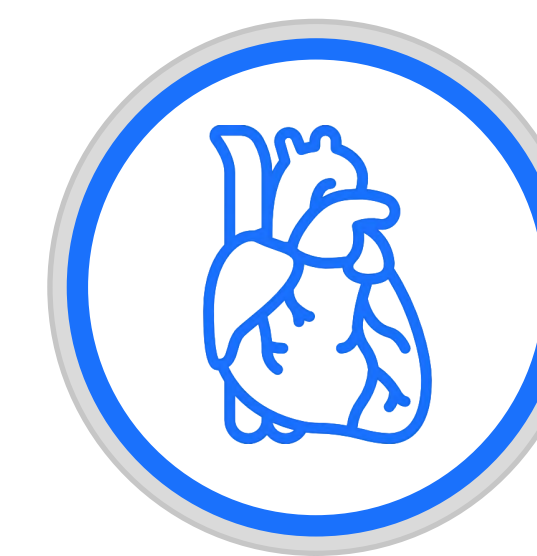


EVALUATION OF INTRA-ABDOMINAL PRESSURE AS AN EARLY MARKER OF DIURETIC RESPONSE IN PATIENTS WITH CARDIORENAL SYNDROME

INCLUSION CRITERIA

- **Age** >18 years-old
- Symtomatic congestive **heart failure**
- **NT-proBNP** at baseline ≥ 1000 pg/mL
- Eligible for **intravenous diuretic** administration
- Recent **transthoracic echocardiogram** available
- **Informed consent**



Heart



Kidney

ADMISSION

- Clinical evaluation
- Diuretic dosage
- Blood test
- Urine sample
- IAP measurement
- US congestive evaluation
- Renal doppler.



48H ASSESSMENT

- Clinical evaluation
- Diuretic dosage
- Urine output



72H ASSESSMENT

- Clinical evaluation
- Diuretic dosage
- Urine output
- Blood test
- Urine sample
- IAP measurement
- US congestive evaluation
- Renal doppler



DISCHARGE

30 DAYS POST-DISCHARGE EVALUATION

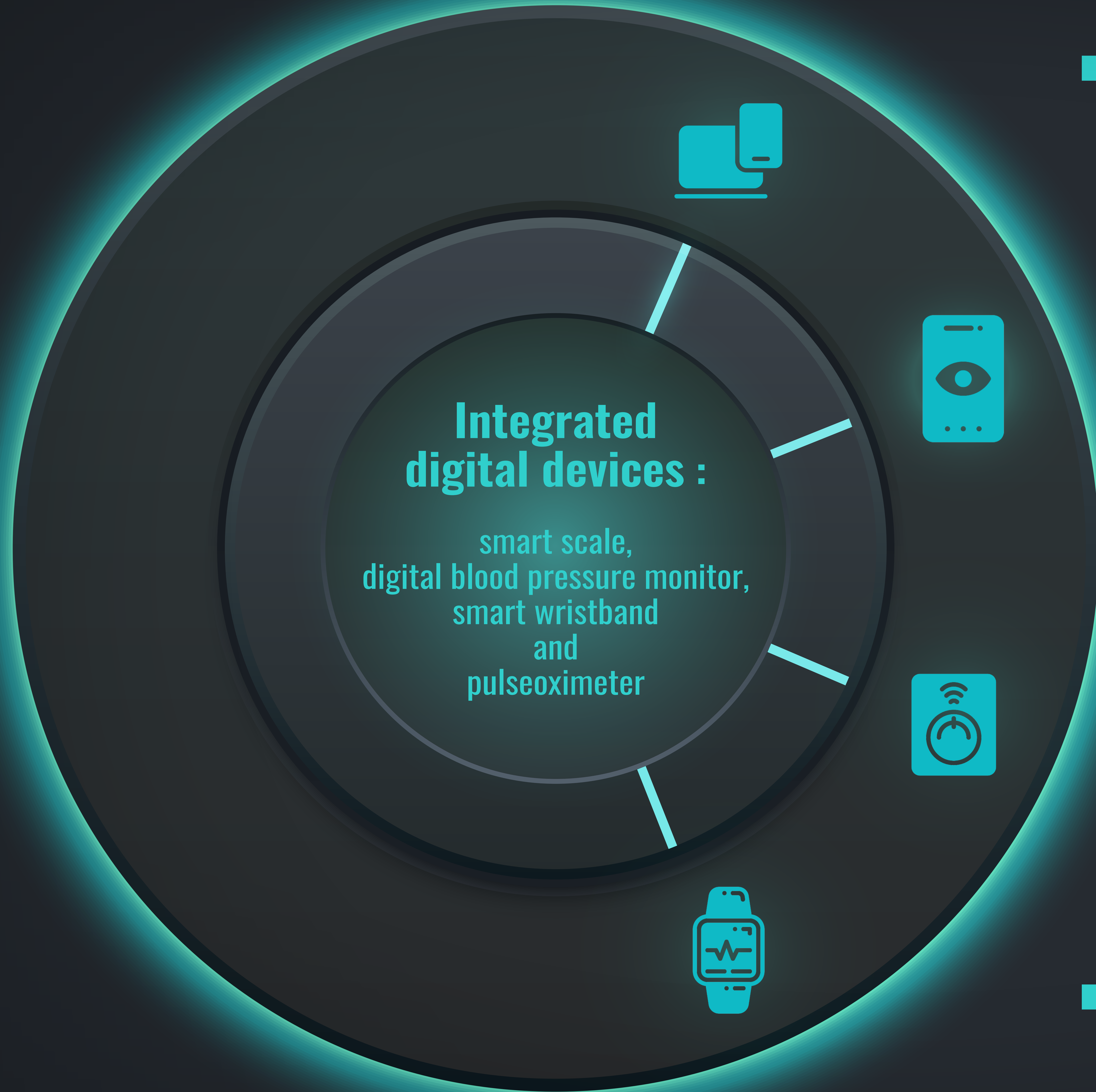
- Clinical evaluation
- Blood test
- Detection of major outcomes:
 - Death from any cause
 - Readmission for HF
 - Anticipated need for IV diuretics



90 DAYS POST-DISCHARGE EVALUATION

- Clinical evaluation
- Blood test
- Detection of major outcomes:
 - Death from any cause
 - Readmission for HF
 - Anticipated need for IV diuretics





To assess



- Hospital readmission rate
- Emergency room visits

Health Staff Reported Experiences (Prems)



Questionnaire:

- Telehealth Usability Questionnaire (TUQ)

Patient-Reported Outcome Measure (Proms)

Questionnaires:

- European Scale of Self-Care in Heart Failure
- SF-12 Quality of Life Scale
- Patients' fluid intake

Patient Reported Experiences (Prems)



Questionnaires:

- Post-Study System Usability Questionnaire (PSSUQ)
- System Usability Scale (SUS)

