

CUT

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To make a set of cards:

1. Print each page
2. Cut each card out
3. Fold in half
4. Laminate
5. Punch a hole in the "swirl"

Teach-Back

"I want to make sure I explained this clearly.

When you get back home in a few days, what will you tell your

[friend or family member]

about

[key point just discussed]?"



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This material was prepared by TMF Health Quality Institute, the Medicare Quality Improvement Organization for Texas, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 9SOW-TX-CT-09-118

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ANGIOTENSIN- CONVERTING ENZYME (ACE) INHIBITORS

These drugs improve symptoms and prevent symptoms from worsening by relaxing blood vessels, controlling fluid, and slowing the progression of heart failure. You may receive one of these drugs in a combination tablet with other drugs.

Your doctor may slowly increase the dose over time to a level that is just right for you. Your doctor may also perform blood tests to make sure the drug is working properly for you.

Seek medical attention if you experience:

- Lightheadedness, dizziness, falls
- Swelling of the lips, throat, or eyes
- Skin rash
- New or persistent cough

ANGIOTENSIN- CONVERTING ENZYME (ACE) INHIBITORS

Angiotensin-Converting Enzyme (ACE) drugs:

- Amlupril (Quinopril)
- Zestril, Prinivil (Lisinopril)
- Altace (Ramipril)
- Lotensin (Benazepril)
- Capoten (Captopril)
- Mavik (Trandolapril)
- Vasotec (Enalapril)
- Univas (Moexipril)

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ANGIOTENSIN II RECEPTOR BLOCKERS (ARBs)

These drugs are similar to ACE Inhibitors, but are less likely to cause a bothersome cough. You may receive one in a combination tablet with other drugs. Your doctor may perform blood tests to make sure the drug is working properly for you.

Seek medical attention if you experience:

- Lightheadedness, dizziness, falls
- Swelling of the lips, throat or eyes
- Skin rash
- New or persistent cough

ANGIOTENSIN II RECEPTOR BLOCKERS (ARBs)

Angiotensin II Receptor Blockers (ARBs) drugs:

- Atacand (Candesartan)
- Diovan (Valsartan)
- Avapro (Irbesartan)
- Hyzaar
- Benicar (Olmesartan)
- Cozaar (Losartan)

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**BETA BLOCKERS**

These drugs control heart rhythm, relax the heart and slow the progression of heart failure. Do not crush or chew tablets unless directed to do so by your doctor. Do not stop taking the drug without medical supervision, because stopping too quickly can cause problems. If you are diabetic, be sure to closely monitor your blood sugar while taking beta blockers.

Seek medical attention if you experience:

- Trouble breathing
- Leg pain
- Chest pain
- Lightheadedness, dizziness or falls
- Worsening heart failure symptoms

BETA BLOCKERS**Beta Blocker drugs:**

- Coreg (Carvedilol)
- Tenormin (Atenolol)
- Inderal
- Ziac (Bisoprolol, Zebeta)
- Metoprolol (Toprol-XL, Lopressor)

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DIGOXIN (LANOXIN™)

This drug is used to help control heart rhythm and to make the heart beat stronger. Remember to take it exactly as prescribed by your doctor.

Seek medical attention if you experience:

- Nausea, vomiting
- Chest pain, palpitations or abnormal heart rhythm
- Changes in vision (see yellow or blue "halo" around objects)

DIGOXIN (LANOXIN™)

Digoxin (Lanoxin)

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**DIURETICS**

These medications help your body remove extra fluid by causing you to urinate more. Remember to stay close to a bathroom for approximately one hour after you take your medication, in case you should have to urinate.

Your doctor may have you take a diuretic every day, or may instruct you to take it more or less often. Make a point of talking to your doctor about how often you take your diuretics and how well they are working.

Seek medical attention if you experience that:

- You are not urinating as much as usual.
- Your heart failure symptoms are getting worse.
- Your weight has gone up more than two pounds in a day, or more than four pounds in a week.
- Swelling has gotten worse.
- You are dizzy, confused, or fall.
- You are experiencing palpitations, or skipped heart beats.
- You have leg cramps, rash, or change in hearing.

DIURETICS

Caution: Taking extra diuretics without approval of your doctor or nurse can be harmful to your kidneys, especially to a diabetic.

If you have nausea/vomiting, diarrhea, or are unable to eat or drink, notify your health care provider as your diuretic prescription may need to be adjusted before you become too dry (dehydrated).

Diuretic drugs:

- Bumex (Bumetanide)
- Zaroxolyn (Metolazone)
- Demadex (Toremide)
- Lasix (Furosemide)
- HCTZ (hydrochlorothiazide)

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ALDOSTERONE BLOCKERS

These medications are a special type of diuretic (water pill) that has been shown to improve the health of people with heart failure. Aldosterone is a hormone in the body that causes salt and fluid build-up. Aldosterone inhibitors block this hormone. While this type of medication may cause some increase in urination, their main action is to prevent fluid from building up.

Seek medical attention if you experience:

- Lightheadedness, dizziness or falls
- Breast enlargement (in men)

ALDOSTERONE BLOCKERS

Aldosterone Blocker drugs:

- Aldactone (Spironolactone)
- Inspra (Eplarinone)

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VASODILATORS OR NITRATES

These drugs relax blood vessels and improve health in patients with heart failure. They are typically used in people who cannot take Angiotensin Converting Enzyme (ACE) Inhibitors or Angiotensin Receptor Blockers (ARBs), or in people who need additional medications to control blood pressure or chest pain.

Nitroglycerine and other nitrates are vasodilators and come in a variety of forms, including tablets, capsules, and skin patches. Your doctor may also prescribe nitroglycerine used under the tongue for chest pain.

Nitrates may need special storage. Be sure to speak to your doctor or pharmacist about the proper way to use the nitrate product prescribed for you.

Seek medical attention if you experience:

- Lightheadedness, dizziness or falls
- Skin rash
- Severe headaches
- Infections
- Numbness or tingling
- Joint pain or swelling

VASODILATORS OR NITRATES

Vasodilators or Nitrates:

- Hydralazine (Apresoline)
- Imdur (Isosorbide mononitrate)
- Isosorbide dinitrate (Isordil, Isobid)
- Nitroglycerin

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**POTASSIUM**

Potassium is a mineral that your heart needs to function properly. Because some water pills cause you to lose potassium in your urine, your doctor may prescribe potassium supplements.

Potassium can irritate your throat and stomach, so be sure to take with plenty of water and with food, and to remain upright for a period of time after swallowing. Do not crush or cut potassium capsules or tablets. Liquids are available if you have difficulty swallowing—ask your doctor.

Blood tests should be performed to check your potassium levels. Some foods and salt substitutes are high in potassium, such as bananas, dried apricots, oranges and salt substitutes. Discuss your potassium levels with your doctor frequently.

Seek medical attention if you experience:

- Uneven heartbeat
- Muscle weakness or limp feeling
- Severe stomach pain
- Numbness or tingling in your hands, feet or mouth
- Confusion or feeling like you might pass out

POTASSIUM**Potassium supplements:**

- Potassium Chloride (Cena K, K-Dur, K-Lor, K-Tab, Kaon-CL, Kay Ciel, Klor-Con, Micro-K, Rum-K)

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BLOOD THINNERS

Heart failure sometimes increases your risk for developing blood clots, so your doctor may prescribe one or more “blood thinners.” These are drugs that slow down clotting or keep certain blood cells (platelets) from clumping. Be sure to take them exactly as directed. Report any bleeding to your doctor right away.

If you are taking a blood thinner, you may need to have your blood tested regularly.

Seek medical attention if you experience:

- Bleeding from gums, nose, rectum or vagina
- Blood in urine or stool
- Red, dark brown or black bowel movements
- Bruising or soreness
- Severe or persistent headaches
- Abdominal pain

BLOOD THINNERS

Blood thinners:

- Coumadin (Warfarin)
- Lovonox
- Heparin

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*Nurse Quick Reference for
National Quality Indicators*

HEART FAILURE

- Documentation of LV function (EF)
- ACE inhibitor/ARB if EF < 40% / or contraindication documented
- Documentation of smoking cessation counseling
- Discharge instructions specific to HF

CORE CARD

HEART FAILURE

- LVF assessment (document if prior, during stay or if planned after discharge)
- ACEI/ARB for LVSD: EF < 40%, mod-severe LVSD (if not, document reason)
- Smoking cessation advice / counseling
- Discharge instructions to address:
 - Activity
 - Diet
 - Follow-up
 - Medications (list ALL names)
 - What to do when symptoms worsen
 - Weight monitoring

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*Nurse Quick Reference for
National Quality Indicators*

**ACUTE MYOCARDIAL
INFARCTION**

- ASA on arrival and discharge / or contraindication documented
- BB on discharge / or contraindication documented
- Documentation of LV function (EF)
- ACE inhibitor / ARB for EF < 40% / or contraindication documented
- Thrombolytics within 30 minutes of arrival if appropriate
- PCI within 90 minutes of arrival
- Documentation of smoking cessation counseling

CORE CARD

**ACUTE MYOCARDIAL
INFARCTION**

- ASA within 24 hours of arrival (if not, document reason)
- Fibrinolytics within 30 minutes of arrival (if not, document reason for delay)
- PCI within 90 minutes of arrival (if not, document reason for delay)
- LVF assessment (document if prior, during stay or if planned after discharge)
- ASA Rx at discharge (if not, document reason)
- Beta-blocker at discharge (if not, document reason)
- ACEI / ARB Rx for LVSD: EF < 40%, mod-severe LVSF (if not, document reason)
- Smoking cessation advice / counseling

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*Nurse Quick Reference for
National Quality Indicators*

PNEUMONIA

- Blood cultures before 1st antibiotic given
- Initial antibiotics given within 6 hours of arrival
- Appropriate antibiotics given
- Influenza/Pneumococcal Vaccination given or documented
- Documentation of smoking cessation counseling

CORE CARD

PNEUMONIA

- Pneumonia pathways in chart
- Blood cultures on transfer to ICU for pneumonia
- Blood cultures drawn prior to 1st antibiotic
- Initial antibiotic administered within 6 hours of arrival
- Influenza vaccination during specified times (if not, document reason)
- Pneumococcal vaccination (if not, documents reason)
- Smoking cessation advice / counseling

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ACE-INHIBITORS

<i>GENERIC</i>	<i>BRAND NAME</i>
Benazepril	Lortensin
Captopril	Capoten
Enalapril	Vasotec
Fosinopril	Monopril
Lisinopril	Prinivil, Zestril
Moexipril	Univasc
Perindopril	Aceon
Quinapril	Accupril
Ramipril	Altace
Trandolapril	Mavik

COMBINATIONS

Accuretic	Quinapril / HCTZ
Captocide	Captopril / HCTZ
Lotrel	Benazepril / amlodipine
Prinizide	Lisinopril / HCTZ
Tarka	Trandolapril / verapamil
Uniretic	Moexipril / HCTZ

BETA BLOCKERS

<i>GENERIC</i>	<i>BRAND NAME</i>
Atenolol	Tenormin
Bisoprolol	Zebeta
Carvedilol	Coreg
Labetolol	Normodyne, Trandate
Metoprolol	Lopressor, Toprol XL
Nadolol	Corgard
Pindolol	Visken
Propranolol	Inderal, Innopran XL
Sotalol	Betapace

COMBINATIONS

Inderide	Propranolol / HCTZ
Tenoretic	Atenolol / chlorthalidone
Ziac	Bisoprolol/HCTZ

ARB

<i>GENERIC</i>	<i>BRAND NAME</i>
Candesartan	Atacand
Eprosartan	Tevetan
Irbesartan	Avapro
Losartan	Cozaar
Valsartan	Diovan

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