

Heart Failure Awareness Week

Lunch & Learn

Thursday, February 17th, 2022

Patient & Provider Resources: Heart Failure Tools You
Can Use



American
Heart
Association.



Heart Failure Awareness Week!

Welcome!

Daily Newsletters

Lunch & Learns Mon-Friday 12 CST

Recordings

Slides & Attachments

Submit questions through the question panel





American
Heart
Association.

Patient Resources

Doctor, It's Been Too Long



Doctor, It's Been Too Long

TIPS TO HELP YOU PREPARE FOR YOUR NEXT VISIT

Taking care of your physical health and mental well-being is important. It's smart to be careful and to make — and keep — appointments with your doctor, nurse practitioner or other health care professional. If you have questions about how your doctor's office is keeping patients safe during COVID-19, ask. Your health care team is there for you.



Start by visiting your doctor's office or community health center's website.
You might find information on what to expect and what options you have available.



Call the office, share your concerns and ask questions.
Here are a few to get you started:

- What is the check-in process?
- What waiting room precautions are being taken?
- Are masks required for both patients and the health care team?
- Is there a checkpoint screening for COVID exposure and symptoms?
- What else should I know before I come in?
- Is telehealth (a phone or video visit) an option? Is it appropriate for my visit?

Here are some ways you can make the most of your visit:

- Write down your questions before you go.
- Clearly share the purpose of your visit with your health care team.
- Have a list of medications or supplements you take and any medical devices you use available.
- Bring any health data that may be helpful, such as blood pressure and glucose readings, changes in weight, or food and exercise logs.

Recommit to your health ... and your future.

If you've missed an appointment,
make one today.

For more information visit:
heart.org/callyourdoctor



If you have a telehealth (phone or video) appointment:

- Ask if there's a step-by-step guide you can follow if this is your first video appointment.
- Make sure you have good phone or Wi-Fi service.
- Use headphones or earbuds to help ensure you hear clearly and to allow for privacy.
- Set yourself up in a quiet place with good lighting. Be ready early so you can test your equipment.
- Have your insurance card handy.
- Make sure your phone, computer or tablet is fully charged.

Discussion Guide



Take charge of
Heart Failure



PATIENT/HEALTH CARE
PROVIDER

Discussion Guide

Be prepared to get the most out of your appointment.



Learn as much as you can
about your condition.



Write down questions to ask
your health care professional.

When you have heart failure, your heart is unable to pump enough blood and oxygen your body needs to be at its best. This may cause fatigue, shortness of breath and coughing.

The symptoms of heart failure tend to get worse over time as the heart becomes weaker and less able to function efficiently.

More than 6 million adults in the U.S. are living with heart failure. Getting treatment as soon as possible is the best way to manage the condition.



Now is the time to focus on increasing the healthy years you have ahead.

There's no cure for heart failure. But if caught early, strategies can stop or slow the symptoms for many years.

Your health care professional can prescribe medications and recommend lifestyle changes to help you maintain your quality of life.

At your appointment:

- You'll be asked about symptoms. How long have you had them? Have they gotten worse? Do they interfere with your usual activities?
- The exam will include a blood test and blood pressure check.
- Your health care professional will look for signs of excess fluid (a condition called congestive heart failure).
- You may need imaging tests such as a chest X-ray, echocardiogram or electrocardiogram.
- Your health care professional may prescribe medication or oxygen.
- You'll get advice about restricting fluids and avoiding salty foods.

Bring a list of questions to prepare for your appointment.

Being actively involved in your care will help you get the best possible results from treatment. Check off the questions you want to remember to ask your health care professional.

Treatment for Heart Failure

- What's my stage of heart failure?
- What causes heart failure?
- What did you learn from my tests and imaging studies?
- What's ejection fraction and why is it important?
- Are there medications that can help? Do they have side effects?
- How often do I need to see a health care professional to monitor my condition?
- How long before my symptoms get worse? Will I need to be hospitalized?
- Am I a candidate for a heart transplant?
- How long can you live with heart failure?
- Can I participate in clinical trials?

Living with Heart Failure

- What can I read to learn more about heart failure?
- What lifestyle changes will make the biggest difference to my health?
- What symptoms mean I should call a health care professional right away or go to the ER?
- Do I need to restrict my activities or increase them?
- What foods should I avoid?
- How much fluid can I take in daily and how do I measure it?
- How could my heart failure impact my family?
- Are there support groups?
- What plans should I make to prepare for the future?



My Heart Failure Guide

FREE Interactive Workbook



Together, we can rise above heart failure



Healthier Living
With Heart Failure

Managing Symptoms and Reducing Risk

 American Heart Association
 American Stroke Association.
Be it why™

www.RiseAboveHF.org

©2017 American Heart Association, Inc. All rights reserved.
Unauthorized use prohibited.

Nationally supported by:
 **NOVARTIS**
PHARMACEUTICALS

Living With Heart Failure

CONTENTS | What You'll Find Inside

Understanding Heart Failure

CHAPTER 1

Understanding Heart Failure

What Is Heart Failure? 6

Causes of Heart Failure 8

Going to Cardiac Rehabilitation 10

Chapter 1 Quiz 11

CHAPTER 2:

Heart Failure's Effects on the Body

The Effects of Heart Failure 12

Other Effects of Heart Failure 14

Keeping Track of Your Symptoms 14

Chapter 2 Quiz 15



Managing Heart Failure Symptoms

CHAPTER 3:

Making Healthy Eating Choices

Eating a Heart-Healthy Diet 16

Limiting Saturated and *Trans* Fats and Added Sugars 18

Tracking Your Fluid Intake 20

Chapter 3 Quiz 21

CHAPTER 4:

Making Healthy Lifestyle Changes

Lifestyle Changes for People With Heart Failure 22

Quitting Smoking 24

The Importance of Physical Activity 26

Getting Enough Rest 28

Additional Lifestyle Adjustments 30

Chapter 4 Quiz 31

Treating Heart Failure

CHAPTER 5:

Treating Heart Failure: Taking Medications

Taking Medications for Heart Failure 32

Using Diuretics 36

Managing Heart Failure Medications 38

Dealing With Medication Side Effects 40

Chapter 5 Quiz 40

CHAPTER 6:

Other Heart Failure Treatment Options

If Additional Treatment Is Needed 41

If a Heart Transplant Is Needed 43

Chapter 6 Quiz 43



Living Well With Heart Failure

CHAPTER 7:

Living Well With Heart Failure

Thoughts for Your Future 44

Identifying Your Activity Goals 46

Additional Resources 47



Print this contact list and fill in the phone numbers of people you may need to reach quickly. Carry it with you in your wallet or purse. Update the list as needed. Share a copy with your caregiver and family members.



My Heart Failure Guide

Patient tools:

- [Emergency Contact List](#)
- [Self Check Plan/Symptom Tracker](#)
- [Hidden Sources of Sodium](#)
- [Reading Food Labels](#)
- [What to Look for at the Grocery Store](#)
- [Eating Away From Home](#)
- [Stretching Exercises](#)
- [Strength & Balance Exercises](#)
- [Physical Activity Tracker](#)
- [Medicine Chart](#)
- [Identifying Activity Goals](#)

Life After HF Hospitalization Guide

1 When you leave the hospital, please remember:

About **one in four** people with heart failure return to the hospital within a month of leaving.¹ However, you can reduce your chances of needing to go back by learning how to manage and monitor your heart failure as soon as you leave the hospital. Remembering to take your medications, sticking to your suggested diet and exercise plans, and recognizing when something just doesn't feel right are all part of getting you back to doing the things you love.

It is important to seek help from friends, family, and other loved ones. As you learn more about your heart failure and begin to develop a plan with your HF provider, you may find that some things require additional support. Make sure you bring questions like this up with your care team including your HF provider, nurses, and caregivers so you have a strategy in place.

Reporting worsening symptoms:

If you notice any worsening symptoms, such as shortness of breath, swelling or exhaustion from routine activities, or difficulty breathing it's important that you don't wait. Call your heart failure provider or member of your health care team immediately.

2 One week after discharge: Continue to monitor your treatment and follow-up care

Treating your heart failure doesn't end after leaving the hospital. The week after you leave the hospital is an important time to **continue monitoring your symptoms and making any necessary lifestyle changes.**

It's important to stick to your medication plan and diet changes during this time as failing to do so may lead to a worsening condition and cause you to go back to the hospital. Sticking to your medication plan and now diet may require **support from friends and family**, so make sure they have a clear understanding of what they need to know and how to help you stay on track.



3 One month after discharge: Continue monitoring your treatment and managing your heart failure

Continue to update your health care team and heart failure provider and stick to your agreed upon plan. During this stage, you may begin to learn how to monitor and track your heart failure symptoms. It's important that you understand the causes, symptoms, and effects of heart failure, and recognize signs that may mean your heart failure is getting worse. It is important that you **call your heart failure provider or member of your health care team as soon as possible if you feel like something isn't right.**



Working with multiple healthcare providers:

You may have more than one doctor involved in treating your heart failure, including those found in the hospital. Your care team may include your primary care doctor, physician, nurse practitioner, physician assistant, cardiologist, nurse, and pharmacist. This can lead to multiple people giving you treatment plans. Managing multiple treatment plans and medications can be overwhelming. Management and tracking tools can help you to better organize your health information.

1. Vitting Andriani et al. "Assessing 12000 National Trends in Hospital Readmission Rates in Congestive Heart Failure Patients." *Circulation*. Published 28 March 2016. Accessed 05 May 2020. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4644400/>

4 Living with Heart Failure: Living an active, full life with Heart Failure

Heart Failure is a chronic, lifelong condition and requires that you continue to monitor your symptoms, follow your medication plan, attend your appointments with your heart failure provider or health care team, and maintain your diet and exercise schedule. As you start to feel better and become more active, you will begin to see a gradual return to your normal day activities. Now is a good time to think about what matters most to you. It may be helpful to list a set of activity goals, such as "visiting family and friends", "dancing with my spouse", or "playing with my kid or grandkids".



Before you leave the hospital, make sure you ask and understand the answers to the following questions:

- What is my diagnosis?
- What do I need to do next?
- Why is that important?
- Is my follow-up appointment scheduled (generally 7 days after discharge) and how will I get there?
- Do I have a medication plan to take with me?
- Do I clearly understand the purpose of taking each medication prescribed?
- Who do I need to talk to about getting a prescription for home healthcare services?
- What key signs or symptoms or a worsening condition should I and my loved ones be on the lookout for?
- Have I received a home health care prescription from my HF provider ensuring coverage of any needed home health care, e.g., skilled nursing, physical therapy, etc. as it is required by some insurance providers?

You should have a follow-up visit with your heart failure provider or member of your health care team **7 days** after you leave the hospital.

Before this appointment, make sure you have the following items prepared:

- List of questions about: heart failure, your medications, lifestyle changes, including difficulties with diet and exercise, and any changes you noticed, big or small
- Medication list with all current and recent medications

One thing over the counter medications and any supplements you may be taking)
Update and bring these lists to every appointment to help you keep a record of your ongoing progress.

This resource aims to support patients and caregivers as they navigate through their heart failure health care journey, while directing them to existing resources created by the heart failure community. Increasing patient, caregiver, and healthcare provider participation in the heart failure community. <https://www.heartfailure.org>

One month after discharge, write down the following to share with your doctor during your next appointment:

- Any challenges you may have with your treatment plan or staying on it
- Any changes you notice in your body, symptoms, or day-to-day routine
- Be sure to also ask friends and family members if they notice any changes as well
- Any changes to your diet or physical activity
- Any social needs you are concerned about, e.g., housing, transportation, financial support



Take Control of Your Heart Failure:

Life After a Heart Failure Hospitalization

Here are Your Rights as a Patient Living with Heart Failure:

- 1 You have the right to understand your diagnosis and ask for information that helps you navigate your heart failure
- 2 You have the right to talk with your health care team and heart failure provider about your treatment goals and wishes
- 3 You have the right to ask questions about your heart failure and when things are unclear
- 4 You have the right to have a caregiver or caregivers as part of your care team

What does "empowered" mean? Heart failure is a chronic, lifelong condition, but **you can live a full and active life** with the right medical treatment, follow-up, and the attention you pay to your diet, exercise, and lifestyle. Becoming an "empowered" patient requires understanding heart failure, recognizing and monitoring changes in your symptoms, engaging in self-care, and creating a partnership with your health care team and heart failure provider. Feeling "empowered" in your care, may mean fewer symptoms, better quality of life, and fewer days in the hospital because of a worsening condition.

Written for all adult individuals that may want and need to understand important information about heart failure, family members, professional caregivers, etc. All who provide direct care to an individual who has heart failure.

Patient Resource Center

Heart Failure Tools and Resources

Downloadables and Interactive Resources

- My HF Guide: Our free interactive workbook
- Symptom Tracker (PDF) | Spanish (PDF)
- HF and Your Ejection Fraction Explained (PDF) | Spanish (PDF)
- How Can I Improve My Low Ejection Fraction? (PDF)
- Partnering in Your Treatment: Questions to Ask Your Doctor (PDF)
- Patient Information Sheets
 - What is Heart Failure? (PDF) | Spanish (PDF)
 - How Can I Live with Heart Failure? (PDF) | Spanish (PDF)
 - What is Transthyretin Amyloid Cardiomyopathy (ATTR-CM)? (PDF)
- Support Network online community



Self-Check Plan for HF Management

Excellent - Keep Up the Good Work!

- No new or worsening shortness of breath
- Physical activity level is normal for you
- No new swelling, feet and legs look normal for you
- Weight check stable
- No signs of chest pain

GREAT! CONTINUE: Daily Weight Check, Meds as Directed, Low Sodium Eating, Follow-up Visits

Pay Attention - Use Caution!

- Dry, hacking cough
- Increasing shortness of breath with activity
- Increased swelling of legs, feet, and ankles
- Sudden weight gain of more than 2-3 lbs in a few days or 4-6 lbs in a week
- Discomfort or swelling in the abdomen
- Trouble Sleeping

CHECK IN! Your symptoms may indicate: A need to contact your doctor or provider, A need to change in medications.

Medical Alert - Warning!

- Frequent dry, hacking cough
- Shortness of breath at rest
- Increased discomfort or swelling in the lower body
- Sudden weight gain of more than 2-3 lbs in a few days or 4-6 lbs in a week
- New or increasing dizziness, confusion, weakness or depression
- Loss of appetite
- Increased trouble sleeping, cannot lie flat

WARNING! You need to be evaluated right away. Call your physician or call 911

heart.org/HF

©2023 American Heart Association, Inc. All rights reserved. Rise Above Heart Failure is a registered trademark of the AHA. Unauthorized use prohibited. 03/2023/021

Heart Failure: Partnering in Your Treatment

Bring this sheet with you to your appointment and discuss the following with your doctor.

Understand Your HF

How serious is my heart failure?
Mild Moderate Severe

In what ways does having heart failure increase my health risks?

How likely is it that having HF will worsen the effects of other conditions I may have?

Would any of the following lifestyle changes help me to better manage the progress of HF?
Managing weight
Eating better
Quitting smoking
Making other important changes?

Identify Your HF Needs

Am I a candidate for HF cardiac rehab?
Yes No

Are there any remaining tests we need to do to learn more about my heart function? If so, which ones?

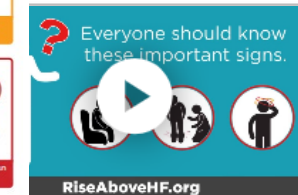
What treatment options should I be thinking about for managing my HF?

What are the most important things I can do to manage my HF?

What should I expect in the coming weeks, months or years?

Are there any activities that are off limits for me at this time? (List specific concerns you may have, like exercise, sex, housework.)

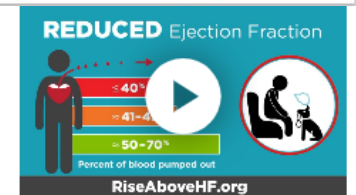
What are my treatment goals at this time?



Everyone should know these important signs.

RiseAboveHF.org

Failure Warning Signs and Symptoms



REDUCED Ejection Fraction

Percent of blood pumped out

- < 40%
- > 41-49%
- > 50-70%

RiseAboveHF.org

Ejection Fraction Measurement and Heart Failure

Patient Support Network



[Heart Attack and Stroke Symptoms](#)

[COVID-19 Resources](#)

[Volunteer](#)

[SHOP](#)

[DONATE NOW](#)



[Connect with People Like Me](#) ▼

[Blog](#)

[MyAFibExperience®](#) ▼

[Log in](#)



Support that lifts you up

Dealing with a heart or stroke condition can be complex, but your recovery can be more manageable when you have the right kind of emotional support. Our community of survivors and caregivers is here to keep you going no matter the obstacles.

[Log In](#)

[Register](#)



Find Help

[Support and Connect \(findhelp.com\)](https://findhelp.com)

Search for free or reduced cost resources in your area, like food, transportation, medical care, and more.

ZIP

53172

Q Search



**American
Heart
Association®**

This service is provided by The American Heart Association's National Heart Failure Initiative, IMPLEMENT-HF™, made possible with funding by founding sponsor, Novartis and national sponsor, Boehringer Ingelheim and Eli Lilly and Company.



American
Heart
Association.

Provider Resources

Get With the Guidelines-Heart Failure

Get With The
Guidelines®
Heart Failure



Get With The Guidelines®-Heart Failure is an in-hospital program for improving care by promoting consistent adherence to the latest scientific treatment guidelines. Numerous published studies demonstrate the program's success in achieving significant patient outcome improvements. Among the proven results are reductions in 30-day readmissions, a measure now used by CMS in determining CMS reimbursement rates.



Target: Heart Failure

An [initiative](#) aimed at reducing 30-day readmissions by providing healthcare professionals with resources to address this challenge.



TARGET: HEART FAILURE

≥50% on ALL measures

ACEI/ARB or ARNI at Discharge for Patients with Left Ventricular Systolic Dysfunction

Evidence-Based Beta Blocker Prescribed at Discharge

Aldosterone Antagonist Prescribed at Discharge for Patients with HFrEF

Follow-up Visit Within 7 Days of Discharge

Referral to HF Disease Management, 60 Minutes Patient Education, HF Interactive Workbook, or Referral to Outpatient Cardiac Rehabilitation Program

Check out these Risk Calculators!

- [30-Day Readmission Yale Core Calculator](#)
- [LACE+ Calculator](#)

[Measure Rationale](#) – outlines guideline support for initiative measures spanning areas of medication optimization, early follow-up care coordination, and enhanced patient education.

Target: Heart Failure

Use a [Discharge Checklist](#) to set patients up for success

TARGET:HF™

HEART FAILURE DISCHARGE CHECKLIST

Please complete all boxes for each HF indicator:

Admit Date: _____ Admit Unit: _____ Discharge Date: _____ Discharge Unit: _____
 Attending Physician: _____ HF Etiology: _____
 Follow-up appointment (date/time/location): _____

Complete All Boxes for Each HF Indicator	YES	NO	Reason Not Done/Contraindications
Angiotensin-converting enzyme inhibitor (if LVSD)			<input type="checkbox"/> NA <input type="checkbox"/> CI
Angiotensin receptor blocker (if LVSD and ACEI not tolerated)			<input type="checkbox"/> NA <input type="checkbox"/> CI
Angiotensin receptor/neprilysin inhibitor (if LVSD, and in place of an ACEI or ARB)			<input type="checkbox"/> NA <input type="checkbox"/> CI
β-Blocker (if LVSD, use only carvedilol, metoprolol succinate, or bisoprolol)			<input type="checkbox"/> NA <input type="checkbox"/> CI
Aldosterone antagonist (if LVSD, Cr <2.5 mg/dl in men, <2.0 mg/dl women, potassium <5 mg/dl, and patient's potassium and renal function will be closely monitored)			<input type="checkbox"/> NA <input type="checkbox"/> CI
Hydralazine/nitrate (if self-identified African American and LVSD)			<input type="checkbox"/> NA <input type="checkbox"/> CI
Most recent left ventricular ejection fraction (____%) Date of most recent LVEF (____) Method of assessment: <input type="checkbox"/> Echocardiogram <input type="checkbox"/> Cardiac catheterization <input type="checkbox"/> MUGA scan			
Anticoagulation for atrial fibrillation or flutter (permanent or paroxysmal) or other indications			<input type="checkbox"/> NA <input type="checkbox"/> CI
Precipitating factors for HF decompensation identified and addressed			<input type="checkbox"/> NA <input type="checkbox"/> CI
Blood pressure controlled (<140/90 mm Hg)			<input type="checkbox"/> NA <input type="checkbox"/> CI
Pneumococcal vaccination administered			<input type="checkbox"/> NA <input type="checkbox"/> CI
Influenza vaccination administered (during flu season)			<input type="checkbox"/> NA <input type="checkbox"/> CI
EP consult if sudden death risk or potential candidate for decide therapy			<input type="checkbox"/> NA <input type="checkbox"/> CI

Patient Sticker Here

Check on discharged patients with a [Telephone Follow-Up Form](#)

TARGET:HF™

GENERAL INFORMATION

Discharge date: _____ (mm/dd/yyyy)
 Patient name: _____
 Date of birth: _____ (mm/dd/yyyy)
 Primary care physician: _____
 Cardiologist: _____
 Homecare? YES NO Assisted Care? YES NO
 Labs ordered/done prior to first follow-up call or appointment? YES NO
 Date: _____ (mm/dd/yyyy)

PATIENT EDUCATION

INTRODUCTION: My name is _____, I am calling from [INSERT HOSPITAL NAME]. I am doing a follow-up courtesy call to see how you are doing.

Weight monitoring

Do you have a scale at home that you can use to weight yourself? YES NO
 If no: Comments _____
 [If patient answered no, advise the patient to buy a scale] YES NO
 [If patient answered yes to having a scale] YES NO
 Can you see the numbers on the scale? YES NO
 Have you been weighing yourself daily? YES NO

Dry weight (at home, 1st day after discharge)

Did you take your dry weight 1 day after discharge? YES NO
 Do you have a weight diary? YES NO
 If no, was the patient provided with a weight calendar during this visit? YES NO

Do you understand how and when to check your weight? YES NO
 [Tell patient that he/she should check weight every AM, after first void, prior to PO intake, with same amount of clothing on]

Do you understand the important of measuring and recording your daily weights? YES NO
 [Tell patient that daily weights are important to self-monitor for fluid retention]

Confirmed understanding by Teach Back? Yes Patient needs reinforcement
 [The patient or family member can verbalize your instructions back to you in their own words to confirm understanding.]
 Comments: _____

Identify issues with readmissions using a [Readmission Guide](#)

TARGET:HF™

Were you able to obtain your medicines that were prescribed for you during your last hospital visits?
 Yes No

If no, why not?

INTERVIEW THE CARE TRANSITION TEAM (PHYSICIAN, CLINIC, HOME CARE, NURSING HOME, AND HOME HEALTH):

What are the contributing causes for the patient's readmission? Would you have predicted a readmission on this patient?

Check all that apply:

- Abnormal Lab Results
- Vital Signs
- Nutrition
- Cognition/Depression
- Function/Mobility
- Discharge/Handover/Care Transition Plan
- Family support
- Medications
- Home Health
- Post-Procedure Complications

REVIEW THE PATIENT MEDICAL RECORDS FROM CURRENT AND PREVIOUS ADMISSION-30 DAYS OR LESS BETWEEN ADMISSIONS)

Note the number of days between the previous discharge and readmission date: _____ Unknown

Did patient have a follow-up physician visit scheduled? Yes No Unknown

If yes, did the patient follow-up with his/her visit? Yes No Unknown

Number of days after previous discharge for urgent care/ED/outpatient visits: _____ Unknown

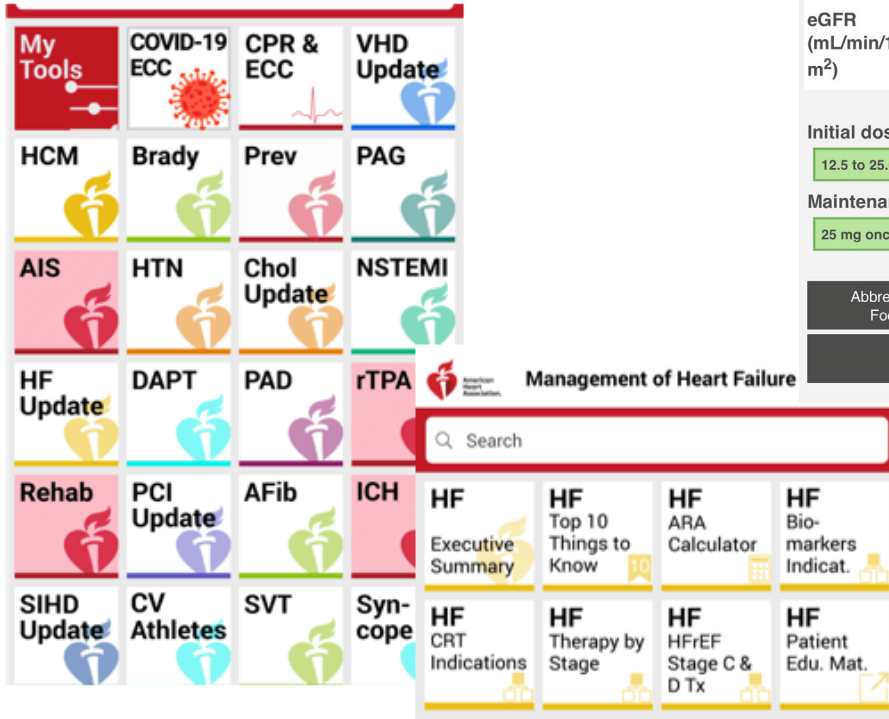
Were there any urgent clinic/ED/outpatient visits? Yes No Unknown

Number of days after previous discharge: _____ Unknown



Guidelines-On-The-Go!

Download the AHA's Guidelines-On-The-Go mobile app for point-of-care access to the AHA guidelines, interactive treatment algorithms, calculators, and patient education materials.

Available for [Android](#) and [iOS!](#)



Back Interactive tools


ARA Calculator [HF]  

Drug

eGFR (mL/min/1.73 m²)

Initial dose (only if K⁺ ≤5 mEq/L)

Maintenance dose (after 4 wk for K⁺ ≤5 mEq/L)*

Abbreviation(s) & Footnote(s) 

Reset More Information

Management of Heart Failure

< Treatment of Stages A to... >

< Stage B >



< Summary of Recommendations  

Table 9. Recommendations for Treatment of Stage B HF

Recommendations	COR	LOE
In patients with a history of MI and reduced EF , ACE inhibitors or ARBs should be used to prevent HF	I	A
In patients with MI and reduced EF , evidence-based beta blockers should be used to prevent HF	I	B
In patients with MI , statins should be used to prevent HF	I	A
Blood pressure should be controlled to prevent symptomatic HF	I	A
ACE inhibitors should be used in all patients with a reduced EF to prevent HF	I	A

Home Menu Navigation icons

Healthcare Network

Welcome to American Heart Association's Healthcare Network!

We believe that you shouldn't go it alone and that there should be a place where you can find support, share resources, and be able to ask questions and receive answers from other experts in the field. This is a community for organizations currently involved in our certification or quality improvement programs. Please use this network as a space to utilize resources, ask questions, and engage with other organizations, to aid in your path to increasing quality of care!



Hot Topics

 ↓

Heart Failure Awareness Week: Lunch and Learns

...

Added by Teresa Yacoub-Bonsu News Hot Topics
02/02/2022

This National Wear Red Day Will Be One For The Books!

National Wear Red Day – the iconic day when the nation wears red to show support for women's heart health – is this Friday, Feb. 4. Our lineup includes: 50+ national broadcast news anchors confirmed to show their support. CBS Mornings is airing a CPR story featuring one of our Real Women, and Dr. Tara Narula will lead a CPR discussion and demo. ...

Added by Teresa Yacoub-Bonsu News Hot Topics
02/01/2022

Hereditary Transthyretin Amyloidosis (hATTR) Half- Day Summit

Hereditary Transthyretin Amyloidosis (hATTR) Half-Day Summit Join us for a half-day summit on Tuesday, January 18th Sessions begin at 11 AM EST / 10 AM CST The American Heart Association® is leading an initiative to improve the identification and diagnosis of hereditary transthyretin amyloidosis (hATTR). Please join the American Heart ...

Added by Teresa Yacoub-Bonsu News Hot Topics

Telehealth Provider Checklist

A telehealth checklist for providers is included in the “Handouts” section of this webinar.

Telehealth in Your Practice – Stay Connected to Your Patients

Modes of Telehealth

Three ways to incorporate telehealth into your practice:

- Live Videoconferencing: two-way, video-based conference between the health care provider and patient
- Asynchronous Video (Store-and-Forward Transmission): electronic delivery of a patient’s documented health history outside real-time
- Remote Patient Monitoring (RPM): collection of health data from a patient in one location that’s forwarded electronically to a health care professional in a different location (provider, nurse, etc.) for review and monitoring

Top Uses of Telehealth

- Concierge services (for patients paying membership fees)
- Medication management/prescription renewal
- Minor urgent care (e.g., pink eye, fever)
- Birth control counseling
- Home health care
- Chronic condition management
- Pediatric after-hours needs
- Behavioral health
- Post hospital discharge care
- Postoperative care and follow-up

10 In-Demand Specialties*

- Internal Medicine
- Psychiatry
- Radiology
- Family Medicine
- Pediatrics
- Emergency Medicine
- Neurology
- Cardiology
- Obstetrics & Gynecology
- Dermatology

* Medical Economics Jan 2020

With so many choices, be sure to consider:

- Integration with your current IT landscape, particularly your EHR system
- Cost, process and timeline associated with integration and product updates
- User experience (intuitive for you and your patients)
- Data safety and security

Clinical Implementation

Before the visit:

- Identify appropriate clinical use cases
- Identify triage questions for scheduling appointments
- Educate patients on proper appointment standards

During the visit:

- Ensure appropriate patient intake
- Provide support to troubleshoot patients’ technical issues
- Focus on effective communication with patients (speaking clearly and understandably)

After the visit:

- Share the visit summary and plan for follow-up care

Reimbursement

- COVID-19 is changing reimbursement. Federal and state laws and commercial payer policies are quickly being amended or waived to make reimbursement easier and more in line with the charges for in-person visits.

Opportunities on learn.heart.org

- Heart Failure and Afib Virtual Summit: Treatment of AF by ablation in heart failure patients and Subclinical AF: incidence and management
- Heart Failure and Afib Virtual Summit: Stroke Prevention in Atrial Fibrillation and Heart failure, atrial fibrillation, and kidney failure
- Heart Failure and Afib Virtual Summit: Recognizing AFib in high-risk heart failure patients and Socioeconomic Impact of AF/HF
- AHA Intermountain Healthcare Webinar Series- Heart Failure Prevention
- Advanced Heart Failure Care & Management
- American Heart Association Heart Failure Guidelines & Updates
- Building a Heart Failure Clinic
- Cardiac Rhythm Device Therapy for Heart Failure
- COVID-19 Impact on Heart Failure Acute Processes
- Get With The Guidelines®- 360°: Keynote & Pivotal Results
- Heart Failure in the Acute Care Setting
- Heart Failure Post-Acute Care Certification Process for Skilled Nursing Facilities
- Heart Failure, Skilled Nursing, and Transitions
- Palliative Care for the Heart Failure Patient
- Panel Discussion: Managing Heart Failure Comorbidities
- Panel Discussion: Rapidly Improving Adherence with
- Psychosocial Risk & Behavioral Health Considerations for Heart Failure
- Recognizing Heart Failure in the ED-Door to Diuresis
- Reducing the Failure in Heart Failure-Medical Management of HF
- Acute Decompensated Heart Failure: Critical Issues For The Clinician
- Success in Failure: Novel Applications of Imaging in Heart Failure with Preserved EF
- Inflammation and Heart Failure: Adding Fuel to the Fire?
- Failure is Not an Option: New Targets, New Opportunities
- Hemodynamics in Heart Failure with a Case Based Focus
- Heart Failure in 2020: How Has It Changed?
- The Very Hottest Topics in Heart Failure for All Cardiologists
- Heart Failure and Atrial Fibrillation: Vitamins, Minerals, Nutrients, and More
- Caring for Heart Failure Patients
- HeartBEATS from Lifelong Learning™, Science Series: Managing Atrial Fibrillation in Heart Failure with Reduced Ejection Fraction: A Paradigm Shift

HF Summit



Heart Failure Summit

REGISTER

March 9, 2022 • 10:00 am – 2:15 pm CST

This summit focuses on social determinants of health, model sharing for guideline directed medical therapies, and transitions of care in the heart failure patient population. We aim to provide a great opportunity to share concepts learned by reviewing current challenges, model sharing, and barriers to overcome. The goal of this Heart Failure Summit is to provide a high quality scientific and educational experience for the attendees. We look forward to hosting you at our virtual event!

Access Recent Events Online!



American Heart Association®

Heart Failure Expo

Content from the [2020 Heart Failure Expo](#), a virtual event celebrating heart failure systems of care, is now available online for FREE! Access all 23 sessions with accompanying CME/CE credits at your convenience.



Missed Scientific Sessions 2021? You can now view [sessions On-Demand](#) for FREE to AHA Professional members and \$149 for non-AHA members.

THANK YOU!

For questions or more information: please contact your local AHA Quality Improvement Manager OR reach out via the below link:

<https://www.heart.org/en/professional/quality-improvement/contact-your-local-get-with-the-guidelines-representative>

Registration for tomorrow's Lunch & Learn on Quality Improvement: Reflection & Recognition can be completed by clicking [here](#).



American
Heart
Association.