

Symptom and Activity Level Assessment (Outpatient Setting)

Guideline Recommended Practice

In general, patients with LV dysfunction or HF present to the healthcare provider in 1 of 3 ways:

1. Decreased exercise tolerance.

• Complaints of tolerance reduction due to dyspnea and/or fatigue on exertion.

2. Fluid retention.

- Complaints of leg or abdominal swelling, difficulty lying flat, or weight gain as primary or only symptom.
- 3. With no symptoms or symptoms of another cardiac or non-cardiac disorder.

Assessing Symptom and Activity Level

Recording NYHA Class should occur at each office visit to quantify the degree of functional limitation imposed by HF.

NYHA Class	Symptoms
I	No limitation of physical activity. Ordinary physical activity (e.g., walking , climbing stairs) does not cause symptoms of HF.
II	Slight limitation of physical activity. Comfortable at rest, but ordinary physical activity results in symptoms of HF.
111	Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity, e.g. walking short distances (20-100 yards), causes symptoms of HF.
IV	Unable to carry on any physical activity without symptoms of HF, or, symptoms of HF at rest.

Performance Measure Reporting

What's Being Measured

Percentage of all patient visits, \geq 18 years of age with a diagnosis of heart failure, which have documented quantitative results of current activity level and clinical symptoms evaluations.

How to Satisfy this Measure

Document the results of both the *current activity level* and *clinical* symptoms of your HF patients (\geq 18 years) at each office visit.

Exceptions are made for those with documentation of medical reason(s) for not evaluating both components (eg, severe cognitive or functional impairment).

For registry users, documentation must include assignment of a New York Heart Association (NYHA) Class: NYHA Class I, NYHA Class II, NYHA Class III, or NYHA Class IV (see table on the left).

Non-registry users must provide either NYHA Class assignment OR the completion of a valid, reliable, disease-specific instrument, such as:

- o Kansas City Cardiomyopathy Questionnaire
- o Minnesota Living with Heart Failure Questionnaire
- o <u>Chronic Heart Failure Questionnaire</u>