



# Foundations Frameworks

## Approach to CHF Exacerbations

Author: Quentin Reuter, MD  
Editors: Emilie Powell, MD;  
Kristen Grabow Moore, MD, MEd

What type of CHF Exacerbation is it?



Type

Stable, Mild CHF Exacerbation

SCAPE: Sympathetic Surge, Crash, Acute Pulmonary Edema

Cardiogenic Shock

Presentation



Normotensive, not requiring resp support, mild edema and SOB



Hypertensive (SBP > 180, hypoxic, tachypneic, in extremis, diffuse rales



Hypotensive, cold and clamped down, AMS, CP, SOB

Goals/Treatment



a. Admit to floor  
b. One time dose of diuretics, nitrates, oxygen



Goals:  
-Reduce afterload, reduce preload, lower blood pressure, oxygenate



Goals:  
-Stabilize  
-Improve BP and forward flow



a. Access, monitors, pads  
b. Nitrates: SL -> IV drip  
c. CPAP/BiPAP  
d. ACE-I or nicardipine  
e. Diuretics



a. Intubate if necessary  
b. Central access  
c. Small fluid bolus  
d. Dobutamine, NE