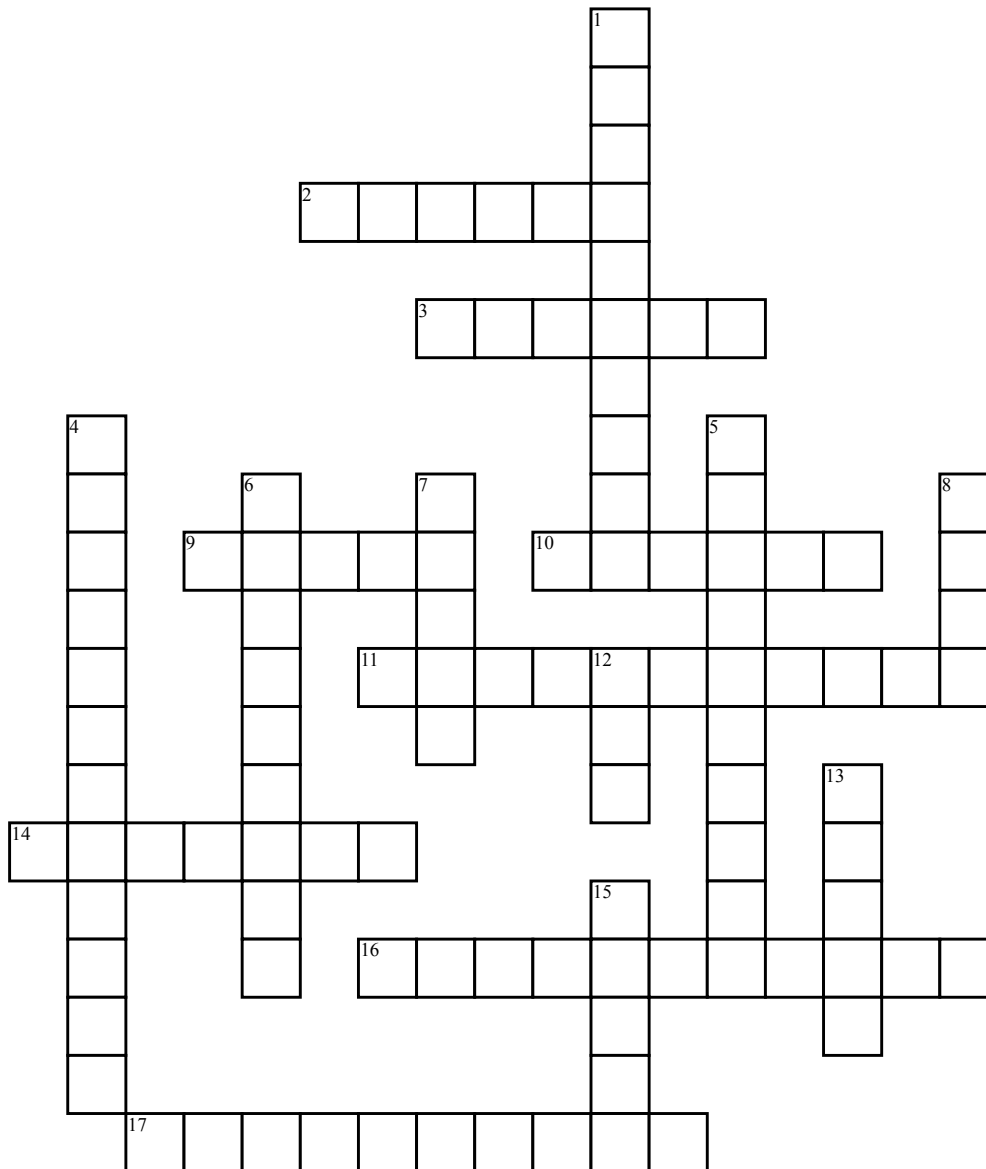


Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Heart Failure



## Across

2. This electrolyte should be restricted to less than 1500mg/day in HF patients

3. 40 mg of PO Furosemide is equivalent to how many mg of IV furosemide

9. When EF >50% this is known as what type of HF?

10. A patient with structural heart disease but without signs or symptoms of HF would be classified as what ACCF/AHA stage?

11. This class of medication slows heart rate, allowing better ventricular filling (increased EF)

14. The amount of myocardial fiber stretch at the end of diastole

16. Used in AA patients class III who are symptomatic despite ACE/BB

17. What is the target dose of metoprolol in patients with HF?

## Down

1. A patient who presents with SOB, rapid weight gain with elevated JVP & rales would be classified as which type of AHF (3 words)

4. Which class of medication inhibits reabsorption of Na<sup>+</sup> and Cl<sup>-</sup> at ascending limb of Loop of Henle?

5. Major toxicity of both ACE/ARB's

6. the resistance that must be overcome in order for the ventricle to eject blood

7. When EF < 40% and there is systolic dysfunction, this is known as which type of HF?

8. Which Class is unable to carry on any physical activity without symptoms of HF

12. This lab value indicates level of myocardial stretch and is often elevated in HF patients

13. This class of medications is often used to treat pain & should be avoided in HF

15. Spironolactone & ARBs have been shown to decrease mortality in HFpEF. True or False