

# Provider Documentation: Congestive Heart Failure

## Documentation Tips & Best Practices

### Did you know that complete documentation of congestive heart failure can help identify patients for disease management programs?

Key elements to document are:

- Etiology of congestive heart failure (i.e., coronary artery disease, valvular heart disease, cardiomyopathy, hypertensive heart disease)
- Type and acuity of heart failure (whenever possible), such as:
  - Left ventricular failure
  - Systolic, diastolic, or combined systolic and diastolic
  - Acute, chronic, or acute on chronic
- Any additional or secondary conditions, and any causal relationship that exists between them (i.e., chronic kidney disease)
- Presence of cardiac and vascular implants and grafts, transplant status, and any related complications

### Utilize MEAT (Monitor, Evaluate, Assess, Treat) to specifically address patient conditions:

| Monitor  | Evaluate  | Assess   | Treat  |
|--|---|--|--|
| Signs<br>Symptoms<br>Disease progression<br>Disease regression   | Test results<br>Medication effectiveness<br>Response to treatment<br>Physical exam findings | Test ordered<br>Counseling<br>Record review<br>Discussion  | Medication<br>Therapies<br>Referral<br>Other modalities  |
| <b>MEAT Examples: Congestive Heart Failure</b>   |   |  |  |
| Hypertensive chronic kidney disease, stage 4, with heart failure – Will need to monitor renal function on Lasix, check BMP in 2 weeks. | Congestive heart failure – Chronic. Swelling in bilateral ankles improving, continue Lasix. | Diastolic heart failure due to coronary artery disease – Confirmed with recent ECG results. Discussed coronary bypass surgery. | Acute on chronic systolic heart failure – Will discontinue HCTZ and start Lasix 40 mg daily, refer to CHF program. |