

Patient: _____ CHF Documentation

Measure	Y/N	Result	Date
Ejection fraction Documented			
Etiology of Heart Failure Documented			
Stage of CHF Documented (A,B,C,D)			
Appropriate meds utilized for Stage C/D (documentation of contraindication if not on)			
ACE/ARB			
Beta Blocker			
Diuretic			
CHF (G/Y/R) information reviewed yearly			