

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 Symptoms Disease progression Disease regression	Test results Medication effectiveness Response to treatment Physical exam findings	Test ordered Counseling Record review Discussion	Medication Therapies Referral Other modalities

MEAT Examples: Congestive Heart Failure

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.
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