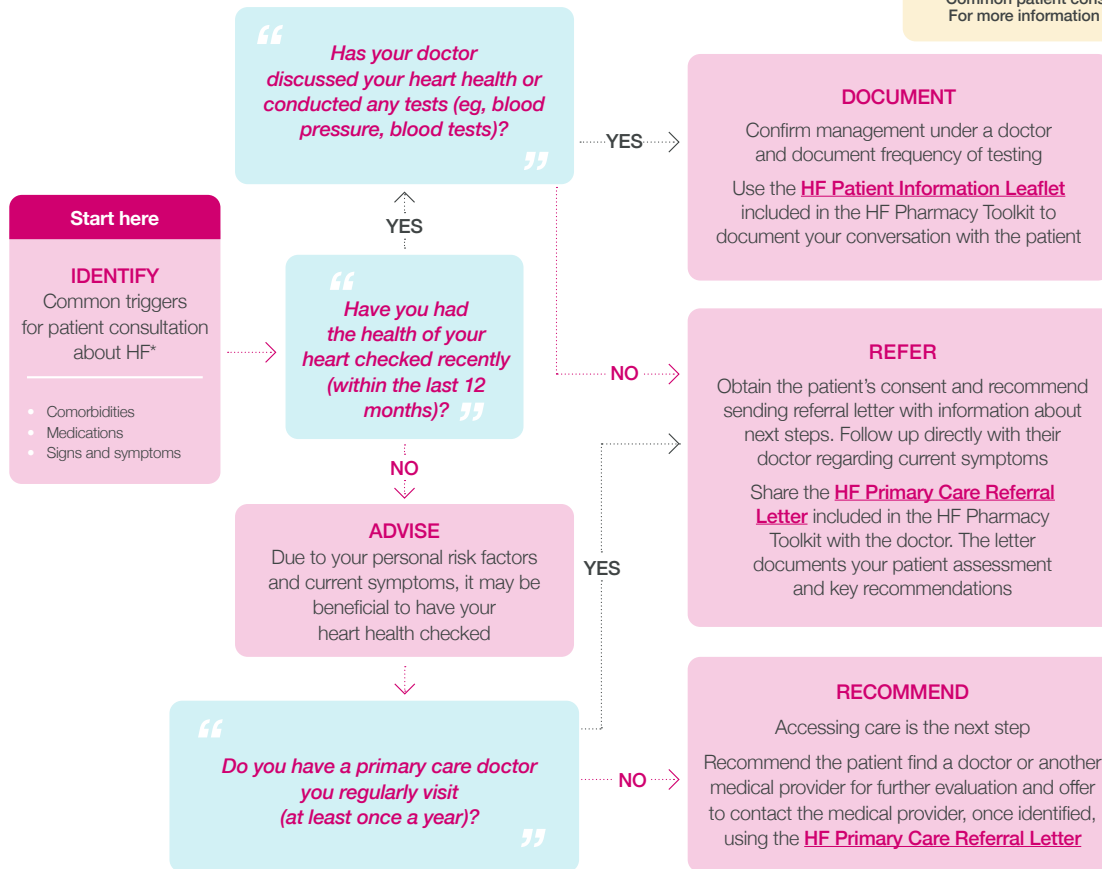


# Heart Failure Development Risk Assessment Tool

## Assessment of adult patients at risk

This tool is designed for pharmacists to help them provide a standardised patient-pharmacist conversation flow to support identification of those who may be at risk of developing HF. Counselling and education are focused on risk factors for the development of HF, importance of reporting symptoms to aid prompt diagnosis, and managing HF risk.

Offer the patient a private space to sit and talk



### Triggers for patient consultation about risk of developing HF\*



#### Comorbidities<sup>1,2</sup>

eg, hypertension, diabetes, ischaemic heart disease (IHD), chronic kidney disease (CKD), chronic obstructive pulmonary disease (COPD), arrhythmia



#### Medications<sup>3</sup>

eg, diabetes agents, diuretics, SGLT2is, beta-blockers, ACEIs, ARBs, ARNIs, MRAs



#### Signs and symptoms<sup>4</sup>

eg, breathlessness, ankle swelling, unintentional weight gain (eg, >2 kg/week), fatigue and tiredness, inability to exercise, nocturnal cough

\*Common patient consultation triggers, not an exhaustive list.

For more information on comorbidities, medications, and signs and symptoms, please review the HF eLearning module.

### Suggested counselling points for at-risk patients<sup>3</sup>

- Educate on the importance of quitting smoking. Advise patients on available pharmacological and nonpharmacological quit methods
- Promote the value of maintaining a healthy body weight and review healthy eating, including appropriate fluid intake and role of salt and micronutrients
- Discuss alcohol intake with patients according to national or local cardiovascular prevention guidelines
- Promote the importance of good sleep and provide advice on sleep health
- Discuss immunisation benefits and possible barriers and advise on local practices
- Recommend ways for patients to keep as active as possible given any limitations
- Provide tailored information to support symptom monitoring and self-management

### HF Patient Information leaflet | Document personal risk factors

- Complete the information leaflet to summarise the conversation with the patient
- Use the document to review disease and exacerbation risk factors, importance of reporting symptoms, and ways to reduce risk
- Check off applicable boxes and add any additional details in the notes section
- Sign and date the leaflet
- Share the leaflet with your patient during counselling as a visual aid or provide following the counselling

ACEIs, angiotensin-converting enzyme inhibitors; ARBs, angiotensin receptor blockers; ARNIs, angiotensin receptor/neprilysin inhibitors; MRAs, mineralocorticoid receptor antagonists; SGLT2is, sodium-glucose cotransporter-2 inhibitors.

1. Lawson CA et al. *Circ Heart Fail.* 2020;13(2):e006472. 2. Khalid K et al. *Cureus.* 2021;13(8):e17387. 3. McDonagh T et al. *Eur Heart J.* 2021;42(36):3599-3726. 4. Bozkurt B et al. *Eur J Heart Fail.* 2021;23:352-380.

These materials are created to support pharmacists in their interactions with patients and do not take into account a particular jurisdiction. The role and the responsibilities which a pharmacist can legitimately perform vary from one country to another. If you consider using these materials in full or in part, please ensure you understand and adhere to the legal and regulatory requirements in your country, including but not limited to the National Drug Act, data privacy legislation, professional code of conduct and any other. If you are interested in receiving a localised version for your country, which is compliant with the local rules and regulations, please contact us.

These materials were commissioned and funded by AstraZeneca. AstraZeneca have provided an educational grant to FIP to raise awareness and dissemination of this toolkit in line with FIP's mission to advance pharmacy worldwide.

This material is intended for pharmacists with an interest in cardiovascular disease.

# Heart Failure Symptom Assessment Tool

## Assessment of adult patients with HF

This tool is designed for pharmacists to help them provide a standardised patient-pharmacist conversation flow to support the monitoring and assessment of HF symptoms. It is designed as a prompt to start a conversation on the importance of symptom monitoring and symptom management to help prevent hospitalisation.

Offer the patient a private space to sit and talk

### Triggers for patient consultation about patients' HF\*



**Medications used in HF<sup>1</sup>**  
eg, beta-blockers, ACEIs, ARBs, ARNIs, MRAs, SGLT2is

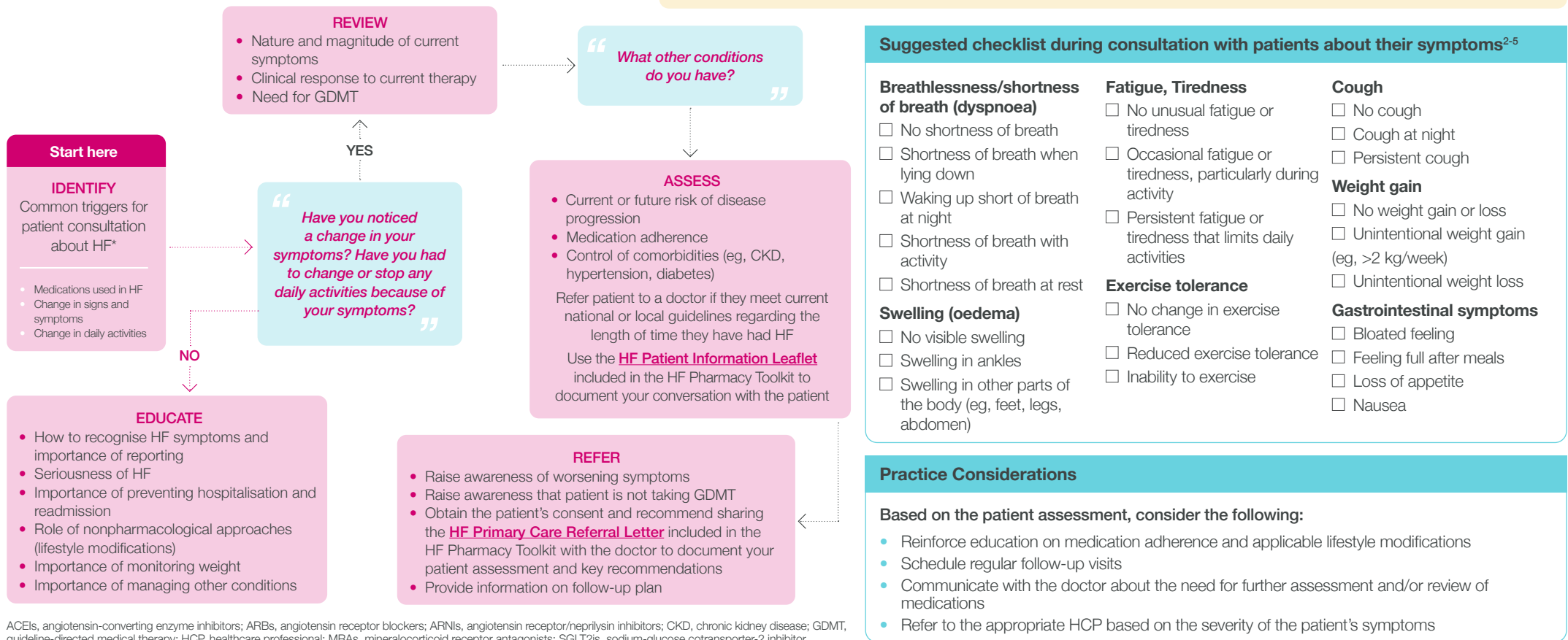


**Change in signs and symptoms<sup>2,3</sup>**  
eg, feeling more breathless than usual, increased swelling, weight gain, increased nocturnal coughing



**Change in daily activities<sup>3</sup>**  
eg, difficulty completing routine daily tasks due to symptoms or needs assistance to complete activities due to symptoms

\*Common patient consultation triggers, not an exhaustive list. For more information on HF, please review the HF eLearning module.



ACEIs, angiotensin-converting enzyme inhibitors; ARBs, angiotensin receptor blockers; ARNIs, angiotensin receptor/neprilysin inhibitors; CKD, chronic kidney disease; GDMT, guideline-directed medical therapy; HCP, healthcare professional; MRAs, mineralocorticoid receptor antagonists; SGLT2is, sodium-glucose cotransporter-2 inhibitor.

1. McDonagh T et al. *Eur Heart J*. 2021;42(36):3599-3726. 2. Bozkurt B et al. *Eur J Heart Fail*. 2021;23:352-380. 3. Warren A, Kenny C, Murphy K. *Pharm J*. How to support patients being treated for chronic heart failure. Available at: <https://pharmaceutical-journal.com/article/d/how-to-support-patients-being-treated-for-chronic-heart-failure>. Accessed August 2024. 4. American Heart Association (AHA). Heart failure signs and symptoms. Available at: <https://www.heart.org/en/health-topics/heart-failure/warning-signs-of-heart-failure>. Accessed June 2024. 5. National Health Service (NHS). Heart failure. Available at: <https://www.nhs.uk/conditions/heart-failure/>. Accessed August 2024.

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