

Heart failure case study

[Business](#)



B needs to understand that he will need lots of rest during and after exercise and that he shouldn't overexert himself. Teach Mr.. Bi's wife to monitor his exercise and encourage him to take breaks when needed Drug therapy:

Teach Mr..

B and his wife the expected action of all his medication and how to recognize drug toxicity. Also teach him and his wife how to take a pulse rate ND what range the pulse rate should be in. Teach them the symptoms of hypoglycemia and hyperemia if diuretics are order. Self BP monitoring may also be appropriate in Mr..

Bi's situation.

Heart Failure New York Heart Association Classification American College of Cardiology/American Heart Association Guidelines Treatment

Recommendations Stage A. People at high risk of developing heart failure (HP) but without structural heart disease or symptoms of HP -Treat hypertension, lipid disorders, diabetes. -Encourage patient to stop smoking and to exercise regularly. -Discourage use of alcohol, illicit drugs.

-ACE inhibitor if indicated Class I. Patients with cardiac disease without limitations of physical activity. Ordinary physical activity doesn't cause undue fatigue, palpitations, dyspepsia, or angina pain.

Stage B. People who have structural heart disease but no symptoms of HP. -

All stage A therapies -ACE inhibitor unless contraindicated -Beta-blocker unless contraindicated Class II.

Patients with cardiac disease who have slight limitations of physical activity. I near com o T rattle at rest . T orally Pensacola actively results In Tailgate, palpitations, dyspepsia, or angina pain. Class III. Patients with cardiac disease who have marked limitation of physical activity. They're comfortable at rest.

Less than ordinary physical activity causes fatigue, palpitations, dyspepsia, or angina pain.

Stage C. People who have structural heart disease with current or prior symptoms of heart failure. -All stage A& B therapies -Sodium-restricted diet - Diuretics -Dioxin -Avoid or withdraw antilogarithms agents, most calcium channel blockers, and nonessential anti- inflammatory drugs. -Consider lodestone antagonists, negotiations receptor blockers, hydrazine, and nitrates.

Class ' V. Patients with cardiac disease who can't carry out any physical activity without discomfort. Symptoms of cardiac insufficiency or of the angina syndrome may be present even at rest.