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2025

# Congestive Heart Failure (CHF) – Patient Oriented Discharge Summary (PODS)

$\bigcap$ I came to the hospital on $oxdot$		and left	on	•
☐ I know why I was in the hospital. ☐ My essential care partner has a copy of this PODS. ☐ I have received a copy of the <i>Living with Heart Failure</i> pamphlet. Scan the QR code or visit: → www.nshealth.ca/patient-education-resources/0152 ☐ I have a copy of my Patient Priorities and Goals of Care form.				
Medications				
<ul> <li>□ My list of medications was reviewed with me.</li> <li>□ My approval forms for medication coverage have been submitted.</li> <li>□ My prescriptions were faxed to my pharmacy at:</li></ul>				
Before discharge, I received:				
₩ □ My morning medications		Notes:		
- ☐ My midday medications   My evening medications				
While I was in the hospital I received:				
Flu vaccine  ☐ Yes  ☐ Not applicable  ☐ After I go home, I will talk to r	COVID vaccine ☐ Yes ☐ Not applicable  my primary health care provide		Pneumonia vac  '' Yes  '' Not applicab  er or to my pharn	le
keeping my vaccines up to date.				



### Care at home

- It is very important to rest before and after any activities.
- Break large tasks into smaller steps. Take breaks often.
- What time of day are you at your best? Do your most demanding activities at that time.

# 1ந் Home care

- ☐ I have Continuing Care set up for when I go home.
- For more information:
  - > Phone (toll-free): 1-800-225-7225
- Scan the QR code or visit:
  - > www.nshealth.ca/continuing-care



# Weighing yourself

- Use the same scale. Keep it on a flat surface.
- Wear clothes that weigh about the same each time.
- Weigh yourself when you first get up in the morning, after you urinate (pee), and before you get dressed or eat breakfast.
- Write down your weight each day.

# 🍂 Exercise

- You should feel recovered 1 hour after exercising. Stop exercising if you feel:
  - More short of breath than usual
  - > Weak or tired
  - Dizzy
  - > Pain or discomfort
  - > Tightness in your chest
  - > Palpitations (your heart is pounding or racing)

# Eating and drinking

- Eating less salt (sodium) and drinking less fluids will lower the amount of fluid in your body. Salt makes your body retain (hold onto) fluid.
- Limit fluids to \_\_\_\_\_ ml a day.
- Prepare and cook all food without adding salt. Do not add salt to your meals at the table.
- Read food labels of packaged foods. Try to choose mostly foods with 5% or less DV (daily value) of sodium on the label. Limit prepared, processed, and convenience foods (like fast food).
- ☐ I was given a pamphlet on low sodium eating guidelines.
- ☐ I will follow the eating guidelines from my health care team.



# Prevent infection

- The best way to prevent the spread of infection is to wash your hands often with soap and water or use alcohol-based hand rub.
- Stay home until you are well.
- Wear a face mask in public places.
- Try to avoid others who are sick.
- Keep your vaccines up to date.



# **Smoking**

- The best thing you can do for your health is to stop smoking and/or vaping.
- When you are ready to quit, call 811 for information about resources to help you quit.



• Talk with your health care team about when you can go back to having sex.

### Mental health

- Practice habits to help your mental health (like lowering anxiety and stress) during and after your recovery. For ideas, scan the QR code or visit:
  - https://mha.nshealth.ca



- Mental Health and Addictions Services Intake Service
  - > Phone (toll-free): 1-855-922-1122
- If it is an emergency, call 911 or go to the nearest Emergency Department right away.



# My appointments:

Who?	Why?	When?	Contact information
Primary health care provider			
Specialist			

Resources Scan the QR code

Resources		Scan the QR code
Heart&Stroke	Heart and Stroke Foundation of Canada: Heart Failure  > www.heartandstroke.ca/heart-disease/ conditions/heart-failure	
CHFS SCIC	Canadian Heart Failure Society  https://heartfailure.ca/	
	Personal Directives in Nova Scotia Have you created and discussed your personal directives and/or advanced care planning for your health goals? Learn more:  > https://novascotia.ca/just/pda/	
Yo	Need a Family Practice Registry If you do not have a primary health care provider, you can register to be added to the Need a Family Practice Registry:  https://needafamilypractice.nshealth.ca/ Phone: 811	
	Being on the Need a Family Practice Registry gives you access to <b>VirtualCareNS</b> . They can prescribe medications, order tests, and refer you to a specialist or in-person care as needed:  > www.nshealth.ca/clinics-programs-and-services/virtual-care-ns	
<b>211</b> <sub>®</sub>	211 Nova Scotia is a free, confidential information and referral service that can connect you to programs and services offered by local community groups, nonprofits, and government departments across Nova Scotia, 24/7:  > Phone: 211 > https://211.ca	
NS	YourHealthNS YourHealthNS is a new app that helps you navigate health information, book services, and discover care options, right from your phone or computer:  > https://yourhealthns.ca	



## **HealthyNS**

Healthy NS provides free online health and wellness classes for people who live in Nova Scotia. You do not need a referral. To register for a class, use your Nova Scotia health card. For more information and to register for a class:



> www.healthyns.ca



### **Patient Education**

Find easy to understand and trustworthy health information:

https://library.nshealth.ca/ patienteducation



Notes:			

# What congestive heart failure zone are you in today?

### **Every day:**

- > Weigh yourself in the morning before you eat breakfast.
- > Follow your fluid restrictions as told by your health care team.
- > Take your medications exactly as told by your health care team.
- > Check for swelling in your feet, ankles, legs, and arms.
- > Eat foods that are low in salt or salt-free.
- > Balance your activity and rest.

✓ Green Zone: All clear — This is your goal.	What to do:
<ul> <li>No shortness of breath</li> <li>Usual amount of swelling in your legs or arms</li> <li>No weight gain</li> <li>No chest pain, pressure, or discomfort</li> <li>Able to do your usual activities</li> <li>Symptoms are under control</li> </ul>	Keep appointments with your primary health care provider and the Heart Function Clinic.
Yellow Zone: Caution — This zone is a warning.	What to do:
<ul> <li>Weight gain of 2 to 3 pounds in 24 hours (1 day) or up to 5 pounds in 7 days or less</li> <li>Wheezing sounds are getting worse</li> <li>Cough that is getting worse</li> <li>Changes in the amount, colour, or thickness of phlegm (sputum)</li> <li>Shortness of breath that is getting worse for at least 48 hours (2 days)</li> <li>More tired than usual</li> </ul>	<ul> <li>Call your primary health care provider or the Heart Function Clinic to ask what to do. Your health care provider may need to change your medications.</li> <li>If you do not have a primary health care provider, you can register to be added to the waitlist (see previous page).</li> </ul>
Red Zone: Emergency — This means act fast!	What to do:
<ul> <li>Weight gain of more than 5 pounds in 7 days and not feeling well, like:         <ul> <li>More tired than usual</li> <li>Dizziness, fainting, or falling</li> <li>Shortness of breath, chest tightness, or wheezing at any time</li> <li>Shortness of breath that wakes you up</li> <li>Needing to sit up, go into a tripod position (lean forward and support the upper body with hands on the knees or on another surface), open a window, or use a fan to get your breath</li> <li>Suddenly more confused or disoriented (not able to think clearly)</li> </ul> </li> </ul>	Call 911 or go to the nearest Emergency Department right away.

□ I acknowledge (accept) that Nova Scotia Health cannot be held responsible to disclosure, storage, and destruction of this information once provided to me, Decision Maker, or designate. I acknowledge Nova Scotia Health does not retached to the copy of this form within my medical record and cannot be reissued (printed of the copy of this form within my medical record and cannot be reissued).	, my Substitute tain (keep) a
Signature (Patient/Family):	
Health care provider:	(RN)
Date (YYYY/MM/DD):	

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here: www.nshealth.ca/patient-education-resources

Connect with a registered nurse in Nova Scotia any time: Call 811 or visit: https://811.novascotia.ca

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