to sit in a chair to sleep
- Chest pain
- Unusual symptoms that bother you
- Your symptoms may show you need a change in your medications
- **Call your doctor-** your doctor may want to adjust your medication

All Clear

Keep going if you have no:

GREEN MEANS

- Shortness of breath
- Swelling
- Weight gain
- Decrease in your ability to maintain your activity level
- Your symptoms are under control
- Continue taking all your medications as ordered
- Follow your low-salt diet
- Keep all doctor's appointments

Take this record to your doctor's appointments.

Name _____

Current Weight _____

Goal Weight _____

(ask your doctor)

- Weigh yourself in the morning after using the restroom.
- Write down your weight on this record.
- Weight increase may be a sign you are retaining water. Your doctor may need to change your treatment plan. If you gain three pounds in one day or five pounds in a week, **call your doctor.**

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Nutrition Therapy for CHF Patients

Low-sodium nutrition therapy can help heart failure patients feel better and prevent future heart problems.

Sodium Intake

Fluid buildup makes your heart work harder, which can increase your blood pressure. Limiting your sodium intake helps to prevent and control fluid buildup in your legs and around your heart. In addition, your doctor or dietitian may advise you to limit your fluid intake to help normalize your blood sodium level.



Heart failure patients typically are advised to limit their sodium intake from food and beverages to 1,500 milligrams per day. Salt is the main source of sodium in food.

When grocery shopping, always refer to the Nutrition Facts label to determine sodium content in food items. Try to select foods with no more than 140 mg of sodium per serving. Foods with more than 300 mg sodium per serving may not fit into a reduced-sodium meal plan.

Also, always check the serving size when reading labels. The Nutrition Facts label lists the amount of sodium in one serving of food in a package. If you eat more than one serving, you will ingest more sodium than the amount listed.

Finally, be mindful of what you eat when you're away from home. Restaurant foods can contain high levels of sodium, and nutritional information isn't always available.

Weight Management

Your doctor may ask you to weigh yourself daily. This will show how well your diet and medications are working to keep you from retaining extra fluid.

After heart failure, it is especially important to stick to your calorie goal because your physical activity may be more limited than usual. If you eat more calories than your body can burn, you will gain weight. If you are thin, make sure you consume enough calories to maintain your weight.

Foods CHF Patients Should Avoid

Grains

- Cereals (hot or cold) with more than 300 mg sodium per serving
- Biscuits, cornbread and other “quick” breads prepared with baking soda
- Bread crumbs or stuffing mix from a store (homemade can be OK if made with a low-sodium recipe)
- Breads or crackers topped with salt

Vegetables

- Canned vegetables (unless they are salt free)
- Frozen vegetables with sauces
- Sauerkraut and pickled vegetables
- Canned or dried soups (unless they are low sodium or salt free)
- French fries and onion rings

Fruits

- Dried fruits preserved with sodium-containing additives

Milk

- Processed cheese and cheese foods (natural cheese should be eaten only in small amounts)
- Buttermilk

Meat

- Cured or smoked meats (bacon, ham, sausage)
- High-sodium frozen meals
- Canned meats (chili, deviled ham, vienna sausage, sardines, soups)
- Canned or smoked fish

Desserts and Snacks

- Baked goods made with baking soda
- Salted snacks, such as nuts, chips or pretzels

Fats

- Salted butter or margarine

Condiments

- Salt, sea salt, garlic salt
- Seasoning mixes containing salt
- Bouillon cubes
- Ketchup
- Barbeque sauce
- Worcestershire sauce
- Soy sauce
- Miso
- Salsa
- Pickles, olives, relish

Alcohol

- Check with your doctor. Generally, do not have more than one drink per day (1 drink = 5 oz. wine, 12 oz. beer or 1 1/2 oz. liquor)



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