Congestive Heart Failure
A Quick Reference Guide for Providers

Congestive heart failure (CHF) is a progressive condition with a set of symptoms caused by the hearts failure to function as a pump and supply the blood and oxygen needed throughout the body. CHF is a serious condition that can sometimes go unchecked for extended periods of time because the initial stages seldom cause drastic changes in health.

Documentation Tips:

Documentation for CHF should always include the following:

- **Type**
  - Systolic (reduced ejection fraction), diastolic (preserved ejection fraction), or combination
  - Left- or right-sided
  - End stage
- **Acuity**
  - Acute (decompensated)
  - Chronic (compensated)
  - Acute on chronic
- **Status**
  - Stable, worsening, improved, in remission, compensated, decompensated
- **Etiology**
  - Alcohol, hypertension, ischemia, rheumatic
- **Stage**
  - Stage 1 – no signs or symptoms; treated with lifestyle management
  - Stage 2 – SOB, fatigue, palpitations; monitoring required
  - Stage 3 – minor physical activity may cause fatigue, dyspnea, palpitations, angina
  - Stage 4 – symptoms always present with rest and any physical activity
- **Risk factors**
  - Coronary heart disease and heart attacks, hypertension, diabetes, tobacco use, obesity

Reminders:

- Document to the highest known level of specificity
- Documentation of systolic or diastolic dysfunction requires linkage to heart failure
- Etiology should show cause and effect
  - Associated with, due to, secondary to, hypertensive
- Historical temporary or transient heart failure should not be documented as current
- Document a clear and concise plan for CHF
  - Link to medications, orders for diagnostic testing and procedures, consultations

For questions or more information, please contact:

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