

# Case

- A 68y M patient with CHF presents you with a prescription for metoprolol 25mg PO bid
- PMH: CHF, AF
- On profile:
  - nitrospray ii PRN, nitropatch 0.4 mg/d, enalapril 10mg bid, ASA 325 mg/d, furosemide 40mg/d, warfarin 5mg daily, atorvastatin 40mg qHS
- What counselling would you provide this patient?



# Case 1

- ID: A 74y M with CHF
- Profile: furosemide 40mg/d, ramipril 7.5mg/d, bisoprolol 10mg/d
- Issue: SCr previously stable at 130  $\mu\text{mol/L}$ . Slow rise to 165  $\mu\text{mol/L}$  over past 4 weeks.
- Possible interventions?

# Case 2

- ID: A 70y F with CHF
- Profile: furosemide 20mg/d, bisoprolol 10mg/d, K-Dur 40 mEq/d.
- Issue: New Rx for spironolactone 25mg/d and candesartan 8mg/d
  
- What would you want to know before filling this Rx?

# Case 3

- ID: A 79y M with CHF
- Profile: furosemide 80mg/d, bisoprolol 10mg/d, K-Dur 40 mEq/d, ramipril 10mg/d, spironolactone 25mg/d.
- Issue: Slow deterioration in exercise tolerance attributed to CHF progression.
- Can his CHF therapy be augmented to improve his symptoms?

# Case 4

- ID: A 82y M with CHF
- Profile: furosemide 80mg/d, ramipril 10mg/d. carvedilol 6.25mg bid added 1 week ago.
- Issue: Peripheral edema & exercise tolerance worsened in past 5 days.
- Possible interventions?

# Case 5

- ID: A 82y M with CHF
- Profile: furosemide 80mg/d, ramipril 10mg, metoprolol 100 bid.
- Issue: developed a cough over the past 2 weeks.
- Analysis?

# Case 6

- **ID:** 67 y/o M who had an NSTEMI 48h ago with pulmonary edema within 24h of the event. EF 35% today.
- **PMH:** hyperlipidemia, HTN, depression.
- **MPTA:** imagine it's a clean slate.
- **Profile:** imagine it's a clean slate.
  
- You're in charge of designing his drug therapy regimen today. What will it look like?