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Johanna Ruckey
Maine Medical Center

William Fyler
Maine Medical Center

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Improvement of CHF patients' fluid restriction education through self-efficacy

Johanna Ruckey RN and William Fyler BSN

Background: Dietary discretion through limited salt and fluid intake is an important aspect of heart failure (HF) management. Keeping accurate account of fluid intake has shown itself to be a difficult task, as both staff and patients often fail to do so on a fairly regular basis. Although staff are aware of a patient's fluid restrictions, there is a deficit in the patient's role in tracking their own intake. Patients often express confusion and frustration regarding their daily fluid intake, but also lack of initiative to police themselves. Through fostering a sense of self-efficacy and self-management in the patient, they will be more likely to take a more active role in monitoring their fluids and may do so more accurately. Various fluid tracking sheets and teaching tools appealing to different learning styles can be combined into a "HF teaching kit." Patients would be able to select a tracking tool that best meets their needs and use it to proactively monitor their fluid intake. By shifting the responsibility of fluid intake monitoring to a more patient focused task, there may be a more accurate account of intake on R7.

Design/Method/Plans: We will be utilizing a teaching that the Heart Failure currently uses and a tracking tool that we designed. We will survey patients prior to discharge.

Purpose/PICOT question: For the patients' on R7, does patient centered fluid management thru increased patient efficacy result in more accurate fluid tracking versus nursing centered fluid monitoring?

Results: TBD

Time frame: We anticipate starting to educate with the tool in the next six months which will allow us to educate the R7 staff on the tool and then begin to survey patients prior to discharge to see if tool proves useful.