# **CONGESTIVE HEART FAILURE**

# TRANSFER CRITERIA

Previous history of CHF
Acceptable VS – BP > 100/60, R < 32, P < 130</li>
Pulse-ox 85% on room air, correctable to > 90 on Oxygen
High likelihood of correction to baseline status within 24 hours – consider discussion with PMD

### **EXCLUSION CRITERIA**

Unstable VS New onset CHF Associated unstable angina, COPD, MI sepsis, pneumonia, new murmur, confusion EKG changes Severe anemia (Hb<8) New arrhythmia Respiratory failure, intubation

# POTENTIAL INTERVENTION

TMS monitoring Oxygen per respiratory guidelines Serial exams, vital signs, EKG's, cardiac enzymes, and pulse-ox checks Medication – diuretics, vasodilators, ACE Inhibitors, Inotropic Consider stopping medications with negative inotropic effects

### **DISPOSITION**

Home - Acce	eptable VS
	Return to baseline status
	Pulse-ox $> 90$ on room air unless previously on home oxygen
	EKG unchanged from baseline
	No chest pain or dyspnea at rest
Hospital -	Worsening respiratory status
	New EKG changes, arrhythmia, or ischemia
	Persistent hypoxia, rales, dyspnea
	Failure to return to baseline status within 18 hour time frame

\*The above criteria are guidelines only and are subject to physician discretion