Heart failure (HF) is when the heart loses the ability to properly pump blood to the rest of the body. It can be due to the heart’s inability to relax to fill blood (diastolic), failure to pump blood (systolic), or both. This can affect either side of the heart in which blood and/or fluid can backup in the lungs, the legs, or both. HF is a chronic condition that needs to be closely monitored and managed for extended periods of time.

What are some major signs of HF?

- Swelling in the legs, feet or abdomen
- Unexplained weight gain due to swelling
- New onset of shortness of breath during daily tasks
- Persistent coughing or wheezing
- Increased fatigue
- Difficulty breathing while lying flat

What should be monitored in HF residents?

- **Daily weight monitoring is KEY to managing heart failure:**
  - Check weights first thing in the morning after the resident has voided and before they eat or drink.
  - Use the same scale and the same technique when obtaining weight.
  - Most residents with heart failure should monitor their fluid and salt intake.

When should the provider be notified?

- Frequent cough
- Loss of appetite
- Difficulty sleeping due to shortness of breath when lying down
- Swelling continues to worsen even with medication
- New onset of shortness of breath at rest with no exertion
- Sudden weight gain of 3 lbs in 24 hours or 5 lbs in one week

What medications should be used for residents with HF?

Residents with heart failure are often prescribed diuretics or “water pills.” This allows them to eliminate extra fluid, but can cause more frequent urination and alter electrolyte levels in blood.