

Water Pill Guide

This guide tells you how much diuretic or “water pill” to take each day.

Please fill it out with your doctor and keep it with your medicines. Bring this guide and a list of your medicines to all your visits with your doctor.



My Target Weight is _____ pounds.

My Doctor's Name: _____ Phone Number: _____



If my morning weight is **between**:
_____ pounds
and
_____ pounds

Take: _____

Morning Dose:
_____ mg

Afternoon Dose:
_____ mg



If my morning weight is **OVER**:
_____ pounds

**INCREASE my water pill
FOR ONE DAY ONLY**

Take: _____

Morning Dose: _____ mg

Afternoon Dose: _____ mg



If my morning weight is **UNDER**:
_____ pounds

**DECREASE water pill
FOR ONE DAY ONLY**

Take: _____

Morning Dose: _____ mg

Afternoon Dose: _____ mg



If my weight the next morning is **STILL OVER**:
_____ pounds

OR if I have any symptoms such as troubled breathing, fast heartbeat, chest pain or confusion:

CALL MY DOCTOR!



If my weight the next morning is **STILL UNDER**:
_____ pounds

OR if I have any symptoms such as troubled breathing, fast heartbeat, chest pain or confusion:

CALL MY DOCTOR!

If your symptoms are severe, call 911 or go to the emergency room

Heart Failure practice tools available at www.mainehealth.org/hf

Doctor: Please see other side for instructions on using this 'Water Pill Guide.'

Instructions for Provider: MaineHealth “Water Pill” Diuretic Self-Management Guide

Assess patient or caregiver’s ability to understand and execute this protocol safely and accurately. In order to prescribe this protocol, patients should:

- Understand how to calculate ‘mg tablet strength’
- Be on a maintenance loop diuretic dose in the moderate range*

Enter patient’s Target Weight: e.g., 150 pounds

My Target Weight is 150 pounds.

My Doctor’s Name: _____ Phone Number: _____

If my morning weight is **between**:

154 pounds

and

146 pounds

Take: Furosemide

Morning Dose: 40 mg

Afternoon Dose: 40 mg

If my morning weight is **OVER**:

154 pounds

INCREASE my water pill FOR ONE DAY ONLY

Take: Furosemide

Morning Dose: 80 mg

Afternoon Dose: 80 mg

If my weight the next morning is **STILL OVER**:

154 pounds

OR if I have any symptoms such as troubled breathing, fast heartbeat, chest pain or confusion:

CALL MY DOCTOR!

If my morning weight is **UNDER**:

_____ pounds

DECREASE water pill FOR ONE DAY ONLY

Take: 146

Morning Dose: 20 mg

Afternoon Dose: 20 mg

If my weight the next morning is **STILL UNDER**:

146 pounds

OR if I have any symptoms such as troubled breathing, fast heartbeat, chest pain or confusion:

CALL MY DOCTOR!

If your symptoms are severe, call 911 or go to the emergency room

Add 4 pounds to Target Weight

Subtract 4 pounds from Target Weight

Enter patient's current regimen e.g., Furosemide 40 mg twice daily

Multiply current dose from left column by 2

Divide current dose from left column by 2

*See mainehealth.org/hf for additional guidance. Patients on higher doses should be referred to the Maine Medical Center Advanced Heart Failure Program if a self-dosed diuretic protocol is desired.

Oral Loop Diuretic Dose Equivalency		
Furosemide 40 mg	Bumetanide 1 mg	Torsemide 20 mg

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