Evaluation of the Degree of Clinical Congestion, With Common Reasons for Residual Congestion Listed in the Text Box

Figure 5

Inpatient trajectories are primarily defined by the pace and extent of decongestion. Use the figure below for evaluation of the success of de-congestion for a patient.

Progress Toward De-congestion

**Freedom from clinical congestion**

- No peripheral edema
- No rales
- No dyspnea on minimal exertion
- No hepatomegaly or congestive GI symptoms
- No orthopnea or bendopnea
- Jugular venous pressure \( \leq \) 6-8 mm Hg
- No hepatojugular reflex

**Common reasons for Residual Congestion**

- Low cardiac output state
- Dominant right heart failure
- Advanced renal disease
- Symptomatic hypotension
- Limitations to patient engagement in self-care

**Lack of improvement in signs/symptoms of HF**

- Lack of decrease in natriuretic peptide levels
- Lack of decrease in weight

GI = Gastrointestinal; HF = heart failure