



****ATTACH TO PATIENT'S CHART****

Physician: _____ Today's Date: _____
Patient: _____ Admitted To: _____
Member ID: _____ Admit Date: _____
Diagnosis: _____ Discharge Date: _____

This member was recently hospitalized. If you are considering a therapeutic trial of ACE inhibitors and/or selective beta-blockers for CHF, please refer to our applicable preferred drug list below.

Preferred Drug List:

Selective Beta-Adrenergic Blockers: Coreg[®], Toprol XL[®], metoprolol tartrate

Ace Inhibitors: enalapril, lisinopril, captopril, benazepril

Diuretics: furosemide, bumetanide, spironolactone, zaroxolyn

Vasodilators: hydralazine, isosorbide dinitrate, isosorbide mononitrate

Scales:

Members can obtain a scale through our Congestive Heart Failure Disease Management Program by calling 1-866-593-2358

***Note medication coverage is subject to generic, brand, and co-pay benefit structure**

ACC/AHA Guidelines* for the Management of Congestive Heart Failure Recommend:

Most patients with heart failure should be routinely managed with a selected combination of medications which include:

- Ace Inhibitors
- Selective Beta-adrenergic blockers
- Loop Diuretics/Spironolactone
- Vasodilators
- Digoxin

Unless there is a specific contraindication, all patients with heart failure due to left ventricular systolic dysfunction should receive an ACE inhibitor and a selective beta-blocker**, because they have been shown to favorably influence the long-term prognosis of heart failure.

Clinical Trial evidence supports the slow up titration of ACE Inhibitor therapy and beta-blockade with the addition of diuretics to manage fluid overload.

* ACC/AHA Guidelines for the Evaluation and Management of Chronic Heart Failure in the Adult, December 2001.
(The full text may be accessed via www.acc.org, www.americanheart.org)

**Drugs for Treatment of Heart Failure, Treatment Guidelines from The Medical Letter, April 2003.

Address questions to our Congestive Heart Failure Disease Management Program 1-866-593-2358

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