

Heart Failure – HF Admission

Order Set Directions:



 = Performance Indicator

(√)-Check orders to activate. Orders with a pre-checked box will be followed unless lined out.
Initial every order page & Sign, date, and time the last page.

Medications

Angiotensin-Converting Enzyme Inhibitors

- lisinopril (PRINIVIL)
- 5 mg PO daily
- captopril (CAPOTEN)
- 6.25 mg PO 3 times a day
- enalapril (VASOTEC)
- 2.5 mg PO daily
- enalaprilat (VASOTEC IV)
- 0.625 mg IV every 6 hours
 - 1.25 mg IV every 6 hours

- For patients without contraindications, an angiotensin-converting enzyme (ACE) inhibitor should be prescribed at discharge 
- For patients intolerant to an ACE inhibitor due to cough, an angiotensin receptor blocker (ARB) should be given except when intolerance is due to renal insufficiency or hyperkalemia 

- ACE/ARB not prescribed due to:
 - Angioedema
 - Hyperkalemia
 - Hypotension
 - Renal artery stenosis
 - Worsening renal function/disease
 - Allergy
 - Moderate/severe aorta stenosis
 - Other _____

Diuretics

- furosemide (LASIX)
- 40 mg IV 2 times a day

Aldosterone Antagonists

- spironolactone (ALDACTONE)
- 25 mg PO daily

Nitrates

- nitroglycerin 2% topical ointment (NITROPASTE)
- 1/2 inch applied topically every 6 hours
 - 1 inch applied topically every 6 hours
- nitroglycerin (NITROSTAT)
- 0.4 mg sublingually every 5 minutes for 3 doses PRN for chest pain

Platelet Inhibitors

Salicylates

- aspirin (ECOTRIN)
- 81 mg PO daily
 - 325 mg PO daily

Potassium Supplements

- potassium chloride (K-DUR)
- 10 milliequivalent PO daily
 - 20 milliequivalent PO daily

HMG-CoA Reductase Inhibitors

- simvastatin (ZOCOR)
- 20 mg PO daily, in the evening

Other _____

Provider initials: _____



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Laboratory

- Cardiac panel every 6 hours X 3
- B-type natriuretic peptide (BNP) on admission if not already done
- Magnesium (Mg) level, serum
- Thyroid Panel
- Complete Blood Count (CBC)
- Prothrombin time (PT) and international normalized ratio (INR)
- Partial thromboplastin time (PTT), activated
- Comprehensive metabolic panel (CMP)
- Basic metabolic panel (BMP)
 - on admission if not already done daily
- Lipid panel
- Digoxin level (6-8 hours post dose)

Consults

- Consult to cardiology _____

Other Orders

Provider initials: _____



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Venous Thromboembolism Prophylaxis (VTE)

Moderate Risk (Score = 2)

Prophylaxis recommended:

- Sequential Compression Devices (SCD)

High Risk (Score = 3-4)

or Very High Risk (Score = 5 or more)

Prophylaxis recommended:

Recommend Lovenox or Heparin in **addition to** pneumatic compression device.

If surgery is anticipated consider heparin vs. Lovenox

- Sequential Compression Devices (SCD)

enoxaparin (LOVENOX)

- 40 milligram subcutaneously once a day
- 30 milligram subcutaneously once a day for CrCl less than 30 mL/min

heparin

- 5,000 unit subcutaneously every 12 hours

Immunizations (if indicated)

influenza virus vaccine, inactivated

(AFLURIA; FLUZONE)

- 0.5 mL intramuscularly once October thru March only

pneumococcal 23-valent vaccine

(PNEUMOVAX)

- 0.5 mL intramuscularly once

Check all factors & total for risk factor score:

- (1) Age 40-60 years
- (1) Leg swelling, ulcers, varicose veins
- (1) Pregnancy or postpartum less than 1 month
- (1) Estrogen therapy/Birth control pills
- (1) Inflammatory bowel disease
- (1) Obesity (greater than 20% over ideal body weight)
- (1) Family history of DVT
- (1) Minor surgery/Anesthesia time less than 1 hour
- (2) Major surgery/Anesthesia time more than 1 hour
- (2) Anticipated bed confinement or immobilization more than 24 hours
- (2) Acute respiratory failure/severe COPD
- (2) Age greater than 60 years
- (3) Malignancy and/or chemotherapy
- (3) Documented history of VTE
- (3) Congestive HF or Myocardial Infarction
- (3) Sepsis
- (5) Stroke with paralysis
- (5) Elective knee or hip arthroplasty
- (5) Hip, pelvis, or leg fracture
- (5) Major trauma or spinal cord injury

_____ **Total Risk Score**

Anticoagulants not prescribed due to:

- Patient is ambulatory
- Active hemorrhage
- Patient currently on anticoagulants
- Abnormal creatinine clearance
- Epidural /spinal catheter in place
- Patient has heparin induced thrombocytopenia
- Platelet count less than 100,000 mm³
- Severe trauma to head, spinal cord, or extremities with hemorrhage within the last 4 weeks
- Active intracranial lesion/neoplasms/monitoring devices
- Warfarin use in the first trimester of pregnancy
- Coagulopathy (PT greater than 18 sec, INR greater than 2)
- GI/GU hemorrhage within the past 6 months, history of cerebral hemorrhage
- Proliferative retinopathy
- Uncontrolled hypertension (SBP greater than 200, DBP greater than 120, or both)
- End stage liver disease

Provider Signature: _____ Date: _____ Time: _____

