

Advice to a carer: managing newly diagnosed heart failure at home



Assume that today's date is 21 October 2026. You are the heart failure nurse at Riverbend Heart Clinic. Mr Russo has agreed that you may write to his daughter, who is his main carer. Using the information in the case notes, write a letter to Ms Teresa Russo advising her on how to help her father manage his condition at home. Address the letter to Ms Teresa Russo, 31 Olive Grove, Riverbend. In your answer: expand the relevant notes into complete sentences; do not use note form; use letter format. The body of the letter should be approximately 180–200 words.

Choose one box per line: I = Include / C = Compress / O = Omit. Answers and reasons are on the webpage (scan QR).

Patient details

- | | I | C | O |
|-----------------------------|--------------------------|--------------------------|--------------------------|
| 1. Name: Mr Vincent Russo | ☐ | ☐ | ☐ |
| 2. DOB: 12/12/1946 (79 yrs) | ☐ | ☐ | ☐ |
| 3. Retired builder | ☐ | ☐ | ☐ |

Social background

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|---|--------------------------|--------------------------|--------------------------|
| 4. Lives with daughter (Teresa, 52), who is his main carer; she works part-time (3 days/wk) | ☐ | ☐ | ☐ |
| 5. Mr Russo has consented to information being shared with his daughter | ☐ | ☐ | ☐ |
| 6. Daughter describes father as 'stubborn and difficult' | ☐ | ☐ | ☐ |
| 7. Daughter going through a divorce — 'very stressed' | ☐ | ☐ | ☐ |
| 8. Has a dog; enjoys walking it to the local park | ☐ | ☐ | ☐ |

Medical history

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|---|--------------------------|--------------------------|--------------------------|
| 9. Heart failure with reduced ejection fraction — diagnosed 10/26 (echocardiogram: ejection fraction 35%) | ☐ | ☐ | ☐ |
| 10. Hypertension (since 2005) | ☐ | ☐ | ☐ |
| 11. Gout — takes ibuprofen (bought over the counter) during flare-ups | ☐ | ☐ | ☐ |
| 12. Inguinal hernia repair 1998 | ☐ | ☐ | ☐ |
| 13. Brother died of a heart attack aged 70 | ☐ | ☐ | ☐ |
| 14. Allergies: nil known | ☐ | ☐ | ☐ |

Clinic review 20/10/26

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|--|--------------------------|--------------------------|--------------------------|
| 15. Presented to GP with breathlessness and swollen ankles; referred to cardiology | ☐ | ☐ | ☐ |
| 16. Now breathless climbing one flight of stairs; sleeping on 2 pillows | ☐ | ☐ | ☐ |
| 17. Mild ankle swelling; weight today 84.2 kg (was 87.5 kg 2 wks ago) | ☐ | ☐ | ☐ |
| 18. BP 112/68; HR 76 | ☐ | ☐ | ☐ |
| 19. ECG: sinus rhythm | ☐ | ☐ | ☐ |

Medications (cardiologist)

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|---|--------------------------|--------------------------|--------------------------|
| 20. Furosemide (fluid tablet) 40 mg each morning | ☐ | ☐ | ☐ |
| 21. Perindopril 2.5 mg daily; bisoprolol 1.25 mg daily (dose to be increased slowly at clinic visits) | ☐ | ☐ | ☐ |
| 22. Avoid ibuprofen and other anti-inflammatories — GP to advise alternative gout treatment | ☐ | ☐ | ☐ |
| 23. May feel dizzy when standing — stand up slowly | ☐ | ☐ | ☐ |
| 24. Cardiologist plans to add spironolactone and dapagliflozin at later visits if kidney function and potassium allow | ☐ | ☐ | ☐ |
| 25. Baseline bloods 20/10: creatinine 98 µmol/L, eGFR 64, Na 139 mmol/L, K 4.4 mmol/L | ☐ | ☐ | ☐ |
| 26. Repeat blood test in 1 wk at local pathology collection centre (form given) | ☐ | ☐ | ☐ |

Self-care advice

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| 27. Weigh every morning after using toilet, before breakfast, same scales, similar clothing; record in diary | ☐ | ☐ | ☐ |
| 28. Contact clinic if weight increases by > 2 kg in 2 days, or breathlessness/ankle swelling worsens, or needs more pillows to sleep | ☐ | ☐ | ☐ |
| 29. Individual fluid allowance prescribed: 1.5 L/day, including drinks and liquid foods (tea, soup, ice cream); review at next clinic | ☐ | ☐ | ☐ |
| 30. Reduce salt — no added salt; avoid processed foods | ☐ | ☐ | ☐ |
| 31. Take furosemide in the morning to avoid passing urine at night; plan outings accordingly | ☐ | ☐ | ☐ |
| 32. Call ambulance for chest pain, severe breathlessness at rest or fainting | ☐ | ☐ | ☐ |
| 33. Gentle daily walking encouraged | ☐ | ☐ | ☐ |
| 34. Influenza vaccine given 20/10 | ☐ | ☐ | ☐ |

Plan

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|---|--------------------------|--------------------------|--------------------------|
| 35. Heart failure clinic review 03/11/26 — bring weight diary | ☐ | ☐ | ☐ |
| 36. Clinic phone: 5550 1234 (Mon–Fri 8:30 am–4:30 pm); after hours — GP after-hours service | ☐ | ☐ | ☐ |