

# Top tips for reviewing patients with Chronic Heart Failure in a virtual consultation

Use these top tips to get the most out of your virtual consultations with your adult patients who have been diagnosed with chronic heart failure with reduced ejection fraction

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## Consultation preparation

- What is the reason for the consultation?
- Review the patient's clinical record
- Any recent cardiac decompensation, hospitalisation or contact with the HF services?
- Have they had any recent blood tests?
- Any recent relevant investigations?

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**TOP TIP**

- ♥ If patient doesn't have a smartphone could they borrow one (e.g. from family member or carer)?

## Encourage the use of technology

- Is patient using a phone, smartphone or computer?
- Consider the use of video to enhance the consultation

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## Assessment and presenting history

- Have they noticed a change in ADL, increased fatigue or change in exercise tolerance, e.g. NYHA? If exercise tolerance has changed is it gradual or sudden?
- Are they breathless while lying flat or wake in the night feeling breathless?
- Have they had newly developed or worsening of ankle swelling or increases in weight?
- Have they been aware of palpitations?


**TOP TIPS**

- ♥ Do they have a home BP monitor? If so, record BP and pulse
- ♥ Ask questions regarding appropriate ADL e.g. have they taken the bins out?/ been gardening?/walked the dog?
- ♥ Do they have scales? If so, record weight
- ♥ Do they have any other co-morbidities that may affect these symptoms e.g. COPD?

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## Virtual examination- practical examples

- Can the patient move around or say a complete sentence without being breathless?
- Can you observe rate of breathing or signs of oedema?


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## Medication review

- How well is the patient managing their drugs? Are they compliant?
- Has their medication been optimised?


**TOP TIPS**

- ♥ Is there a family member or carer who can give an additional perspective?
- ♥ Consider the use of a dosette box

**TOP TIPS**

- ♥ Ask patient to go and get something from another room to observe breathing
- ♥ Consider asking the patient or relative to test for pitting oedema
- ♥ Can the patient move the camera to show different parts of their body?

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## Next steps

- Following the patient assessment & examination use the information below to guide your next steps.



### No cause for concern

#### Set a next review date

- If there is no worsening of symptoms or signs
- If medication appears optimised
- If patient is reassured


**TOP TIP**

Remind patient of how to identify early signs of their condition worsening and when they should be seeking advice

### Seek further advice

#### Call or refer to HF specialist team or cardiologist

- If patient's symptoms or signs have worsened, e.g. minor change in NYHA class, consider increasing diuretic medication whilst seeking advice
- If concerns over adherence to medication
- Consider further tests whilst pending advice: U&E, eGFR, FBC & ECG etc.
- Consider reviewing patient again in 48-72 hours



### Urgent action needed

#### Act immediately, e.g. seek emergency specialist advice, call 999

- If patient has chest pain and severe breathlessness
- If there is a significant change in NYHA class
- If patient has acute decompensation (hypoxia, hypotension and tachycardia)

