

Discharge Packet for Patients Diagnosed with **Heart Failure**

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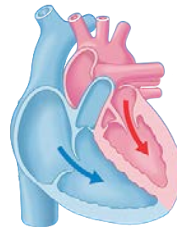
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HEART FAILURE

What is Heart Failure?

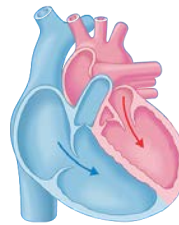
If you have heart failure, you're not alone. About 6.2 million Americans are living with it today. In fact, it's one of the most common reasons people age 65 and older go into the hospital. It can take years for heart failure to develop. Heart failure is called congestive heart failure when fluid builds up in various parts of the body. If you haven't been diagnosed with heart failure but are at risk for it, you should make lifestyle changes now to prevent it! Lifestyle changes may include regular exercise, maintaining a healthy weight, not smoking and controlling blood pressure, cholesterol and blood sugar levels.

Heart failure symptoms usually develop over time as your heart becomes less able to pump the blood that your body needs.



The Normal Heart has strong muscular walls which contract to pump blood out to all parts of the body.

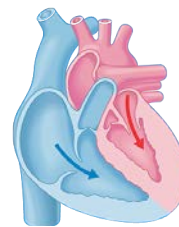
Heart muscle pumps blood out of the left ventricle.



Heart Failure with Reduced Ejection Fraction (HFrEF) (Systolic HF)

is a type of heart failure where the heart weakens, preventing the heart from pumping enough blood.

Weakened muscle prevents left ventricle from pumping enough blood.



Heart Failure with Preserved Ejection Fraction (HFpEF) (Diastolic HF)

is a type of heart failure where the heart muscle contracts normally but the ventricles do not relax as they should.

Stiff muscle prevents left ventricle from relaxing and filling with enough blood.

Does your heart stop?

When you have heart failure, it doesn't mean that your heart has stopped beating. It means that your heart isn't pumping blood as it should. The heart keeps working, but the body's need for blood and oxygen isn't being met.

Heart failure can get worse if not treated. It's very important to understand and follow the treatment plan developed by your health care team. When you make healthy changes, you can feel a lot better and enjoy life much more!

What can happen?

- Your heart does not pump enough blood.
- Blood backs up in your veins.
- Fluid builds up in your body, causing swelling in your feet, ankles, legs and abdomen. This is called "edema."
- Fluid builds up in your lungs. This is called "pulmonary edema."
- Your body does not get enough oxygen.

What are the signs of heart failure?

- Shortness of breath, especially when lying down
- Tired, run-down feeling
- Coughing or wheezing, especially when you exercise or lie down
- Swelling in feet, ankles, legs and abdomen
- Weight gain from fluid buildup
- Confusion or can't think clearly

What are the causes?

The most common cause of heart failure is coronary artery disease (CAD) occurs when arteries that supply blood to the heart muscle become narrowed by buildups of fatty deposits called plaque. This can lead to a heart attack which can damage and weaken the heart muscle and cause heart failure. Other common causes of heart failure are:

- High blood pressure
- Heart valve disease
- Obesity (being overweight)
- Diseases of the heart muscle (cardiomyopathy)
- Diabetes

What are the causes? *continued*

- Infection of the heart and/or heart valves
- Abnormal heart rhythm (arrhythmias)
- Sleep disorders
- Thyroid problems
- Alcohol or drug abuse
- Certain types of chemotherapy

How is it diagnosed?

Diagnosing heart failure

If you have potential signs of heart failure, your health care team may order tests to confirm the diagnosis.

Common tests for diagnosing heart failure

- Physical examination
- Blood tests
- Chest X-rays
- Electrocardiogram (EKG or ECG)
- Echocardiography (“echo”)
- Exercise Stress test
- Radionuclide ventriculography or multiple-gated acquisition scanning (abbreviated as MUGA)
- Cardiac catheterization
- Magnetic resonance imaging (MRI)

How is it treated?

- Heart failure is treated with several different medications which can reduce symptoms and prolong life.
- A low-sodium (salt) diet can decrease fluid retention.

- If you have coronary or valve disease, stenting or surgery may be necessary.
- Cardiac devices (pacemakers or defibrillators) may be needed.
- In advanced heart failure, heart transplantation may be necessary.

What can I do to manage my heart failure?

- Follow the advice of your health care team.
- If you smoke, quit.
- Take your medicines exactly as prescribed.
- Weigh daily to check for weight gain caused by increased fluid.
- Track your daily fluid intake.
- Monitor your blood pressure daily.
- Maintain a healthy weight to reduce the strain on your heart.
- Avoid or limit alcohol and caffeine.
- Eat a heart-healthy diet that’s low in sodium and fat.
- Eat less salt and salty foods.
- Get regular exercise most days of the week.
- Get adequate rest.

HOW CAN I LEARN MORE?

- 1** Call 1-800-AHA-USA1 (1-800-242-8721), or visit heart.org/hf to learn more about heart failure.
- 2** Sign up to get *Heart Insight*, a free magazine for heart patients and their families, at heartinsight.org.
- 3** Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at heart.org/supportnetwork.

Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

How much salt may I eat?

How much weight gain is too much?

My Questions:

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HEART FAILURE

Types of Heart Failure

Left-sided heart failure

The heart's pumping action moves oxygen-rich blood as it travels from the lungs to the left atrium, to the left ventricle, then pumps it to the rest of the body. The left ventricle supplies most of the heart's pumping power, so it's larger than the other chambers and essential for normal function. In left-sided or left ventricular (LV) heart failure, the left side of the heart must work harder to pump the same amount of blood.

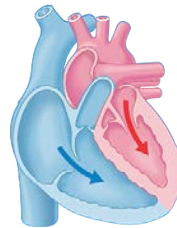
There are two types of left-sided heart failure. Treatments are different for the two types.

- **Heart failure with reduced ejection fraction (HFrEF), also called systolic failure:** The left ventricle loses its ability to contract normally. The heart can't pump with enough force to push enough blood into circulation.
- **Heart failure with preserved ejection fraction (HFpEF), also called diastolic failure (or diastolic dysfunction):** The left ventricle loses its ability to relax normally (because the muscle has become stiff). The heart can't properly fill with blood during the resting period between each beat.

Right-sided heart failure

The heart's pumping action moves "used" blood that returns to the heart through the veins through the right atrium into the right ventricle. The right ventricle then pumps the blood back out of the heart into the lungs to be replenished with oxygen.

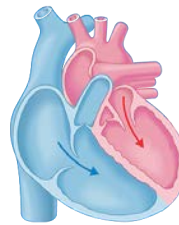
Right-sided or right ventricular (RV) heart failure often occurs as a result of left-sided failure. When the left ventricle fails, increased fluid pressure is transferred back through the lungs and to the right side of the heart. Fluid build up on the right side can lead to failure of the right ventricle. When the right side loses pumping power, blood backs up in the body's veins. This usually causes swelling or congestion in the legs, ankles and abdomen



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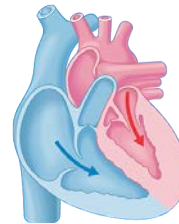
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Heart failure with congestion

If you have been diagnosed with heart failure, you may experience congestion which can occur when fluid builds up in the body tissues. Often swelling (edema) results. Most often there's swelling in the legs and ankles, but it can happen in other parts of the body, too.

Sometimes fluid collects in the lungs and interferes with breathing, causing shortness of breath, especially when a person is lying down. This is called pulmonary edema and if left untreated can cause respiratory failure.

Heart failure can affect the kidneys' ability to dispose of sodium and water. This retained water also increases swelling in the body's tissues (edema).

We have many other fact sheets to help you make healthier choices to reduce your risk, manage disease or care for a loved one. Visit heart.org/answersbyheart to learn more.

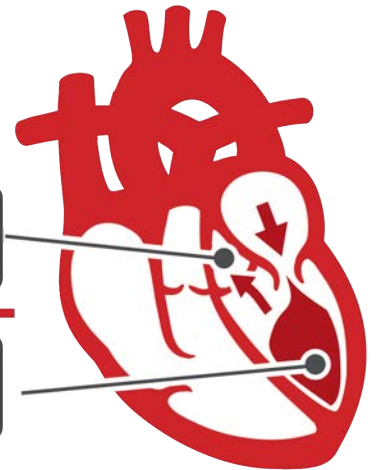
HEART FAILURE

Your Ejection Fraction Explained

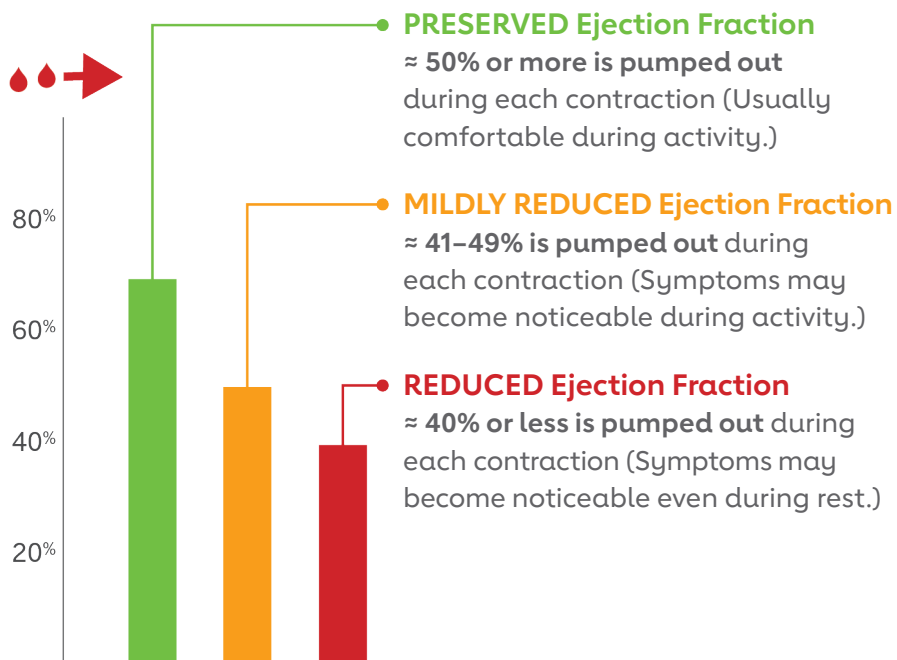
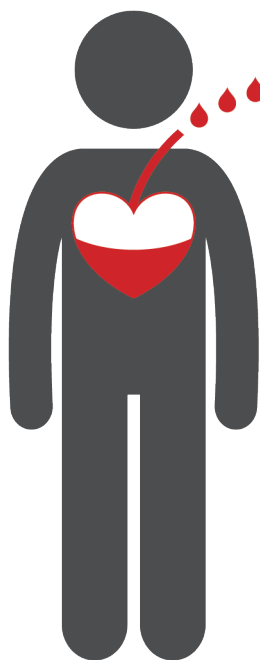
The Ejection Fraction compares the **amount of blood in the heart** to the **amount of blood pumped out**. The fraction or percentage helps describe how well the heart is pumping blood to the body.

EJECTION FRACTION
=

$$\frac{\text{amount of blood pumped out}}{\text{amount of blood in chamber}}$$



How much blood is pumped out?



With the proper care and treatment, many patients are able to improve their ejection fraction and live a longer and healthier life. Talk with your healthcare professional about your options.

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HEART FAILURE

How Can I Live With Heart Failure?

About 6.2 million Americans are living with heart failure today. In fact, it's one of the most common reasons why people 65 and older go into the hospital.

Fortunately, heart failure can be treated. Getting good medical care, understanding and following the treatment plan developed by your health care team, and learning about heart failure could improve and prolong your life.

You can help by taking your medicines as prescribed, and by following your eating and exercise plans.



Following the treatment plan developed by your health care team and taking your medications as directed are important steps to managing your heart failure.

What medicine might I take?

The goal of heart failure treatment is to help you live a longer, better-quality life. Treating the causes of heart failure with medication can lessen tiredness (fatigue), shortness of breath and swelling. It can also help improve your energy level so you can be physically active.

Here are some examples of medicines that may be prescribed:

- 1. Angiotensin Converting Enzyme (ACE) Inhibitor:** widens blood vessels, lowers blood pressure, and decreases the heart's workload.
- 2. Angiotensin Receptor Blocker (ARB):** widens blood vessels, lowers blood pressure, and decreases the heart's workload.
- 3. Angiotensin-Receptor Neprilysin Inhibitor (ARNI):** widens the blood vessels, reduces blood pressure, reduces sodium (salt) retention, and decreases the heart's workload.
- 4. Beta-Blocker:** lowers blood pressure, slows heart rate and reduces the heart's workload.
- 5. Diuretic:** helps your body get rid of extra water and sodium.
- 6. Mineralocorticoid receptor antagonist (MRA):** a type of diuretic that helps eliminate extra salt and fluid.

- 7. SGLT2 inhibitor:** a diabetes medication that can be used to treat heart failure with reduced and preserved ejection fraction.
- 8. Nitrate with hydralazine:** two medications that work together to widen blood vessels, lower blood pressure and reduced the heart's workload.
- 9. Digoxin:** helps your heart pump with more force.

What should I watch out for?

Tell your health care team right away if...

- You gain three or more pounds in a day or so.
- You see swelling in your feet, ankles or other parts of your body.
- It's hard to breathe or your breathing worsens.
- You can't do what you could do the day before.
- You have "the flu."
- You get a fever.
- You have chest pain.

Other ways to tell that your heart might not be working the way it should include:

- Coughing up pinkish, blood-tinged mucus.
- Confusion, difficulty thinking, dizziness or lightheadedness.
- Changes in your eating habits or appetite.
- It's hard to breathe.

What can I do?

- Visit your health care professional and follow your treatment plan vice.
- Read food labels and avoid foods high in sodium (salt).
- Get regular exercise as recommended by your health care team

My medical plan

Ask your health care team to fill in the blanks with your treatment plan.

Medicine notes _____

Diet notes _____

Exercise notes _____



Work with your health care team to develop an exercise plan that's right for you.

HOW CAN I LEARN MORE?

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- 3** Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at heart.org/supportnetwork.

Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

How can my family help me?

Should I stay in bed?

My Questions:

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HEART FAILURE

Heart Failure Medications

The following list of medications may include one or more prescriptions from your doctor. Medication adherence is important to treat heart failure. Use this list to better understand your possible medications.

Types of Heart Failure Medications	Generic Names*	Brand Names*	What They Do
ACE inhibitors	enalapril, captopril, lisinopril	Vasotec, Capoten, Zestril	<ul style="list-style-type: none"> Relax blood vessels. Lower blood pressure. Make it easier for the heart to pump blood.
ARBs	candesartan, losartan, valsartan	Atacand, Cozaar, Diovan	<ul style="list-style-type: none"> Relax blood vessels. Lower blood pressure. Make it easier for the heart to pump blood. Alternative to ACE inhibitor.
ARNIs	sacubitril combined with valsartan	Entresto	<ul style="list-style-type: none"> Combines an ARB with a drug that helps the arteries widen and rid the body of salt. Make it easier for the heart to pump blood.
Mineralocorticoid Antagonists (MRA)	spironolactone, eplerenone	Aldactone, Inspra	<ul style="list-style-type: none"> Help the body get rid of salt and fluids. Make it easier for the heart to pump blood.
Blood thinners	warfarin, dabigatran, rivaroxaban, apixaban, edoxaban	Coumadin, Pradaxa, Xarelto, Eliquis, Savaysa	<ul style="list-style-type: none"> Prevent blood clots from forming.
Beta blockers	carvedilol, metoprolol succinate, metoprolol tartrate, bisoprolol, atenolol	Coreg, Toprol XL, Lopressor, Zebeta, Tenormin	<ul style="list-style-type: none"> Slow the heart rate (how fast the heart beats). Reduce blood pressure. Make it easier for the heart to pump blood.
Digoxin	digoxin	Lanoxin	<ul style="list-style-type: none"> Strengthen the heart's pumping action.
Diuretics	furosemide, bumetanide, torsemide, hydrochlorothiazide	Lasix, Bumex, Demadex, HCTZ	<ul style="list-style-type: none"> Reduce excess fluids and salt which decrease the buildup of fluid in the lungs and other parts of the body, such as the ankles, legs and abdomen. Make it easier for the heart to pump blood.
I _f Channel Blocker	ivabradine	Corlanor	<ul style="list-style-type: none"> Reduce heart rate, similar to beta blockers May be prescribed for people for whom beta blockers don't reduce the heart rate enough.
Lipid Lowering Agents	atorvastatin, simvastatin, pravastatin, rosuvastatin, ezetimibe	Lipitor, Zocor, Pravachol, Crestor, Zetia	<ul style="list-style-type: none"> Reduce cholesterol levels.
Sodium-glucose cotransporter-2 (SGLT2) Inhibitor	dapagliflozin, empagliflozin	Farxiga, Jardiance	<ul style="list-style-type: none"> Used to treat diabetes but are also to treat heart failure in people with or without diabetes to reduce hospitalization and death.

*Partial list of commonly used drugs for heart failure. Talk with your health care team for additional information about your personal regimen.

Use this checklist to better understand the importance of taking your medication.

- Take medications exactly as prescribed. Follow directions on the bottle carefully.
- Keep a list of all medications you take (including prescription and over-the-counter drugs, vitamins, supplements, and herbal remedies). Bring this list with you to all medical appointments. Also show it to your pharmacist when purchasing over-the-counter remedies. Some can interfere with your prescription medications.
- Refill your medications with plenty of time before they run out.
- Use a daily pill organizer to help you remember to take your medications and take them at the right times.
- Tell your health care team if you have any side effects from the medications.
- Do not stop taking any medications on your own. Talk to your health care team first.
- Talk to your health care team or pharmacist if you have any questions about your medications.



More Resources

The American Heart Association offers more to help your patients understand their diagnosis and treatment plan.

Visit heart.org/hf to access these resources.

- [My Heart Failure Guide](#)
- [Heart Failure Materials](#)

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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

What if I miss a dose?

How do I remember to take my medicines?

My Questions:

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HEART FAILURE

Lifestyle Changes

It is important to make lifestyle changes to manage heart failure. The following information offer some of the top changes that can improve your quality of life.



Quitting Smoking and Using Other Tobacco Products

- Write down the reasons why you quit and look at them. Quitting smoking is one of the most important changes for health and heart failure management.
- Each puff of a cigarette increases heart rate and blood pressure and robs the body of needed oxygen. This is especially harmful if you have heart failure.
- No form of tobacco is safe. This includes e-cigarettes and vaping, cigars, chew, snuff, bidis, and clove cigarettes.
- Quitting takes patience and persistence.
- Making a quit-smoking plan will increase the likelihood of success.
- Using a quit-smoking product makes it much more likely to quit for good.

AHA Resources for Quitting Smoking

Restricting Sodium and Alcohol Intake

- Patients with heart failure typically need to restrict sodium intake. Sodium increases fluid retention, which increases blood pressure and puts a greater strain on the heart. It also increases fluid buildup which can lead to swelling in the legs, feet and abdomen, and cause shortness of breath.
- The AHA recommends no more than 1,500 mg of sodium daily for patients with mild heart failure. Patients with more severe heart failure may need to restrict it even further.
- One teaspoon of salt contains 2,300 mg of sodium and sodium is hidden in many foods, especially prepared and fast foods as well as restaurant meals.
- Reaching sodium goals may require you to make significant changes in your eating habits.
- If you have heart failure you should have a conversation with your health care team about whether you can drink alcohol. You might be instructed to abstain from alcohol completely, especially if alcohol intake contributed to your heart failure (alcohol-induced cardiomyopathy).

AHA Sodium Reduction Initiative

Staying Active

- Having heart failure does not mean restricting activity. In fact, exercise is essential to help strengthen the heart. It helps increase energy levels and makes the whole body healthier. Studies show that moderate exercise helps decrease the risk for needing hospitalization for worsening heart failure.
- Structured cardiac rehabilitation programs have been proven to improve patient outcomes. Medicare has covered cardiac rehabilitation for patients with chronic heart failure with reduced ejection fraction (HFrEF) since 2014, but some patients are not offered this treatment. Talk to your health care team about enrolling in cardiac rehab programs.
- Barriers to attending cardiac rehab programs should be assessed. These include child care, finances, transportation, and lack of support

More Resources

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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

Can I exercise "too much"?

When will the urges to smoke stop?

My Questions:

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HEART FAILURE

Self-Check Plan

Excellent – Keep Up the Good Work!



No new or worsening shortness of breath



Physical activity level is normal for you



No new swelling, feet, ankles and legs look normal for you



Weight check stable
Weight: ____



No chest pain

**GREAT!
CONTINUE:**



Daily Weight Check



Meds as Directed



Low-Sodium Eating



Follow-up Visits

Pay Attention – Use Caution!



Dry, hacking cough



Worsening shortness of breath with activity



Increased swelling of legs, ankles and feet



Sudden weight gain of more than 2-3 lbs in a 24 hour period (or 5 lbs in a week)



Discomfort or swelling in the abdomen



Trouble sleeping

CHECK IN!

Your symptoms may indicate:



A need to contact your doctor or health care team



A need for a change in medications

Medical Alert - Warning!



Frequent dry, hacking cough



Shortness of breath at rest



Increased discomfort or swelling in the lower body



Sudden weight gain of more than 2-3 lbs in a 24 hour period (or 5 lbs in a week)



New or worsening dizziness, confusion, sadness or depression



Loss of appetite



Increased trouble sleeping; cannot lie flat

WARNING! You need to be evaluated right away.



Call your physician or call **911**

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Avoid Hidden Sources of Sodium

Most of us take in more sodium through packaged convenience foods and snacks than by using table salt. Always look for “low-salt” or “low-sodium” labels on cans and packages. This label means the food has 140 milligrams or less sodium per serving. “No added salt” means that no salt was added during processing. Some foods labeled “no added salt” may contain less sodium than foods labeled “low sodium” but some may contain more. Always compare the sodium content for several similar foods and choose the food or beverage product with the lowest amount of sodium. Also, look for food packages labeled “sodium-free,” “salt-free,” “no sodium” and “very low sodium.”



“Reduced-salt” or “reduced-sodium” simply means that the product has at least 25 percent less sodium than the original version of the same product. These foods may still have more sodium than you should eat.

Be sure to check the labels on the following foods:

- Canned soups and dry soup mixes
- Canned meats and fish
- Ham, bacon and sausage
- Salted nuts and peanut butter
- Instant cooked cereals, such as grits
- Salted butter and margarine
- Processed meats, such as deli items and hot dogs
- Prepared baking mixes (pancake, muffin, cornbread, etc.)
- Prepackaged frozen dinners
- Preseasoned mixes (tacos, chili, rice, sauces, gravies, etc.)
- Snack foods (pretzels, potato chips, olives, pickles)
- Cheese
- Canned tomatoes or tomato sauces
- Salad dressings
- Fast food items

Many foods contain more than one form of sodium.

Any of the following ingredients means that the product has sodium in it:

- Sodium alginate
- Sodium sulfite
- Sodium caseinate
- Disodium phosphate
- Sodium benzoate
- Sodium hydroxide
- Monosodium glutamate or MSG
- Sodium citrate

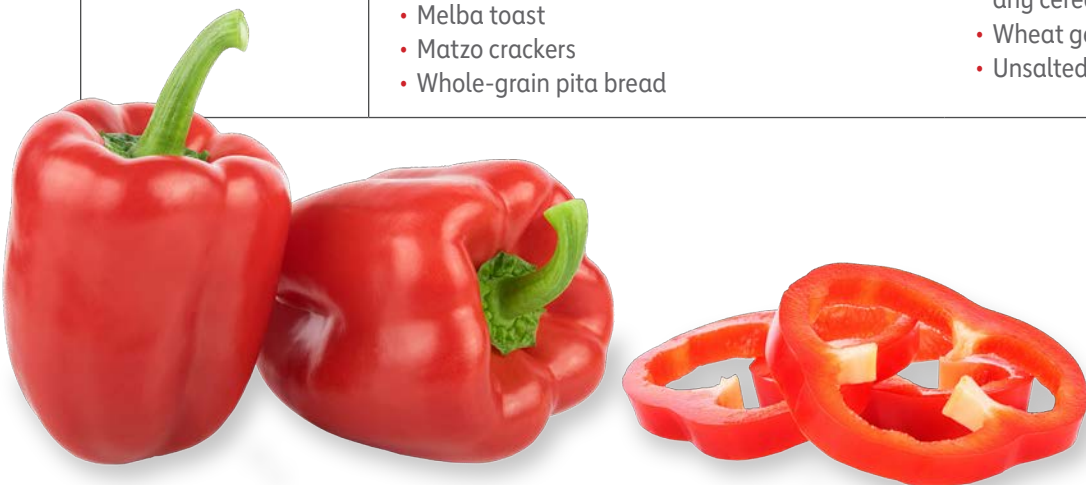
Some medicines are also high in sodium. Always read the sodium content and warnings before taking any over-the-counter medicine. Avoid headache or heartburn medications that contain sodium carbonate or bicarbonate. Ask your health care team to recommend the over-the-counter medications that are best for you.



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DIET + NUTRITION

What to Look for at the Grocery Store

Category	Food Choices	
Fruits	<ul style="list-style-type: none"> Fresh, canned or frozen (unsweetened or packed in juice) 	
Vegetables	<ul style="list-style-type: none"> Fresh or frozen (avoid sauce or flavor pouches, which may add salt and saturated fat) 	<ul style="list-style-type: none"> Canned is OK if low sodium or unsalted (rinse to remove excess sodium)
Meats, poultry, fish	<ul style="list-style-type: none"> Fresh or frozen fish (not breaded) Lean cuts of beef, veal, pork or lamb (trim away all fat) 	<ul style="list-style-type: none"> Chicken or turkey, both with the skin removed Canned tuna and salmon (unsalted or rinsed)
Meat substitutes	<ul style="list-style-type: none"> Dried beans, peas, lentils Unsalted or low-sodium tofu (soybean curd) Unsalted peanut or other nut butter 	<ul style="list-style-type: none"> Nuts or seeds (unsalted, dry-roasted), such as sunflower seeds, peanuts, almonds and walnuts
Drinks (follow your health care team's instructions on limiting fluid intake)	<ul style="list-style-type: none"> Water and sparkling water Fruit-infused water 100% fruit juices, fresh, frozen or canned (with no added sugars) 	<ul style="list-style-type: none"> Unsweetened soy, oat or nut milk Canned low-sodium or no-salt-added tomato and vegetable juice Tea and coffee in moderation
Dairy choices	<ul style="list-style-type: none"> Liquid or dry milk or milk substitutes (1%, low-fat, fat-free or non-fat) Low-fat, low-sodium cottage cheese 	<ul style="list-style-type: none"> Low-fat, low-sodium cheese Low-fat yogurt (with no added sugars)
Fats, oils (use these in small amounts)	<ul style="list-style-type: none"> Unsaturated nontropical vegetable oils such as canola, olive, corn, cottonseed, peanut, safflower, soybean and sunflower 	<ul style="list-style-type: none"> Unsalted margarine with liquid vegetable oil as first ingredient
Breads, cereals, grains, starches	<ul style="list-style-type: none"> Whole-grain pasta Brown rice, quinoa, steel-cut oats Starchy vegetables such as corn, potatoes, green peas, etc. (not canned unless salt-free, no added salt, or low-sodium) Whole-grain bread and rolls Melba toast Matzo crackers Whole-grain pita bread 	<ul style="list-style-type: none"> Taco shell, corn tortilla (no <i>trans</i> fat, unsalted/low-sodium) Cooked cereals, such as corn grits, farina (regular), oatmeal, oat bran, cream of rice, cream of wheat Puffed rice or wheat, shredded wheat or any cereal with 100–140 mg of sodium Wheat germ (in small amounts) Unsalted, air-popped popcorn



Category	Food Choices
Cooking ingredients, seasonings 	<ul style="list-style-type: none"> • Corn starch, tapioca • Cornmeal (not self-rising because some have high sodium content) • Fresh or dried herbs, salt-free herb seasonings • Whole grain flour (not self-rising) • Fresh fruits and vegetables such as lemons, limes, onions, celery, etc. • Fresh garlic or ginger • Chili pepper sauce (no added salt or low-sodium) • Low-sodium baking powder • Onion or garlic powder (avoid onion salt and garlic salt) • Tomato paste (no added salt), unsalted tomatoes, unsalted tomato sauce • Vinegar • Water chestnuts (no added salt) • Yeast
Sweets*	<ul style="list-style-type: none"> • Carob powder, cocoa powder • Flavored sugar-free gelatins • Fruits • Frozen 100% juice bars, fruit ice, sorbet, sherbet with no added sugars • Jelly, jam, preserves, apple butter made with 100% fruit • Whole grain graham and animal crackers, fig bars, ginger snaps 

*Limit sweets/added sugars from food and beverages: for the average woman—no more than 100 calories/day (~6 tsp per day); for the average man—no more than 150 calories/day (~9 tsp per day)

HOW CAN I LEARN MORE?

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- 3** Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at heart.org/supportnetwork.

Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

- What if I don't cook?**
- What will my spouse/partner eat?**

My Questions:

We have many other fact sheets to help you make healthier choices to reduce your risk, manage disease or care for a loved one. Visit heart.org/answersbyheart to learn more.

How can I reduce sodium?

Eating too much sodium (salt) can increase the risk of high blood pressure in some people. High blood pressure can increase the risk of heart disease and stroke. Most people should aim to consume less than 1,500 mg of sodium each day. One teaspoon of table salt has about 2,300 mg of sodium.

It may seem difficult to reduce the sodium in your diet, but here are some tips to get you started:

- Use herbs, spices, citrus juices, and vinegar instead of salt when you are cooking.
- Choose fresh, frozen or canned vegetables with either no added salt or very low sodium. Rinse them before use to reduce the amount of sodium even further.
- Read food labels carefully, watching for sodium in the ingredient list. Also, check the Nutrition Facts label, compare the sodium content of similar food products and choose the one with the lowest sodium content.



Substituting herbs, spices, citrus juices, and vinegar for salt is a great way to reduce sodium while spicing up your meals.

HOW CAN I LEARN MORE?

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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

What about eating out?

My Questions:

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DIET + NUTRITION

How Do I Understand the “Nutrition Facts” Label?

Most foods in the grocery store have a nutrition facts label and list of ingredients. When you go grocery shopping, take the time to read the nutrition facts labels on the foods you purchase. Compare nutrients and calories in one food to those in another. The information may surprise you. Make sure you aren't buying foods high in calories, saturated fat, trans fat, sodium and added sugars!



What information is in the nutrition facts label?

The “Nutrition Facts” label contains this information:

Serving Size—This is how much of the food is considered a “serving”. A package may contain multiple servings. If you eat more or less than the serving size listed, you need to adjust the amount of nutrients and calories you are eating.

Calories—This tells you how much energy is in the food. It is helpful to know if you're cutting calories to lose weight or want to manage your weight.

Total Fat—This is the amount of fat found in one serving of the food. It includes the amount of “bad fats” (saturated and trans fats) and “better fats” (monounsaturated and polyunsaturated fats). Fat is higher in calories than protein or carbohydrates. So, cutting back on your fat intake will help you reduce the amount of calories you eat.

Saturated Fat—Eating too much of these “bad” fats can raise your cholesterol and your risk of heart disease and stroke. Limit your saturated fat intake to less than 6 percent of your total calories. For a person who needs 2,000 calories a day, this is about 12 grams or about 120 calories from saturated fat.

Trans Fat—These fats are also considered “bad fats” because they can raise LDL cholesterol and your risk of heart disease. Choose foods with “0” grams of trans fat and read the ingredients list to avoid foods made with “hydrogenated oils”. Everyone can benefit by limiting trans fats.

Cholesterol—The FDA's Dietary Guidelines for Americans recommend cholesterol intake be as low as possible.

Sodium—Watch for both naturally-occurring and added sodium in food products. Salt is sodium chloride. Most people should take in less than 1,500 mg of sodium each day. That's equal to a little more than ½ tsp. of salt.

What information is in the nutrition facts label? *continued*

Total Carbohydrates—A carbohydrate is a type of sugar. Carbohydrates in food are digested and converted into glucose, or sugar, to provide the cells of the body with energy. Choose carbohydrate-based foods with high amounts of nutrients. These include vegetables, fruits and whole-grain, breads, cereals and pasta.

Dietary Fiber—Dietary fiber describes several materials that make up the parts of plants your body can't digest. As part of a healthy diet, soluble fiber can help decrease your risk of heart disease and some types of cancer. Whole grains and fruits and vegetables include dietary fiber. Most refined (processed) grains contain little fiber.

Sugars—The amount listed includes both sugars that occur naturally in foods, such as fruit and milk, and sugars that are added to foods, such as soft drinks and other sweetened foods and beverages. There are lots of different names for "added sugars" such as, sucrose, fructose, glucose, maltose, dextrose, high-fructose corn syrup, corn syrup, concentrated fruit juice, and honey. Look at the ingredient list and make sure that there aren't a lot of "added sugars" listed in the ingredients.



Protein—This is one of the components in food that provide us with energy. Animal protein contains saturated fat. Choose fish and skinless poultry and limit your intake of red meat. Use low-fat dairy products. Try other sources of protein such as beans, nuts, seeds, tofu and other soy-based products.

Vitamins and Minerals—Vitamins and minerals are important parts of your diet. Eating a variety of foods will help you reach your daily goal of 100 percent of vitamin A, vitamin C, calcium and iron.

Daily Value—The standard daily values are guides for people who eat 2,000 calories each day. If you eat more or less than that, your daily value may be higher or lower.

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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

How many calories should I eat each day?

How many saturated fat grams should I have each day?

My Questions:

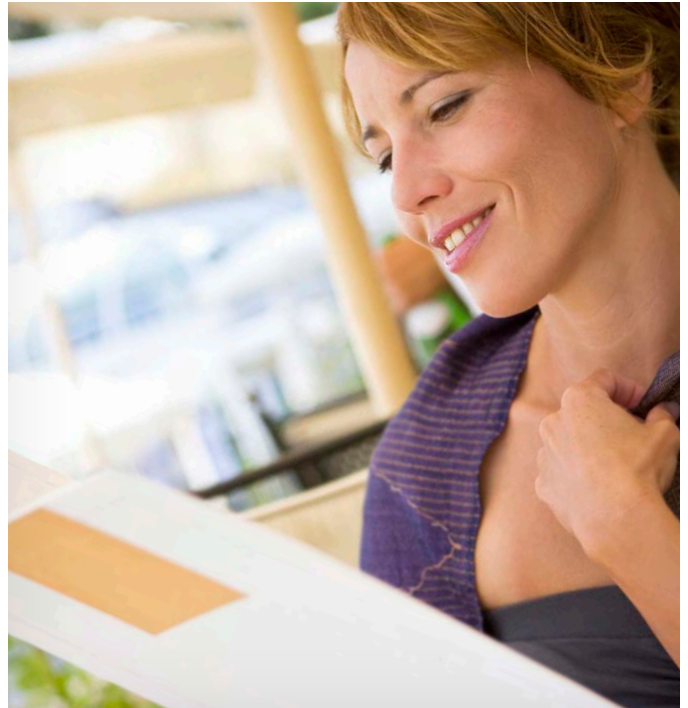
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DIET + NUTRITION

What About Eating Out?

It takes effort to change eating habits. Most people can't easily change overnight. Sometimes it's best to ease into new habits. This way you can form new, positive eating habits that will be just as comfortable as your old ones. You'll find that your new, healthy lifestyle will help you look better, feel better and have a healthier heart!

Going out to eat doesn't mean losing control of your eating plan. By thinking ahead and making smart choices, you can follow a heart healthy diet almost anywhere you go!



Study the menu before the server comes and feel free to ask how the food is made. And remember, you don't have to finish everything. You can always ask for a "to go" box.

What should I order?

- Use the basic guidelines of your healthy eating plan when choosing a main dish. Pick skinless poultry and fish most often. Limit red meat and select lean cuts when you choose to eat it. Many restaurants also offer healthy and delicious meat-free/vegetarian meal options as well.
- Ask the server to make substitutions like having steamed vegetables instead of French fries.
- Make sure your entrée is broiled, baked, grilled, steamed or poached instead of fried.
- Order vegetable side dishes and ask that any sauces or butter be left off.
- Ask for low-calorie and salt-free or very low-sodium salad dressing or a lemon to squeeze on your salad instead of dressing.
- Ask for baked, boiled or roasted potatoes instead of fried. And ask for them without the butter and sour cream.

- Order fresh fruit or fruit sorbet in place of cake, pie or ice cream desserts.
- Ask about low-sodium and other healthier menu choices. Many restaurants now have healthy menus or icons to show healthy options.
- When it seems that everything on the menu is "off limits," ask if the chef will make you a fruit or vegetable platter. Most chefs are happy to do it.

What should I avoid?

- Ask for soft margarine instead of butter—or allow the natural flavors of the foods to come out without the topping.
- Order your dressings and sauces on the side, so you can control how much you use.
- Stay away from fried appetizers or creamy soups. Begin your meal with a salad or broth-based soups like minestrone or gazpacho instead.

What should I avoid? *continued*

- When at a salad bar, stay away from items high in saturated fat or sodium like cheese, creamy salad dressings, croutons, and bacon bits.
- Ask that your food be made without butter or cream sauces. You'll be surprised at how delicious your meal can be when broiled "dry."
- Take the skin off poultry when it arrives, and remove visible fat from meat if the chef hasn't already done so.

What about ethnic restaurants?

- At Asian restaurants, order a stir-fried chicken or fish and vegetable dish without soy sauce, MSG, salt and high-sodium sauces. A steamed, broiled or boiled main dish is an even better choice. Instead of fried rice, ask for steamed or brown rice.
- At Italian restaurants, choose red marinara sauces over white, creamy ones. Try a fish dish or meatless pasta instead of entrées made with sausage or meatballs.
- At Mexican restaurants, ask for low-fat sour cream. Opt for soft corn tortillas over flour, and avoid refried beans and cheese. Try salads instead of fried foods, and look for fresh seafood on the menu



When dining at an Asian restaurant, steamed or brown rice are healthier choices than fried rice.

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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

What can I eat at fast-food restaurants?

How can I control the portions?

My Questions:

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HEART FAILURE

Reading Food Labels to Look for Sodium

Easy-to-read food labels can help you find foods low in sodium. This will help you keep track of the number of grams (g) or milligrams (mg) you consume each day. According to Food and Drug Administration regulations, no manufacturer can say that their product is “low-sodium” unless they can prove that claim. Learning to read food labels is a good first step in a sensible eating plan.

If the label says...	One serving of the product has...
Sodium-free, salt-free or no sodium	Less than 5 mg of sodium and no sodium chloride in ingredients
Very low sodium	35 mg or less of sodium
No added salt or unsalted	No salt added to the product during processing (this is not a sodium-free product)
Low sodium	140 mg or less of sodium
Reduced or less sodium	At least 25 percent less sodium than the regular product
Light in sodium	50 percent less sodium than the regular product

Always compare the sodium content for several similar products and choose the food or beverage with the lowest amount of sodium.

Nutrition Facts

Serving Size 100 g

Amount Per Serving

Calories 250 Calories from fat 10

% Daily Value*

Total Fat 4% 4%

Saturated Fat 1.5% 4%

Trans Fat

Cholesterol 50mg 28%

Sodium 150mg 15%

Total Carbohydrate 10g 3%

Dietary Fiber 5g

Sugars 3g

Protein 16%

Vitamin A 1% ▪ **Vitamin C** 3%

Calcium 2% ▪ **Iron** 2%

*Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs.

*The American Heart Association recommends that all Americans should reduce the amount of sodium in their diet to **less than 1500 mg a day**. Ask your health care team for guidance on your sodium intake.

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Eating Out for People with Heart Failure

If you have heart failure and are planning an evening out at a restaurant, keep these suggestions in mind:

1. Plan ahead. Try to select a restaurant where food is cooked to order, rather than a fast food or buffet-style chain, where the food is made ahead of time. Many restaurants will honor requests for low-salt (sodium), low-saturated fat, and low-*trans* fat versions of certain dishes.

2. Get to know the owner and servers. This will make it easier to ask questions.

3. Watch out for before-the-meal “extras.” These include cocktails, appetizers, and bread. These are often a source of extra calories and sodium.

4. Read the menu carefully. Before ordering, ask how dishes are prepared. Look for foods described with these words and phrases (which usually indicate a healthier dish):

- Baked
- Broiled
- Garden fresh
- Grilled
- In its own juice
- Poached
- Roasted
- Steamed

In general, try to steer clear of dishes described with these terms (which usually indicate less-healthy preparation):

- Au gratin
- Buttered
- Buttery
- Casserole
- Creamed
- Crispy
- Escalloped
- Fried
- Hash
- Hollandaise
- In butter sauce
- In cheese sauce
- In cream sauce
- In gravy
- Pan-fried
- Pan-roasted
- Pot pie
- Prime
- Rich
- With bacon or sausage

Ask for more details about how food is prepared and cooked. For example, a food that looks acceptable because it's baked or grilled might include a high-saturated fat sauce or salty seasoning. It's OK to ask the waiter or waitress for help.

5. Choose healthy ethnic foods. People with heart failure don't have to cut out world cuisines, such as Chinese, Japanese, Thai, Indian, Middle Eastern, Italian, French, Greek or Mexican. Just try to choose dishes that are low in sodium and saturated and *trans* fats. Ask the server for help.

6. Ask for salad dressings, sauces and gravies to be served on the side. That makes it easier to control how much is added to the food.

7. Ask about healthy substitutions. For example, if a dish comes with French fries or onion rings, ask for a baked potato or unsalted vegetables instead. Choose desserts carefully. Fresh fruit, sugar-free fruit ice, sherbet and gelatin, and angel food cake are good alternatives to high-calorie desserts. Use milk in coffee instead of cream or half-and-half.



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FITNESS + WEIGHT MANAGEMENT

How Can I Manage My Weight?

Reaching and maintaining a healthy weight can be a challenge. You may have tried to lose weight before without much long-term success. Be assured, you are not alone.

There is no magic weight-loss formula that works for everyone. The key is to find a plan that works for you and provides the right balance of calories and nutrition with the appropriate amounts of physical activity.



What are the keys to healthy weight loss?

To lose weight, you must take in fewer calories than you use through normal metabolism and physical activity. It's a matter of:

- Watching what you eat.
- Choosing nutritious foods.
- Following an overall healthy diet pattern.
- Getting and staying physically active.

How can I make better food choices?

Follow these guidelines to improve your overall diet pattern.

- Eat a diet rich in fruits, vegetables and whole grains.
- Eat poultry, fish, and nuts and limit red meat.
- Limit how much saturated and trans fats, added sugars, and sodium are in the food you eat.

- Select fat-free and low-fat (1%) dairy products.
- Limit beverages and foods high in calories and low in nutrition.
- Choose and prepare foods with little or no salt.

What happens when I reach a healthy weight?

- After you reach a healthy weight, continue to balance the amounts of calories that you take in with the amount of energy you use each day to maintain your weight.
- After a week, if you're still losing weight, add a few hundred more calories.
- If you change the amount of physical activity you do, adjust what you eat.
- Keep a record of what you eat and how much physical activity you get so you'll know how to make adjustments.

How can I stay at a healthy weight?

- Remember that eating smart means eating some foods in smaller amounts and eating high-calorie foods less often.
- Always keep low-calorie, heart-healthy foods around.
- Chopped fruits and vegetables make a great quick snack.
- Use a shopping list, and don't shop when you're hungry.
- Plan all your meals. When you're going to a party or out to eat, decide ahead of time what you can do to make it easier to eat right.
- When you're hungry between meals, drink a glass of water or eat a small piece of fruit.
- When you really crave a high-calorie food, eat a small amount of it. Commit to stay active! Don't give up on your physical activity plan.

What if I go back to old habits?

Old habits are hard to break. You might have a bad day and overeat or skip exercise. If that happens, remember that this is not a failure. Instead, recommit yourself to starting again and getting back on track. You can do it!



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Do you have questions for the doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care provider.

For example:

What if I start gaining weight?

How can my family help me?

My Questions:

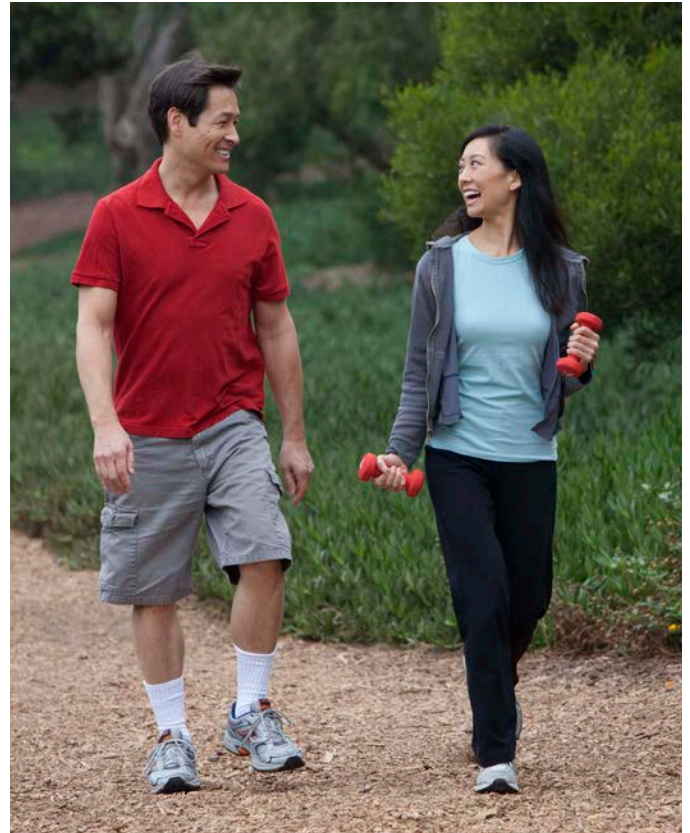
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FITNESS + WEIGHT MANAGEMENT

How Can Physical Activity Become a Way of Life?

If you aren't in the habit of being physically active, you're probably being told you should start. That's because regular physical activity reduces your risk of heart disease and stroke. It also helps you reduce or manage other risk factors—high blood pressure, high cholesterol, excess weight and diabetes.

But the benefits don't stop there. You may look and feel better, become stronger and more flexible, have more energy, and reduce stress and tension.



How do I start?

- Always talk to your health care team before starting an exercise program about the type of exercise and intensity that is best for you.
- Start slowly—don't overdo it!
- Choose activities you enjoy. Pick a start date that fits your schedule and gives you enough time to begin your program. Walking is a great way to get started!
- Wear comfortable clothes and shoes.
- Try to exercise at the same time each day so it becomes a regular part of your lifestyle.
- Drink water before, during and after each exercise session.
- Use the buddy system! Ask a friend to start a program with you.
- Note the days you exercise and write down the distance or length of time of your workout and how you feel after each session.

- Aim for at least 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity aerobic exercise each week. Add muscle-strengthening exercise on at least 2 days a week.
- If you miss a day, plan a make-up day.

What will keep me going?

- Get your family into physical activity! It's great to have a support system, and you'll be getting them into an important health habit.
- Join an exercise group, health club or local community center.
- Choose an activity you like and make sure it's convenient for you. If you need good weather, have a back-up plan for bad days (e.g., when it rains, walk in the mall instead of the park).
- Learn a new sport you think you might enjoy, or take lessons to improve at one you know.
- Do a variety of activities. Take a brisk walk one day, a swim the next time. Then go for a bike ride on the weekend!

What will keep me going? *continued*

- Make physical activity a routine so it becomes a habit.
- If you stop for any length of time, don't lose hope! Just get started again and work up to your old pace.

What else should I know?

- Try not to compare yourself with others. Your goal should be personal health and fitness.
- Think about whether you like to exercise alone or with other people, outside or inside, what time of day is best, and what kind of exercise you most enjoy doing.
- If you feel like quitting, remind yourself of all the reasons you started. Also think about how far you've come!
- Don't push yourself too hard. You should be able to talk during moderate exercise.



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Do you have questions for the doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care provider.

For example:

What kind of shoes should I wear to prevent injury?

Can I exercise "too much"?

My Questions:

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SMOKING

How Can I Quit Using Tobacco?

Smoking and other forms of tobacco use including vaping, harm almost every tissue and organ in the body, including your heart and blood vessels. It also harms nonsmokers who are exposed to secondhand smoke.

If you smoke or use tobacco products, you have good reason to worry about its effect on your health and the health of your loved ones and others. Deciding to quit is a big step. Following through is just as important. Quitting tobacco and nicotine addiction isn't easy, but others have done it, and you can, too.



Is it too late to quit smoking or using tobacco?

It's never too late to quit. In the year after you quit smoking, your excess risk of coronary heart disease drops by 50%. After 15 years, your risk is as low as that of someone who has never smoked. While you may crave tobacco or nicotine after quitting, most people feel that becoming tobacco-free is the most positive thing they've ever done for themselves.

How do I quit?

You are more likely to quit for good if you prepare for two things: your last cigarette, and the cravings, urges and feelings that come with quitting. Think about quitting in five steps:

- 1. Set a Quit Date.** Choose a date within the next seven days when you will quit smoking or vaping. Tell your family members and friends who are most likely to support your efforts.
- 2. Choose a method for quitting.** There are several ways to quit. Some include:
 - Stop all at once on your Quit Day.
 - Cut down the number of cigarettes per day or how many times you vape until you stop completely.
 - Smoke only part of each cigarette. If you use this method, you need to count how many puffs you take from each cigarette and reduce the number every two to three days.

- 3. Decide if you need medicines or other help to quit.** Talk with your health care team to determine which medicine is best for you. Get instructions for using it. These may include nicotine replacements (gum, lozenges, spray, patch or inhaler) or prescription medicines, such as bupropion hydrochloride or varenicline. You could also ask about a referral for a smoking cessation program.
- 4. Plan for your Quit Day.** Get rid of all the cigarettes, matches, lighters, ashtrays and tobacco products in your home, office and car. Find healthy substitutes for smoking. Go for walks. Keep sugarless gum or mints with you. Munch carrots or celery sticks.
- 5. Stop smoking on your Quit Day.**

What if I smoke or vape after quitting?

It's hard to stay off tobacco and nicotine once you've given in, so do everything you can to avoid that "one." The urge will pass. The first two to five minutes will be the toughest. If you do smoke or vape after quitting:

- This doesn't mean you're a smoker again—do something now to get back on track.
- Don't punish or blame yourself—tell yourself you're still a nonsmoker.
- Think about what triggered the urge and decide what to do differently the next time.
- Sign a contract to stay tobacco-free.

What happens after I quit?

- Your senses of smell and taste come back.
- Your smoker's cough will go away.
- You'll breathe more easily.
- You'll be free from the mess and smell and the burns on your clothing.
- You'll increase your chances of living longer and reduce your risk of heart disease and stroke.



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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

When will the urges stop?

How can I keep from gaining weight?

My Questions:

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SMOKING

How Can I Handle the Stress of Not Using Tobacco?

No one says that quitting tobacco is easy. But everyone says it's worth it! Quitting will reduce your risk of heart disease and stroke. It will also lower your chance of developing lung disease and cancer. Most of all, quitting can save your life and the lives of others around you.

No matter how much or how long you've smoked or vaped, when you quit, your risk of heart disease and stroke starts to drop. In time, your risk will be about the same as if you'd never smoked!



How can I cope with the urge to smoke or use tobacco?

- Write down the reasons why you quit and look at the list often.
- When you feel an urge to have "just one," stop yourself. Think of what triggered the urge, and find a different way to handle it. For example, if you feel nervous, take a walk to calm down instead.
- Be prepared for times when you'll get the urge. If you smoke when drinking, cut down on alcohol to avoid those weaker moments.
- Change your habits. Instead of having a cigarette after dinner, brush your teeth or walk the dog.
- Go where smoking isn't allowed. Many states have banned smoking in restaurants. Or, you can always ask to be seated in the nonsmoking section.
- Stay around people who don't smoke or use tobacco. Ask for support and find a buddy you can call when you feel weak. Tell others they can help you by not giving you a cigarette and by being supportive.

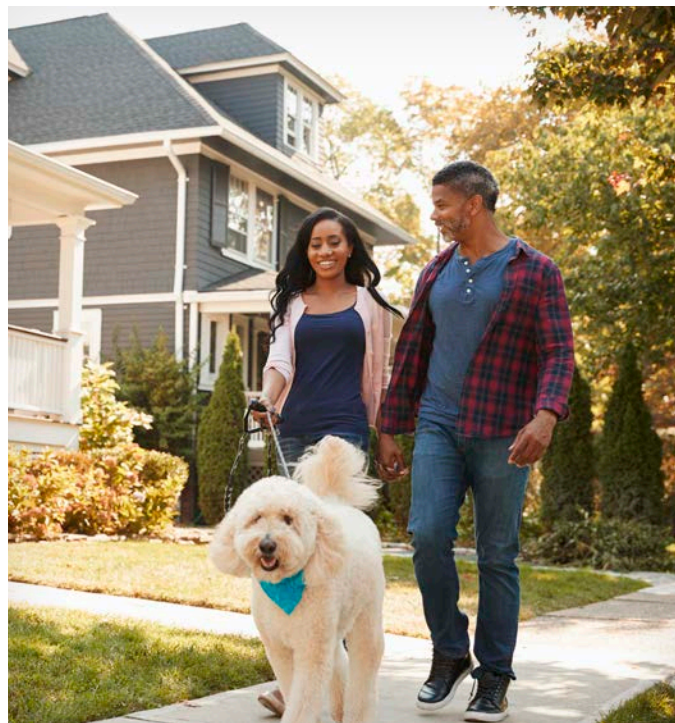
- Reward yourself each time you get through a day or week without using tobacco. Treat yourself to a movie. Or figure out how much money you've saved and buy yourself something special.
- Talk with your health care team. Counseling, support groups and medications might help you stop using tobacco and succeed in becoming a non-user.

How can I relax?

- Try deep breathing. Take a long, deep breath, count to 10 and release it slowly. Repeat five times and you'll feel much more relaxed.
- Allow 20 minutes a day to let go of tension this way: Close your eyes, relax your muscles and think hard about one word, like "calm." Say it until you reach a state of relaxation.
- Think positive thoughts! Focus on how great it is that you've stopped smoking, how food tastes better and how nice it is not to wake up coughing. Remind yourself how smoking stinks, stains your teeth and gives you bad breath.
- Listen to relaxing music.

How can physical activity help?

- It releases stress and calms you.
- It can improve your mood and help you think more clearly.
- It may help control cravings for tobacco and nicotine.
- It can help control your appetite.
- It can help you reach and maintain a healthy weight.
- It can lower your blood pressure.
- It can increase your HDL (good) cholesterol level.
- It can help reduce your risk of developing heart disease and stroke.
- It can help control blood sugar by improving how your body uses insulin.



HOW CAN I LEARN MORE?

- 1** Call 1-800-AHA-USA1 (1-800-242-8721), or visit heart.org/hf to learn more about heart failure.
- 2** Sign up to get *Heart Insight*, a free magazine for heart patients and their families, at heartinsight.org.
- 3** Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at heart.org/supportnetwork.

Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

How long will the cravings last?

What about nicotine gum or a nicotine patch?

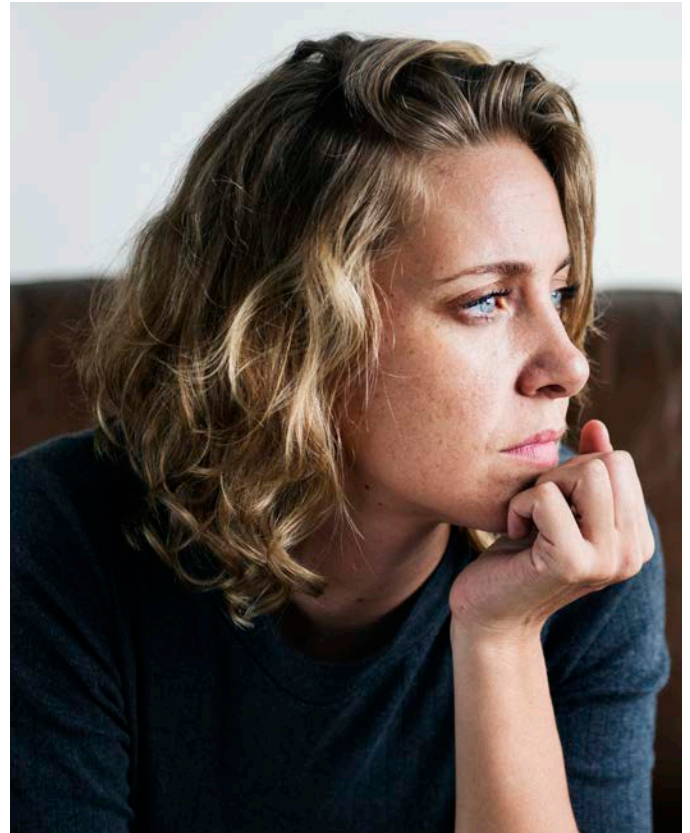
My Questions:

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STRESS MANAGEMENT

How Can I Manage Stress?

It's important to learn how to recognize how stress affects you, learn how to deal with it, and develop healthy habits to ease your stress. What is stressful to one person may not be to another. Stress can come from happy events (a new marriage, job promotion, new home) as well as unhappy events (illness, overwork, family problems).



What is stress?

Stress is your body's response to change. Your body reacts to it by releasing adrenaline (a hormone) that can cause your breathing and heart rate to speed up, and your blood pressure to rise. These reactions help you deal with the situation.

The link between stress and heart disease is not clear. But, over time, unhealthy responses to stress may lead to health problems. For instance, people under stress may overeat, drink too much alcohol or smoke. These unhealthy behaviors can increase your risk of heart disease.

Not all stress is bad. Speaking to a group or watching a close football game can be stressful, but they can be fun, too. The key is to manage your stress properly.

How does stress make you feel?

Stress affects each of us in different ways. You may have physical signs, emotional signs or both.

- You may feel angry, afraid, excited or helpless.
- It may be hard to sleep.

- You may have aches and pains in your head, neck, jaw and back.
- It can lead to habits like smoking, drinking, overeating or drug abuse.
- You may not even feel it at all, even though your body suffers from it.

How can I cope with it?

Taking steps to manage stress will help you feel more in control of your life. Here are some good ways to cope.

- Try positive self-talk—turning negative thoughts into positive ones. For example, rather than thinking "I can't do this," say "I'll do the best I can."
- Take 15 to 20 minutes a day to sit quietly, relax, breathe deeply and think of something peaceful.

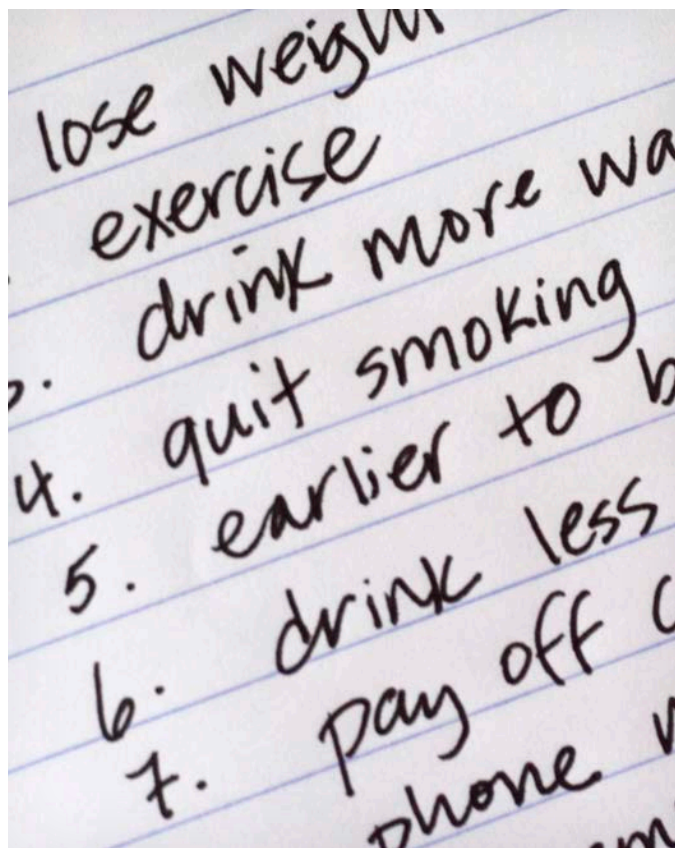
How can I cope with it? *continued*

- Engage in physical activity regularly. Do what you enjoy—walk, swim, ride a bike or do yoga. Letting go of the tension in your body will help you feel a lot better.
- Try to do at least one thing every day that you enjoy, even if you only do it for 15 minutes.

How can I live a more relaxed life?

Here are some positive healthy habits you may want to develop to manage stress and live a more relaxed life.

- Think ahead about what may upset you. Have a plan ready to deal with situations. Some things you can avoid. For example, spend less time with people who bother you. Avoid driving in rush-hour traffic.
- Learn to say “no.” Don’t promise too much.
- Give up your bad habits. Too much alcohol, cigarettes or caffeine can increase stress. If you smoke, make the decision to quit now.
- Slow down. Try to “pace” not “race.” Plan ahead and allow enough time to get the most important things done.
- Get enough sleep. Try to get 6 to 8 hours of sleep each night.
- Get organized. Use “To Do” lists if it helps you focus on your most important tasks. Approach big tasks one step at a time.



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Do you have questions for your doctor or nurse?

Take a few minutes to write your questions for the next time you see your health care team.

For example:

How can family and friends help?

My Questions:

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LIFESTYLE CHANGES

Other Things to Consider

Small changes can make a big difference. Lifestyle changes are worth making.

Making some of these lifestyle changes can be easier said than done. But working these changes into your daily routine can make a real difference in your quality of life.

Following recommendations about diet, exercise and other habits can help alleviate heart failure symptoms, slow your disease's progression and improve your everyday life. In fact, people with mild to moderate heart failure often can lead nearly normal lives as a result.



Get flu and pneumonia vaccinations as directed by your health care team.

Flu, pneumonia and COVID-19 prevention with vaccinations

Flu, pneumonia and COVID-19 pose greater dangers for people who have heart failure (or any heart condition) than for healthy people.

Pneumonia is a lung infection that keeps your body from using oxygen as efficiently as it should. Your heart has to work harder to pump oxygenated blood through the body. If you have heart failure, you should avoid putting this extra stress on your heart.

Ask your doctor or another healthcare professional about getting a yearly influenza (flu) vaccine, COVID-19 vaccination, and a one-time pneumococcal vaccine.

These vaccines are generally safe and seldom cause any severe reactions. It's much riskier not to be vaccinated against flu, pneumonia and COVID-19. You might have some pain or swelling at the site of the shot (on the arm), but this will go away after a few days.

Following heart patient guidelines for sexual activity

Many people with heart failure can still be sexually active. Choose a time when you're feeling rested and free from the day's stresses.

Selecting appropriate clothing

Avoid tight socks or stockings, such as thigh-high or knee-high hose, that slow blood flow to the legs and cause clots. Some physicians might recommend compressions socks, so ask your health care team if you have questions. Avoid temperature extremes as much as possible, too. Dress in layers so that you can add or remove garments as needed.

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LIFESTYLE CHANGES

HF Helper™ App Aids Patients at Home

The American Heart Association is excited to launch **HF Helper** — a self-management app that empowers heart failure patients to better manage and live with their condition.

The new **HF Helper** app enables users to:

- Track symptoms, medications and other health metrics.
- Share health information with their doctor in real time.
- Connect with other people living with heart failure.

With these features, **HF Helper** is a tool for patients to enjoy a better quality of life

HF Helper

Available for download in February 2022.

Please visit heart.org/HF.



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ACTIVE LIFESTYLE

Activity Chart

Name: _____ Date: _____

Activity		Motivation
<input type="checkbox"/>	Helping with chores around the house	
<input type="checkbox"/>	Visiting friends and family	
<input type="checkbox"/>	Reading, writing or using the computer	
<input type="checkbox"/>	Attending religious or social functions	
<input type="checkbox"/>	Returning to work or volunteer activities	
<input type="checkbox"/>	Brisk walking	
<input type="checkbox"/>	Other:	
<input type="checkbox"/>	Other:	
<input type="checkbox"/>	Other:	

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APPOINTMENTS

It is really important to keep your appointments.

.....✂

Your next appointment with _____
will be (date) _____ at (time) _____.

If you have any questions or concerns, please contact the heart failure or cardiac clinic/cardiac rehab clinic at _____.

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