



Living With Heart Failure



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER



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For a digital copy of this book, please visit go.osu.edu/pted3473.

This book is for informational purposes only. Talk to your doctor or health care team if you have any questions about your care.

For more health information, go to wexnermedical.osu.edu/patiented or contact the Library for Health Information at 614-293-3707 or health-info@osu.edu.

Welcome

Thank you for choosing The Ohio State University Wexner Medical Center for your health care. Our team of doctors, nurses, and staff work together to help you manage your heart failure.

Every day, you need to make choices to protect your heart. We want your heart to work as well as it can so that you can have a good quality of life.

Use the book to help you make good choices each day. Ask your family and friends to support you in your healthier choices.

Be an active part in your care. Ask questions and share your concerns with us.

MyChart for your care

Manage your heart failure care any time.

MyChart is a free and secure online portal to exchange messages with your provider, request appointments, renew prescriptions, check your test results and much more. Use it from your phone, tablet, or computer.

Some things you can do with MyChart include:

- Managing appointments and finding care now
- Communicating with your care team
- Securely accessing your medical information
- Getting a notice when you can view your test results
- Renewing prescriptions

Sign up

To create a MyChart account, use the link in the activation email you received when scheduling an appointment. The email sign up links are valid for 24 hours. After 24 hours, you will need to request another activation code from your provider's office or join online at mychart.osu.edu/osumc/signup.

Contact Information

Ambulatory Care Center
Ross Heart Hospital
Heart Failure Clinic
614-293-4299

Outpatient Care
Upper Arlington
Heart Failure Clinic
614-685-8800

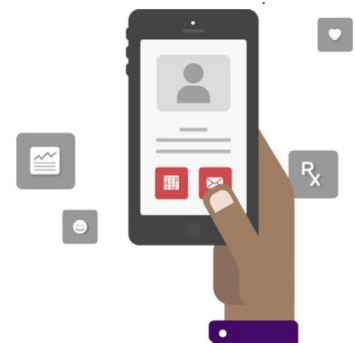
Heart and Vascular in
Outpatient Care East
614-688-6540

Ohio State East
Ambulatory Care Clinic
614-257-3048

Outpatient Care
New Albany
Heart Failure Clinic
614-293-1965

Outpatient Care Dublin
Heart Failure Clinic
614-293-0231

Outpatient Nutrition
Services
614-293-3433



Learning About Heart Failure

What is heart failure?

Heart failure means that your heart muscle does not pump as much blood as your body needs. Because your heart cannot pump well, your body tries to make up for it. To do this:

- Your body holds on to salt and water. This increases the amount of blood in your bloodstream.
- Your heart beats faster.
- Your heart might get bigger.

Your body has an amazing ability to make up for heart failure and you may not know you have a disease. But at some point, your heart and body will no longer be able to keep up. Then fluid starts to build up in your lungs and other parts of your body.

This fluid build up is called congestion, which is why it may be called **congestive heart failure**.

What can you expect when you have heart failure?

Heart failure is a lifelong (chronic) disease. Treatment may be able to slow the disease and help you feel better. But there are many steps you can take to feel better and stay healthy longer. You may need to adjust or limit your activities depending on your symptoms.

Heart failure can also get worse suddenly. If this happens, you need emergency care. Then, after treatment, your symptoms may go back to being stable (which means they stay the same) for a long time. Heart failure can also lead to other health problems, such as heart rhythm problems.

What are the symptoms?

Symptoms of heart failure start when your heart cannot pump enough blood to the rest of your body.

In the early stages of heart failure, you may:

- Feel tired easily.
- Be short of breath when you exert yourself.
- Feel like your heart is pounding or racing (palpitations).
- Feel weak or dizzy.

As heart failure gets worse, fluid starts to build up in your lungs and other parts of your body. This may cause you to:

- Feel short of breath, even when resting.
- Have swelling (edema), especially in your legs, ankles, and feet.
- Gain weight. This may happen over just a day or 2, or more slowly.
- Cough or wheeze, especially when you lie down.
- Feel bloated or sick to your stomach.

What are the causes of having heart failure?

There are many reasons for heart failure. You may have 1 or more of these health issues that puts you at greater risk:

- Inherited heart problems (genetics)
- Heart attack
- Heart disease, such as coronary artery disease
- Lung disease
- Kidney disease
- High blood pressure
- Diabetes
- Viral infection
- Alcohol use
- Toxic effect of some medicines
- Certain chemotherapy medicines
- Drug use, such as cocaine
- Sleep apnea

Tests you may have

Your health care provider may order these tests to check your heart, including:

- **Electrocardiogram (EKG):** checks how fast your heart beats and its rhythm.
- **Chest x-ray:** checks for fluid build up in the lungs or an enlarged heart, as well as other causes for symptoms, such as pneumonia.
- **Pulmonary function test:** checks how well your body is able to move air in and out of your lungs and how easy it is for you to breathe.
- **Echocardiography or echo:** uses sound waves to see how well blood moves through the heart and how well the heart valves open and close.
- **Doppler ultrasound:** uses sound waves to see how fast blood moves through the heart and checks to see if it moves in the correct direction.
- **Left and right cardiac catheterization:** uses contrast (dye) through an IV to check the chambers, valves, and arteries of the heart. Tell your provider if you have an allergy to contrast.
- **Cardiac magnetic resonance imaging (MRI):** uses magnets and radio waves to create a picture of your heart as it beats.
- **Nuclear heart scan:** uses contrast (dye) through an IV to create pictures about how your heart works. Tell your provider if you have an allergy to contrast.
- **Stress test:** done with exercise or with medicine given through an IV to check how your heart beats when it is working hard. This may include a VO2 test, which uses a treadmill to measure oxygen levels.

Types of heart failure

There is more than 1 type of heart failure. The types are based on what problem in the heart is causing it to not pump blood as well. People with heart failure can have more than 1 type.

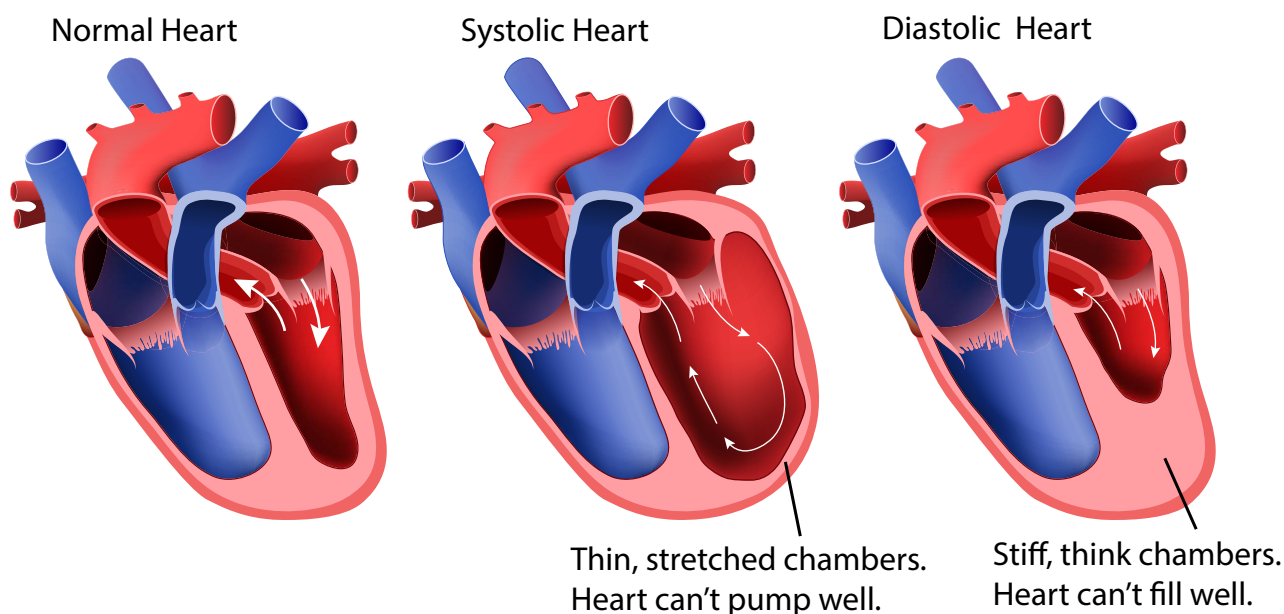
Left-sided heart failure

For most people, heart failure affects the left side of the heart. This is the side that pumps blood to the body. The heart's lower chamber, called the left ventricle, either cannot pump blood as well, or it cannot fill with blood normally.

Ejection fraction (EF) is the measure of how well the heart pumps blood. A normal ejection fraction is more than 55 percent (%). This means that more than 55% of the total blood in the left ventricle is pumped out with each heart beat. Depending on your EF, you may have heart failure signs, such as being short of breath.

- **Heart failure with reduced ejection fraction (systolic heart failure)** happens when the muscle of the left ventricle cannot pump blood well. The ejection fraction is lower than normal.
- **Heart failure with preserved ejection fraction (diastolic heart failure)** happens when the left ventricle cannot fill properly with blood during the diastolic (filling) phase. The ejection fraction is normal or not very much lower than normal. The ventricle pumps well, but it pumps out less blood than normal.

Your health care provider will test you to find out your EF. This is often done with an echocardiogram, or echo. An echo uses sound waves to create pictures of how blood is flowing as your heart beats.



Right-sided heart failure

Right-sided heart failure means that the right side of the heart is not pumping blood to the lungs as well as normal.

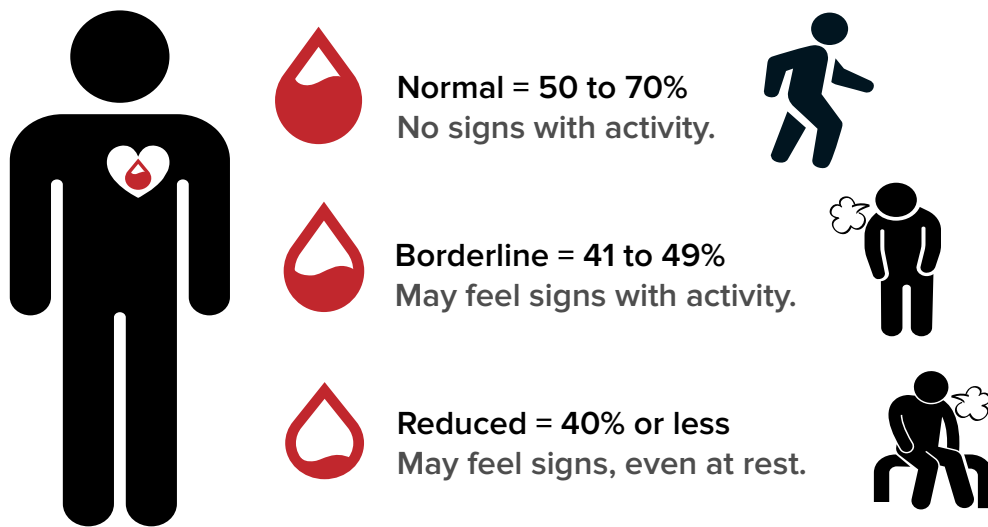
High-output heart failure

High-output heart failure can happen when the body's need for blood is unusually high. The heart may be working well otherwise, but it cannot pump out enough blood to keep up with this extra need. This type happens to a small number of people who have heart failure.

Learn more about heart failure and how health tools can help you make wise health decisions or take action to improve your health at go.osu.edu/hf_help.



Ejection fraction (EF) = Percent of blood the heart pumps out to the rest of the body during each contraction.



Treating heart failure

Heart failure is treated with medicines, a healthy lifestyle, and the steps you take to check your symptoms.

- You will likely be taking several medicines.
- You will be advised to:
 - Have a heart-healthy lifestyle that includes limiting sodium, getting regular exercise, and eating healthy foods.
 - Not smoking, and limiting or avoiding alcohol. Talk to your health care provider if you think you may have a problem with alcohol or drug use, or need help with quitting smoking.
 - Manage other health problems, such as diabetes and high blood pressure.
 - Get recommended vaccines, including vaccines for COVID-19, the flu, and pneumonia.
 - Get help for depression and anxiety, and managing stress.
- Your health care provider may recommend that you limit the amount of fluids you drink.
- You will be taught to watch for changes in your symptoms, such as weighing yourself daily.
- You will get a referral for cardiac rehabilitation (rehab) to help you stay as healthy as possible.
- You may get a heart device such as a pacemaker or implantable cardioverter defibrillator (ICD).
- You may choose palliative care to help improve your quality of life. Palliative care can help you manage symptoms, pain, or side effects from treatment when you have a serious illness.
- As heart failure gets worse, you may have other options, such as a ventricular assist device or a heart transplant.
- You can do advance care planning to decide what kind of care you want at the end of your life.

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Heart Failure Medicines

Medicines will be ordered to help keep your heart working well. They work together, so you need to be sure to take all your medicines, even if you are feeling better. Talk to your doctor or pharmacist if you have any questions about your medicines.



Common medicines used to treat heart failure:

ACE inhibitors

ACE inhibitors help to lower blood pressure to lessen the amount of work your heart needs to do.

Side effects may include: dizziness, weakness, cough and loss of taste. If you have swelling of your face, tongue, or lips, or have trouble breathing, **stop taking the medicine and call your health care provider right away or call 911 and get to the nearest emergency department for care.**

Medicine names include: benazepril (Lotensin); captopril (Capoten); enalapril (Vasotec); lisinopril (Prinivil, Zestril); ramipril (Altace)

ARB - Angiotensin II receptor blockers

ARBs widen the blood vessels and help increase blood flow when a person cannot take an ACE inhibitor. They work like ACE inhibitors by blocking a hormone in your body. These medicines are used to treat high blood pressure and heart failure, and may be used after a heart attack.

Side effects may include: dizziness and weakness. If you have swelling of your face, tongue, or lips, **stop taking the medicine right away** and call your health care provider.

Medicine names include: candesartan (Atacand); losartan (Cozaar); valsartan (Diovan)

ARNIs - Angiotensin receptor-neprilysin inhibitors

ARNIs widen blood vessels and help increase blood flow away from the heart, like ACE inhibitors and ARBs. The added medicine neprilysin also blocks other hormones to lessen symptoms of heart failure. ARNIs can reduce the risk of hospitalization and death from heart failure.

Side effects may include: dizziness, weakness, and changes in blood potassium levels. If you have swelling of your face, tongue, or lips, **stop taking the medicine right away** and call your health care provider.

Medicine names include: sacubitril and valsartan (Entresto)

Beta blockers

Beta blockers improve the heart's ability to relax and block the effect of other hormones in the body. They slow the heart rate and help control blood pressure. The medicines in this group used to treat heart failure are listed below.

Side effects may include: dizziness, slow heart rate, fatigue, shortness of breath when first starting medicine, and sexual dysfunction.

Medicine names include: carvedilol (Coreg); metoprolol (Toprol-XL); Bisoprolol (Zebeta)

MRA - Mineralocorticoid receptor antagonists

MRAs block abnormal hormone levels in heart failure. MRAs may also improve fluid retention, and can help the body hold onto potassium, especially when used with other diuretics.

Side effects may include: dizziness, weakness, tender breast tissue, and changes in kidney function or potassium levels.

Medicine names include: spironolactone (Aldactone); eplerenone (Inspra)

Sodium-glucose cotransporter-2 inhibitors (SGLT2)

SGLT2 inhibitors work by helping your body get rid of glucose and water through the kidneys. They are used to lower the risk of dying or needing to be in a hospital for heart failure when your heart cannot pump blood properly.

Side effects may include: dizziness and light-headedness. If you are not able to eat, do not take this medicine. Call your doctor if you notice persistent nausea, vomiting, have confusion, or signs of a bladder infection such as: pain, burning, or itching when urinating.

Medicine names include: empagliflozin (Jardiance); dapagliflozin (Farxiga)

Diuretics

Diuretics, or water pills, remove excess sodium (salt) and water from your body by increasing the flow of urine. Your heart can work better, and you may breathe easier when the extra fluid is removed from your body. These medicines are used to treat high blood pressure, heart failure and fluid build up in lungs, feet, or hands.

Side effects may include: dizziness, weakness, muscle cramps, dry mouth, and increased thirst.

Medicine names include: bumetanide (Bumex); hydrochlorothiazide (HCTZ); furosemide (Lasix); torsemide (Demadex)

Potassium and magnesium supplements may be ordered to replace the minerals lost when taking water pills. Take these medicines with food and water.

Managing Your Medicines

- **Plan a daily schedule.** Include what your medicines are and how and when to take them.
- **Get a pillbox.** It should hold a week's worth of pills. Be sure to leave at least 1 pill in the original bottle. That way, if you forget what a pill is for, you can find it in the bottle it came from.
- **Make it routine.** Take your medicine when you do another daily task, such as brushing your teeth or making morning coffee. This will help make taking medicine a routine.
- **Set an alarm.** Set your watch, kitchen timer, or computer calendar to remind you when to take your medicine.
- **Don't run out.** Figure out how long your bottle of medicine will last. Put refill reminders on your calendar so you do not run out of medicine.
- **Keep your bottle in your hand.** If you get interrupted before you can take your medicine, keep the bottle in your hand. This will help you remember to take it later.
- **Make it affordable.** Check with pharmacies to compare prices and ask if the medicine maker offers coupons to help with the cost. Ask your if there is a lower cost medicine you can take. Don't try to save money by taking only half a dose or taking your dose less often. It won't work the way it should.
- **Use a medicines tracker.** Use a tracking app for your smartphone or tablet or print a monthly medicine log at go.osu.edu/pted1377.

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Medicines to Avoid With Heart Failure

Your health care provider gave you medicines to help treat your heart failure. But did you know that many other medicines can make heart failure worse? Even medicines and herbs that you buy over the counter (OTC) can harm you. Be sure your health care provider knows all of the OTC and prescription drugs you take. Do not start to take any new medicine unless your health care provider says it is okay.

Over the counter medicine

Before you take any over the counter medicine, ask your health care provider or pharmacist if it is safe for you. This includes herbs and vitamins.

Common medicines to avoid include:

- **Pain relievers called NSAIDs.** These include ibuprofen and naproxen. Use acetaminophen instead. For example, you can take Tylenol for pain or fever.
- **Low dose aspirin.** If your health care provider has told you to take aspirin every day for your heart, follow their instructions on how much to take. Do not take aspirin for pain.
- **Antacids or laxatives.** Do not take ones that have sodium in them. These include Alka-Seltzer.
- **Cold, cough, flu, or sinus medicines.** Read the label. Don't take ones that have pseudoephedrine, ephedrine, phenylephrine, or oxymetazoline in them. And make sure they do not have aspirin or ibuprofen in them. Watch for all of these in allergy medicines, nose sprays, and herbal products also.
- **Supplements and vitamins.** These include black cohosh, St. John's wort, and vitamin E.

Prescription medicines

Each time you see a new health care provider, make sure they know about all the medicines you take. Before you fill any new prescription, ask the pharmacist if it is okay for you to take the new medication if you have heart failure.

Medicines that can make heart failure worse include:

- **Calcium channel blockers.** These include nifedipine. If you need to take this type of drug for another health problem, your health care provider will closely watch your health.
- **Heart rhythm drugs.** These include disopyramide and flecainide. These can treat a fast or uneven heart rhythm.
- **Prescription NSAIDs.** These include celecoxib (Celebrex) and diclofenac.
- **Certain medicines for diabetes.** These include pioglitazone, rosiglitazone, and saxagliptin.

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Managing Your Heart Failure

When you have heart failure, there are many things you can do to feel better, avoid the hospital, and live longer.



Top self care tips

Self care means managing your health by doing certain things every day, like weighing yourself. It is about knowing which symptoms to watch for so you can avoid getting worse. When you practice good self care, you know when it is time to call your health care provider and when your heart failure has turned into an emergency. There are more sample plans to help you follow these tips in the rest of this book.

Take your medicines every day as prescribed.

Take your medicines as directed by your provider. Plan for refills several days before you run out. It can take time to get medicines approved by your provider and filled. Talk to your provider **before** taking any over the counter (OTC) medicines for your safety.

Weigh yourself every day.

Weight gain may be a sign that your body is holding on to too much fluid. Weigh yourself at the same time each day, using the same scale, on a hard, flat surface. The best time is in the morning after you go to the bathroom and before you eat or drink anything.

Keep a daily record of your symptoms.

Checking your symptoms helps you see what symptoms are normal for you and if they change or get worse.

Limit sodium.

This helps keep fluid from building up and may help you feel better. Your health care provider can tell you how much sodium is right for you.

Try to exercise regularly.

Do not start to exercise until you have talked with your health care provider. Together you can make an exercise program that is enjoyable and safe for you.

Some people with heart failure need to limit how much fluid they drink each day.

Your health care provider will let you know if you need to limit fluids.

Do not smoke or use any other type of tobacco.

Using tobacco can make your heart failure worse.

Attend cardiac rehabilitation.

Cardiac rehabilitation is a medically supervised program for heart patients. It includes activity, education, and support for a heart healthy lifestyle.

Get medical care for other problems that can make heart failure worse.

These include obesity, diabetes, high blood pressure, sleep apnea, and lung, kidney, or liver disease.

Tell your provider and pharmacist about all the medicines you are taking.

Taking medicines together can raise the risk of side effects, and certain medicines can make heart failure symptoms worse.

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Using Your Rescue Medicine

You may need to take more of your water pill as your rescue medicine, if your health care provider has instructed you to.

Rescue medicines are taken as needed for quick relief of symptoms. You likely are taking a water pill each day, but your health care provider may instruct you to add more as “rescue medicine” to help you remove more fluid from your body if your heart failure signs get worse. Keep instructions with your rescue medicine for how to take it.

When should I use the rescue medicine?

Extra water pills should only be taken if your heart failure gets worse and you have warning signs. **The rescue medicine is added to your daily dose for 3 days.**

Weight gain of 2 to 3 pounds in 24 hours, or 5 pounds or more in a week is a warning sign.

Other warning signs include:

- Shortness of breath
- Swelling in your feet, ankles, legs, or stomach
- Trouble sleeping when you lie flat
- Dry, hacking cough
- Less urine or urine is darker and has a strong smell

If you **gained 2 or more pounds in 24 hours** and you have **1 or more of the other warning signs for 24 hours**, you need to **take your rescue medicine**.

What are heart failure zones?

Heart failure zones give you an easy way to see changes in your heart failure symptoms. They also tell you when you need to get help.

Check every day to see which zone you are in.

Heart Failure Zones and Action Plan

on the last page of this book (page 31).

Learn more at go.osu.edu/hf_zones.

Limiting Sodium

When your body has too much sodium, fluid in the body builds up. This may cause your heart failure symptoms to get worse.

People get most of their sodium from processed foods. Fast food and restaurant meals also tend to be very high in sodium. Your health care provider can tell you how much sodium is right for you. This includes all the salt you eat in cooked or packaged foods.

Small changes can reduce overall sodium totals

Choosing carrots with low salt hummus over pretzels saves salt. Even small amounts of salt can be a lot for your body on a low salt diet:

¼ teaspoon	600 milligrams
⅓ teaspoon	900 milligrams
½ teaspoon	1,200 milligrams
¾ teaspoon	1,800 milligrams
1 teaspoon	2,300 milligrams



Centers for Disease Control and Prevention

Read the Nutrition Facts label on food items

This label shows how quickly salt adds up in your diet:

- This product's container has 4 servings. Each serving has 460 mg of sodium.
- If you ate the entire container, that is 1,840 mg of sodium.
- To stay with your low sodium diet, find another product with less sodium in it or cook at home where the amount of salt can be controlled.

Amount listed is for 1 serving (1½ cup). This container has 4 servings total.

1 serving has 460 mg of sodium.

Nutrition Facts	
4 servings per container	
Serving size	1 1/2 cup (208g)
Amount per serving	
Calories	240
% Daily Value*	
Total Fat 4g	5%
Saturated Fat 1.5g	8%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 460mg	20%
Total Carbohydrate 22g	17%
Dietary Fiber 7g	25%
Total Sugars 4g	
Includes 2g Added Sugars	4%
Protein 11g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 6mg	35%
Potassium 240mg	6%
*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.	

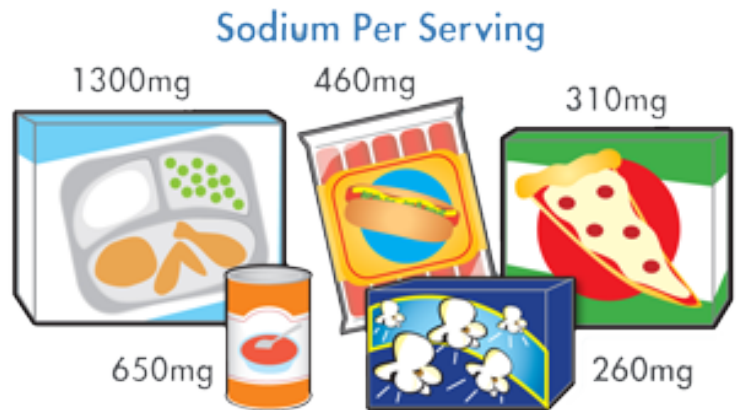
1 serving of this product has 20% of the Daily Value of sodium.

- 5% Daily Value or less of sodium per serving is low
 - 20% Daily Value or more of sodium per serving is high
- This product is high in sodium.

What sodium labels mean

Look for these labels when shopping or eating out:

- **Sodium free:** less than 5 mg/serving
- **Very low sodium:** 35 mg or less/serving
- **Low sodium:** 140 mg or less/serving
- **Reduced sodium:** It has 25% less salt than the original product. These products still may have high levels of sodium in them.
- **Light in sodium or lightly salted:** It has at least 50% less sodium than the regular product.
- **Unsalted, no salt added, or without salt added:** It is made without added salt, but there may be natural salt or sodium in the product.



Eating out on a low salt diet

Restaurant foods are usually high in sodium. But with some planning and helpful tips, you can still enjoy eating out while limiting the sodium in your diet.

- Most restaurants are willing to prepare your food with less or no sodium, if you ask.
- Try to choose restaurants where the food is made to order, instead of choosing fast food or buffet style restaurants. Before you order, ask how the food is prepared and if the restaurant offers low sodium menu items.
- Most fast food restaurants have nutrition information available, including sodium content. If you do eat at a fast food restaurant, ask for the nutrition information. Choose lower sodium items.
- Ethnic foods, such as Asian or Mexican, often have lots of sodium. You do not always have to give up these foods, but ask the server to help you make lower sodium choices.
- When you eat out, try to eat very low sodium items the rest of the day. This will help you stay within your sodium limit for the day.
- Learn what food items are okay and which ones to avoid. For example, 1 tablespoon of soy sauce has more than 1,000 mg of sodium, and 1 teaspoon of salt has about 2,300 mg of sodium. You may be able to substitute low salt or fresh menu items for those with higher sodium content.



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Sample very low sodium diet menus

Sodium by meal	1,500 mg sodium menu
Breakfast (488 mg)	1 cup (8 oz) milk--110 mg 4 oz orange juice--2 mg 1 hard boiled or 1 fried egg in (1 tsp. canola/olive oil)--70 mg 2 slices (2 oz) whole grain toast--235 mg 1 teaspoon margarine and jelly--35 mg 1 medium banana--1 mg
Lunch (595 mg)	1 cup (8 oz) water 1 grilled chicken sandwich with 4 ounces grilled chicken, with 1 Tablespoon (Tbsp) of mayonnaise, lettuce and tomato--150 mg 1 whole wheat roll--250 mg 1/2 cup carrot sticks with 2 Tbsp ranch dressing--195 mg 1 medium apple--1 mg
Snack (70 mg)	1 cup (8 oz) water 4 cups unsalted popcorn--60 mg 1 cup fruit cocktail--10 mg
Dinner (270 mg)	1 cup (8 oz) milk--110 mg 5 ounces lean beef--105 mg 1 medium baked potato--5 mg 1 cup steamed broccoli (fresh or frozen) with 2 tsp olive oil, lemon and salt free herbs--40 mg 1/2 cup fresh peaches--10 mg
Snack (105 mg)	1 cup (8 oz) tea--5 mg 1 cup (8 oz) ice cream--100 mg
Sodium total	1,488 mg

Sodium by meal	2,000 mg sodium menu
Breakfast (500 mg)	1 cup (8 oz) coffee/tea--5 mg 1 cup (8 oz) milk--110 mg 1 cup frosted shredded wheat squares cereal--10 mg 1 poached egg--70 mg 2 pieces of whole grain toast--235 mg 2 teaspoon butter and jelly--70 mg 1 medium banana--1 mg
Lunch (701 mg)	12 oz can lemon/lime soda --40 mg 2 slices (2 oz) whole grain bread--235 mg 3 ounces low-sodium turkey plus 1/2 cup avocado--425 mg 1 medium apple--1 mg
Snack (50 mg)	1 cup (8 oz) iced tea, unsweetened with lemon--6 mg 8 unsalted crackers--40 mg 1 stick low sodium mozzarella cheese--4 mg
Dinner (583 mg)	1 cup (8 oz) water 1 cup low sodium condensed tomato soup, plus 1 cup low fat milk--170 mg 5 oz pork chop with 2 tsp olive oil and salt-free herbs--235 mg 1 cup mashed potatoes, dehydrated with milk--164 mg 1/2 cup steamed corn and 1/2 cup steamed green beans (fresh or frozen) salt free herbs--7 mg 1/2 cup fresh peaches--7 mg
Snack (145 mg)	1 cup (8 oz) water 1 apple--2 mg 2 Tbsp caramel--143 mg
Sodium total	1,979 mg

10 Ways to Lower Salt in Your Diet

How to make a low salt diet work for YOU

- 1. Limit processed foods.** Most processed foods, such as chips, cookies, canned soups, tomato sauces, lunch meat, and frozen meals have a lot of added salt and sugar. Choose fresh or canned (no salt added) fruits and vegetables, low sodium whole grains, and low sodium cheeses as snacks.
- 2. Plan for salt across your daily meals and snacks.** Plan for 3 meals and 2 snacks a day. Start with eggs prepared without salt, a low salt commercial cereal, or no salt cooked cereal at breakfast. Choose low salt bread or crackers at lunch. Instead of processed meat, cook your own meat at home and use it for a sandwich. Add lettuce and tomato for flavor, instead of condiments. Use herbs and grilled vegetables with chicken for dinner.
- 3. Read nutrition labels to guide your food choices.** Choose sodium free, very low sodium, or low sodium products. Make healthy choices when food shopping, such as:
 - Cheese with less than 80 mg sodium per ounce.
 - Breads with less than 100 mg sodium per slice.
 - Soups with less than 100 mg sodium per ounce.
- 4. Buy fresh or frozen foods instead of canned.** Choose fresh foods when you can or go for frozen without any added sauces. If sodium free or lower sodium canned options are not available, rinse beans, tuna, and canned vegetables before using them. This removes some, but not all the salt. **Avoid canned, smoked, or processed meats**, such as bacon, sausage, packaged lunch meat, or products where salt or saline is added.
- 5. Eat more fruits and vegetables.** Add them to salads, main dishes, or side dishes or eat them plain. Fruits and vegetables help your body to remove water and avoid fluid build up. They are also low calorie and naturally low in salt.
- 6. Learn to enjoy the natural taste of food.** Many foods are so processed that we have to learn to get used to foods with less salt. It is about changing how food is prepared and learning to enjoy the taste of food made with spices other than salt. Try to cook meat at home and add unsalted nuts or seeds, lentils, unsalted or low sodium broth, and herbs or spices such as Mrs. Dash. Use the cooking process, such as grilling, poaching, and baking, to add taste and flavor. Taste food as you cook to know what each food item adds to a dish.



7. Create low sodium condiments. Make your own low salt salad dressing, dip, gravy, or sauce. Most commercial or packaged products are high in sodium. If you choose the low salt or no salt options, you may be able to have more. Otherwise, limit these ingredients:

- Salted butter or margarine – no more than 1 teaspoon a day
- Mayonnaise – no more than 1 tablespoon a day
- Sour cream – no more than 2 tablespoons a day
- Ketchup or mustard – no more than 1 tablespoon a day
- Regular salad dressing – no more than 2 teaspoons a day
- Canned tomato paste – no more than ¼ cup a day
- Regular tomato sauce – no more than ½ cup a day

It is not recommended to eat all of these foods in the same day, as this could still make your overall daily sodium intake too high.

8. Choose salt free beverages. Save salt for the food you eat. Water, coffee, tea, carbonated seltzer water, and fruit juices have very low or no salt in them. Limit milk to 2 cups of low fat milk a day. Avoid energy and sport drinks, commercially made milkshakes, and instant cocoa that have added salt.

9. Ask restaurants for low salt substitutions. Ask wait staff or the chef how food is prepared. Choose foods made to order or that are prepared with low salt. Order sauces, dressings, salsa, condiments, croutons, cheese, and nuts on the side and control the amount you use. Skip the bread basket and tortilla chips if available at the table. Plan to only eat half of your meal as a way to control both calories and sodium. Choose grilled, broiled, baked, boiled, or steamed foods instead of fried. Avoid casseroles where there may be hidden salt, based on the ingredients used.

10. Check over the counter medicines, products, and supplements for salt. Many antacids, laxatives, aspirin, and cough medicines have salt or sodium. Many mouthwashes also have sodium. Ask your health care provider or pharmacist for help before you buy these products and check product labels.

Salt substitutes

Focus on good seasoning choices, such as fruits, vegetables, and herbs, for great tasting meals. Avoid most salt substitutes, unless it is Mrs. Dash or approved by your provider. Avoid most lite salts as they have too much sodium for a very low sodium diet. Many salt substitutes have potassium chloride instead of sodium, and this can cause medical problems.



Learn more about limiting salt in your diet at go.osu.edu/limit_salt.

Videos

- Ohio State Wexner Medical Center, "Following a Low Sodium Diet," <https://youtu.be/OKo00OdtXnk>
- Ohio State Wexner Medical Center, "How to Eat with Heart Failure," <https://youtu.be/gbfAXCuoOSk>

Limiting Your Fluids

If you have been told that you need to limit your fluids, your health care provider will tell you how much fluid you should be taking in every day. This may be from about 1,500 mL (1.6 qt) to 2,000 mL (2 qt), or about 48 fl oz (1,420 mL) to 64 fl oz (1,893 mL) a day.

Here are the amounts of fluid in some common household measures:

Household measure	Amount in fluid ounces	Amount in milliliters (mL)
1 tablespoon of fluid	½ fluid ounce	15 mL
½ cup of fluid	4 fluid ounces	About 120 mL
1 cup of fluid	8 fluid ounces	About 250 mL
1 quart of fluid	32 fluid ounces	About 1,000 mL (1 liter)

It is important to know how much fluid your regular drinking glasses hold. You can find out by filling your drinking glass with water and then measuring the amount in a measuring cup. After you know this, you will not have to measure every time.

Space your liquids throughout the day to help avoid drinking more than what you are allowed.

To relieve thirst without taking in extra water, try chewing gum, sucking on hard candy (sugarless if you are diabetic), or rinsing your mouth with water and spitting it out.

How to keep track of your fluid intake

Method 1:

1. Have an empty container that holds the amount of fluid you are allowed for the day.
2. As you drink fluids, put an equal amount of water into the container until you reach your fluid limit.
3. When the container is full, you have reached your fluid limit and should stop drinking.

Method 2

- Allow yourself 8 fl oz (1 cup) of fluid at each meal [3 x 8 fl oz = 24 fl oz, or 3 cup].
- Fill a container with water to keep in your refrigerator that contains the rest of the fluid you can have for the day.
 - For example, if you are allowed 48 fl oz (6 cups) of fluid a day, you could have 24 fl oz (3 cups) divided into 3 meals and then another 24 fl oz (3 cups) in the refrigerator to drink during the day.
- If you drink other beverages besides water (such as coffee, juice, or soft drinks), then you would need to pour out an equal amount of water from your container in the refrigerator.

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Staying within fluid levels

Here is an example of daily fluids. This example has 60 ounces, which is below the 64 ounce limit per day.

Meal	Food and fluid amount
Breakfast (20 oz)	1 cup (8 oz) coffee or tea 1 cup (8 oz) milk 1 cup frosted shredded wheat squares cereal 1 poached egg 1 piece of toast with 1 teaspoon butter and 1 teaspoons jelly 1 medium banana (½ c. fluid)
Lunch (12 oz)	1 cup (8 oz) soda product 1 grilled chicken sandwich: <ul style="list-style-type: none"> • 3 ounces grilled chicken, • 1 Tablespoon mayonnaise, lettuce and tomato • 1 whole wheat roll ½ cup carrot sticks 1 medium apple (½ c. fluid) ½ cup unsalted pretzels
Snack (12 oz)	1 cup (8 oz) iced tea with 2 cubes of ice (60 ml or ¼ c.) 8 unsalted crackers 1 stick low sodium cheese
Dinner (14 oz)	1 cup (8 oz) fruit juice with 2 cubes of ice (60 ml or ¼ c.) 3 ounces lean beef 1 medium baked potato with 1 tsp butter 1 cup steamed broccoli (fresh/frozen) with lemon and salt free herbs 1 cup peaches (raw/canned drained of fluid) (½ c. fluid)
Snack (12 oz)	1 cup (8 oz) tea 1 cup ice cream (½ c. fluid)
Fluid total	60 fluid oz (daily goal is less than 64 ounces)

Tips for managing fluids

Keep track of fluids in what you eat and drink.

- Measure out water, coffee, tea, juice, carbonated beverages, all hot or cold drinks, and soups.
- Limit milk to 2 cups per day.
- Tell your provider if you have a water softener for drinking water at home. This adds salt to the water you drink.
- Avoid sports drinks, energy drinks, regular tomato juice, carbonated beverages with sodium or salt added, whole milk, buttermilk, instant cocoa, and commercially made milkshakes.
- Avoid alcohol, such as wine, beer, or liquor. Alcohol can change how well your heart medicine works.
- Foods that have a lot of liquid (such as soup) should also be measured and counted as part of your fluid intake.
- Track foods that will melt (such as ice cream, gelatin, or flavored ice treats).

Common Things That Melt	
Ice, 1 cup crushed	= ½ c. fluid / 120 ml
Ice, 1 cube	= 2 Tbsp fluid / 30 ml
Fruit, 1 cup	= ½ c. fluid / 120 ml
Ice cream, sherbet, yogurt, or pudding, 1 cup	= ½ c. fluid / 120 ml
Gelatin/Jell-O, 1/2 cup	= ½ c. fluid / 120 ml
Popsicle, 1 twin bar	= ⅓ c. fluid / 40 ml

Home Activity Program

Activity is very safe as long as you listen to your body.

If at any time your heart failure symptoms return, call your provider for instructions and support.

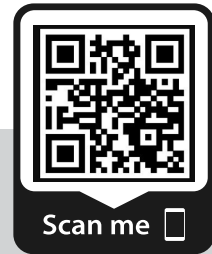
Start with interval training

Start to slowly rebuild your strength and stamina with walking short distances and then resting. This is called interval training. Your speed when walking will slowly increase over time.



Activity Plan

Walk at a pace that does not leave you out of breath. Only move to the next level if you feel you can, and you are not having symptoms of heart failure. It is okay to repeat a week if the effort needed is moderately difficult for you to achieve. The goal is to increase your activity safely for your body.



Learn more about being active with heart failure at go.osu.edu/hf_active.

Sample 8 Week Walking Plan

Week #	Walking interval	Rest interval	Repeat the intervals	Total activity time (minutes)
1	2 minutes	1 minute	5 times	10
2	4 minutes	2 minutes	4 times	16
3	5 minutes	2 minutes	4 times	20
4	7 minutes	2 minutes	3 times	21
5	5 minutes	2 minutes	5 times	25
6	10 minutes	2 minutes	3 times	30
7	15 minutes	2 minutes	2 times	30
8	20 minutes	2 minutes	2 times	40

Saving Energy and Making Work Simple

Balancing rest and activity is important when you are recovering from an injury or illness or coping with a chronic illness.

Saving energy, also called conserving energy, can help you do everyday tasks without putting too many demands on your body.



5 Ps for saving energy

The way you do a task is as important as what you do. You may need to change how and when you do a task to save energy. Consider these things when doing tasks:

Plan out your daily schedule.

Prioritize your tasks to get the most important things done first.

Pace yourself, so you can get more done.

Position and posture. Sit instead of standing when you can and use good posture.

Apply these 5 Ps for saving energy and the tips below in your daily life to help make tasks easier.

General tips

- Sit when doing a task. Standing takes more energy.
- Do work with your arms instead of your legs. Working with your legs takes more energy.
- Avoid doing activities in temperatures above 80 degrees F with humidity or below 20 degrees F. Extremes of heat or cold can have a dangerous effect on your heart.

Pace yourself to save energy

- Get at least 6 to 8 hours of sleep each night.
- Rest for 20 to 30 minutes at least twice a day. If you get tired, stop and rest for 15 minutes whether you have finished the task or not.
- Trade off between easy tasks and hard tasks or spread a task out over the day.
- Focus your energy on the things you can do.
- Ask for help if the demands on your energy are too much. Hire help as needed.
- Avoid stress as much as you can.
- Never rush.

Sleep Apnea and Heart Failure

People with heart failure often have trouble sleeping. This may be because of problems breathing or from depression or anxiety.

Many people with heart failure also have sleep apnea. Sleep apnea means you stop breathing for 10 seconds or longer during sleep.



Types of sleep apnea

Types of sleep apnea include central sleep apnea (CSA) and obstructive sleep apnea (OSA). CSA is caused by a problem with how the brain signals the breathing muscles. OSA happens when your airway gets blocked while you sleep. Some people have both types.

When you stop breathing, the amount of oxygen in your blood drops, so your heart has to work harder to get enough oxygen to your body's tissues. Your heart failure symptoms may get worse.

Signs of sleep apnea include feeling very sleepy during the day, not sleeping well, or waking up with a headache. If you have a bed partner, they may notice that you stop breathing while you sleep, snore loudly, gasp or choke, or toss and turn. If you have signs of sleep apnea, getting tested and treated may help you sleep and feel better.

Caring for yourself at home

- Lose weight, if needed.
- Sleep on your side. It may help mild apnea.
- Avoid alcohol and medicines such as sleeping pills, opioids, or sedatives before bed.
- Don't smoke. Talk to your health care provider if you need help to quit.
- Prop up the head of your bed.
- Treat breathing problems caused by a cold or allergies.
- Try a continuous positive airway pressure (CPAP) breathing machine if your health care provider recommends it.
- If CPAP doesn't work for you, ask your health care provider if you can try other masks, settings, or breathing machines.
- Talk to your health care provider if your nose feels dry or bleeds, or if it gets runny or stuffy when you use a breathing machine.
- Tell your health care provider if you're sleepy during the day and it affects your daily life. Don't drive or operate machinery when you're drowsy.

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Tips for better sleep

To help you fall asleep, you may need to change your routine before you go to bed.

- Try limiting caffeine.
- Avoid using devices such as smartphones, computers, or tablets before bedtime.
- Keep your bedroom quiet, dark, and cool.
- Use a soothing music or "white noise" machine to block out noise.
- Limit naps during the day.
- Ask if any of your medicines may keep you awake, and if you can take them earlier in the day.

Learn more at go.osu.edu/sleep_better.

Healthy Weight for Heart Failure

Many people with heart failure are obese. This is because obesity puts you at higher risk for having problems with your heart. Losing weight can help your heart failure symptoms and help you feel better.

How can my weight impact my heart?

Being overweight can affect the flow of blood within the organs and tissues of the body. Changes in the heart often result in diastolic heart failure, meaning the left ventricle cannot fill properly with blood during the diastolic (filling) phase. The ventricle may pump well, but it pumps out less blood than normal.

Other changes that can put more stress on your heart include:

- Being overweight can cause insulin resistance, which is when cells do not respond well to insulin and cannot easily take up glucose from your blood. This can cause impaired contracting of the left side of the heart, causing or worsening diastolic heart failure.
- Proteins that help control inflammation, called cytokines, can activate your body's "fight or flight" response. When your body is under this stress, it can cause sodium and water retention.
- Having fewer protein hormones in the body that help the kidneys get rid of salt and water, called natriuretic peptides.

Am I at a healthy weight?

Body mass index (BMI) is an estimate of body fat based on your height and weight. It helps you and your health care team find your ideal weight and create a goal for weight loss, if needed. Ask your care team for help to determine your BMI.

Aim for a BMI between 18.5 and 24.9.

If you need to lose weight, losing just 5 to 10 percent of your current weight over 6 months will lower your risk for heart disease and other conditions.

Talk to your health care provider or heart failure team about what is a healthy weight for you.

What can weight loss do for me?

Losing even as little as 5 to 10% of your current body weight can have a positive impact on your health. Benefits include:

- Better control of obesity related problems, such as diabetes or insulin resistance, high blood pressure, and obstructive sleep apnea.
- Better quality of life and better mental health.
- Improved chance of having advanced heart failure therapies when needed, such as left ventricular assist device placement (LVAD) or heart transplant.

The heart failure team at The Ohio State University Wexner Medical Center can link you to support with dietitians, weight loss management programs, cardiac rehabilitation (for eligible patients), and the Center for Integrative Health.

Weight loss methods

Many people want to lose weight to improve their health and lower their risk of problems like heart disease, diabetes, and heart failure symptoms.

Lifestyle changes for weight loss fall into these areas:

- Identify eating triggers
- Focusing on the act of eating
- Setting goals and using rewards
- Adding more active time into your day



Weight loss methods include lifestyle changes, physical activity, a new approach to eating, and, in some cases, weight loss medicines or a surgical procedure. Weight loss surgery, also called bariatric surgery, is only for people with obesity who have not had success with other methods.

Diet options

Nutrition is an important part of an obesity management plan. The American Heart Association recommends a Mediterranean or plant based diet. Studies have shown they help prevent heart disease and stroke. They can also reduce risk factors such as obesity, diabetes, high cholesterol, and high blood pressure.

Tips for Weight Loss With Diet Changes

- Track what you eat and drink in a notebook or an app
- Find an eating plan that works for you
- Cut back on portion sizes. Portioning out food helps you manage what you eat
- Choose whole foods, including whole grains, fruits, and vegetables
- Choose foods high in fiber, such as beans, nuts, fruits, and vegetables
- Choose lean, unprocessed meats and fatty fish
- Choose good fats, such as nuts, olives, and avocados
- Choose water when picking your drink
- Limit salt intake, and limit or avoid sugary drinks and alcohol

Recommended Diets

- Mediterranean diet: This diet encourages eating more fruits, vegetables, beans, legumes, and whole grains, so it increases the fiber in your diet. **Read more at go.osu.edu/3918.**
- Plant-based diet: This diet can lessen inflammation, lower cholesterol, and help people lose weight. **Read more at go.osu.edu/pted5187.**

Learn more about obesity, weight loss methods, and tools at go.osu.edu/hf_obesity.



Quitting Tobacco Use

Quitting smoking or using other types of tobacco is one of the best things you can do to keep your heart failure from getting worse.

Having a plan and using medicines can help you quit. A quit plan helps you plan ahead. Before you quit, you identify the things that are likely to trigger tobacco use and how you'll manage them. You also think about what you need for support. Your health care provider can suggest medicines to try.

5 steps to quitting tobacco

1. Talk to your health care provider or pharmacist about quit aids, nicotine replacement products and support groups.
2. Set a quit date.
3. Tell family and friends you plan to quit. Having support is key to successful quitting.
4. Prepare for your quit date. Buy gum, throw away tobacco products, clean your home and car, and visit your dentist to clean your teeth of tobacco stains.
5. Plan a reward system for quitting. Reward yourself for choosing healthy behaviors that replace tobacco use and for meeting milestones, such as 1 day, 1 week, 1 month, and 3 months.



Try the “4 D’s”

- **Delay.** See if you can wait 5 minutes before lighting up. Even a few minutes can help a craving to pass.
- **Deep breathe.** Count to 5 for each breath in and each breath out. Repeat 10 times.
- **Drink fluids.** Drink liquids throughout the day to help clear nicotine from your body. Try to drink 8 (8-ounce) glasses each day.
- **Do other activities to keep busy.** Take a walk, read a book, play a game or talk to a friend. Try to keep your hands and your mind busy.

Ohio State resources

- If you have an Ohio State primary care provider, talk to them about a referral for smoking cessation counseling.
- You can call 614-293-QUIT (7848) to connect with a pharmacist for one-on-one assessment, counseling and treatment. For more information about this program, please visit <https://wexnermedical.osu.edu/heart-vascular/clinical-pharmacistservices/smoking-cessation>.

Quit lines

- American Cancer Society, 800-227-2345
- American Lung Association, 1-800-LUNGUSA (1-800-586-4872)
- BeTobaccoFree.gov, 877-448-7848
- Ohio Tobacco Quit Line, 1-800-QUITNOW (1-800-784-8669)

Mobile apps

- Search your mobile device’s app store for quit smoking apps, such as QuitGuide and QuitSTART.

Life Is Changing. You Can Change With It.

You can live with heart failure by taking care of yourself by staying active, watching your sodium, and weighing yourself every day. Taking care of yourself also means checking on your mental health.



Coping strategies

Heart failure can change how you shop for food, how food is prepared, and how your family eats. It can cause changes with your job and your ability to earn a living if your condition gets worse. **Feeling anxious or stressed about these changes is normal.** You are not alone.

- **Talk with someone** about your feelings, such as a counselor, spiritual leader, trusted family member, or friend.
- **Join a support group**, online or in person, to learn how others have coped with a diagnosis of heart failure.
- **Talk with your social worker** to see if there are resources in your community.
- **Ask for help** with everyday tasks or for changes in job tasks at work. When help is offered, be specific about your needs, such as help with running errands.
- **Focus on enjoyable activities**, such as hobbies, volunteering, or exercise.
- **Treat yourself** to a gift of flowers, magazines, or something that makes you happy or brings happiness to others.

Practice mindfulness. Mindfulness can help quiet your mind and relax your body. Studies show that it can help some people sleep better, feel less anxious, and bring their blood pressure down.

Learn more:

go.osu.edu/less_stress

Depression

Symptoms of depression include feeling sad, becoming tearful, feeling like you have no energy to do the things you usually enjoy, or even becoming angry or more irritable. If you are usually a very active person and your health care provider has restricted your activity, boredom or not being active can add to feeling down.

Common symptoms of depression include:

- Loss of interest in activities or hobbies
- Isolating yourself from family and friends
- Changes in your sleeping habits
- Changes in your appetite or weight
- Loss of energy or fatigue

If you have symptoms of depression, talk with your cardiac care team. There are treatments for depression that are very effective. They may also recommend that you:

- Increase your activity, which is one of the best ways to cope with depression. Your care team can help you figure out what activities are safe for you to do.
- Actively engage in things that you enjoy or that fill you with a sense of accomplishment. Focus on your progress, not things that you are not yet able to do.

If your depression becomes more disabling or if you have thoughts of harming yourself or others, call your care team or go to the nearest emergency department.

Anxiety

Becoming anxious about a change in your health is normal. Some people worry more, while others may become so anxious that they have panic attacks. To some people, the panic attack feels like a heart attack, or even like they are dying, when this is not the case.

Some common symptoms of anxiety include:

- Feeling nervous, restless, or on edge
- Racing heart
- Upset stomach
- Becoming short of breath or hyperventilating
- Worry
- Irritability

Ask yourself how your anxiety is affecting you and share this with your care team. Take notes about what to expect with your recovery to help reduce your anxiety.

Resources for Stress and Anxiety

There are many resources to help you deal with stress.

- **Ohio State Integrative Health** offers complementary resource guides and recordings. Visit wexnermedical.osu.edu/integrative-health/resources for more information.
- You may also find mental health apps, like Calm, Headspace, and Insight Timer, helpful. Go to your mobile device's app store to download.

Getting help and support

- **Ohio State Behavioral Cardiology** helps heart patients deal with depression, anxiety, and other problems related to their condition.
- **Contact Mental Health America of Franklin County** 614-221-1441 or visit mhaofc.org for a directory.

24-hour Hotlines

- 988 – to call, text, or chat
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255)
- Netcare Crisis Hotline, 614-276-2273
- Suicide Prevention 24-hour Hotline, 614-221-5445

If you have feelings of hurting yourself or others, get help right away. Call 911 or go to the nearest emergency department.

Sexual activity

Most people with heart failure can still have an active sex life.

When your or health care provider has said it is okay to resume sexual activity, here are tips for safe sexual intimacy:

- Be well rested before having sex.
- Avoid sexual activity when:
 - It's too hot or too cold.
 - You're under stress.
 - You've just had a meal.
- Find a position that uses less energy and use foreplay to allow your heart rate to build slowly.
- If you have **shortness of breath**, stop for a few minutes and then continue if it goes away. If it does not, call your health care provider.
- If you have **chest pain**, stop and take nitroglycerine if it has been ordered by your health care provider. Take 1 tablet and wait 5 minutes. If you still have pain, take another tablet and wait 5 minutes. **If the pain does not go away, call 911.**
- If you are too tired for sex or have a low sex drive, try other forms of intimacy. Talk with your health care provider about your concerns.
- **Do not take medicines for erectile dysfunction without first talking with your health care provider.**

Cardiac Rehabilitation

Our goal is to help you return to the highest possible quality of life. Cardiac rehabilitation (rehab) works to address activity and lifestyle after you leave the hospital.

Phase 1 (inpatient)

We provide education during your hospital stay and work with you on the safe and needed activities you will need when going home. Before you leave the hospital, we will also provide a referral for a local cardiac rehab program.

Phase 2 (outpatient)

After leaving the hospital, you will have a visit to check your heart health with a cardiac rehab nurse and exercise physiologist. After this evaluation, which may include testing, you will start a personalized wellness program. The benefits include:

- Learning more about your condition and knowing how to manage your condition at home.
- Improving your heart and cardiovascular function.
- Improving your fitness level.
- Reducing the chance of future health problems by working to improve diet, weight, activity level, diabetes and/or cholesterol, stop tobacco use, and manage stress.
- Being able to do daily activities without symptoms.
- Having less fear or anxiety about your heart condition.
- A faster return to work and/or normal activities.

Phase 3 (maintenance)

This is an ongoing fitness and wellness program that continues at the end of Phase 2 cardiac rehab. The program will support you as you work toward your health, fitness, and lifestyle goals.

Ohio State Cardiac Rehab Locations:

Ohio State Outpatient Care Upper Arlington

1800 Zollinger Road, 2nd Floor
Columbus, OH 43221
Phone: 614-293-6937

Ohio State Outpatient Care East (Phase 2 only)

543 Taylor Ave., Room 3068
Columbus, OH 43203
Phone: 614-688-6306

Heart Care Calendar: Month _____ Year _____

Write down your weight, heart rate, and blood pressure (BP) every day each month.

Call your doctor if you gain 2 to 3 pounds in 24 hours, or 5 or more pounds in a week.

<input type="checkbox"/> Sunday Weight _____ Heart Rate _____ BP _____	<input type="checkbox"/> Monday Weight _____ Heart Rate _____ BP _____	<input type="checkbox"/> Tuesday Weight _____ Heart Rate _____ BP _____	<input type="checkbox"/> Wednesday Weight _____ Heart Rate _____ BP _____	<input type="checkbox"/> Thursday Weight _____ Heart Rate _____ BP _____	<input type="checkbox"/> Friday Weight _____ Heart Rate _____ BP _____	<input type="checkbox"/> Saturday Weight _____ Heart Rate _____ BP _____
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My Notes

[illegible]

Heart Failure Zones and Action Plan

Heart failure zones give you an easy way to see changes in your heart failure symptoms. They also tell you when you need to get help. Check every day to see which zone you are in.

- **Green Zone:** You are doing well. Keep doing what you are doing. For example, your weight is not changing, and you can breathe easily.
- **Yellow Zone:** You need to call your health care provider. You have new symptoms, or your symptoms have changed. For example, you might have more shortness of breath.
- **Red Zone:** You need to call 911 and get help right away. You have emergency symptoms, like severe trouble breathing.

<p>I am doing well.</p> <ul style="list-style-type: none"> • Breathing without shortness of breath. • Able to do daily activities. • Have little or no swelling. • Have not gained weight. 	<p>Action:</p> <ul style="list-style-type: none"> • Continue my current medicines. • Eat a healthy, low salt diet. • Check my weight each day. • Be active.
<p>I feel worse. I have:</p> <ul style="list-style-type: none"> • Gained 2 to 3 pounds in 24 hours, or 5 or more pounds in a week. • Less of an appetite. • New or worse: <ul style="list-style-type: none"> › Swelling in feet, ankles, legs, or stomach. › Dizziness that lasts more than 1 minute. › Dry cough. › Shortness of breath. › Tiredness or low energy. › Less need to pass urine. 	<p>Action:</p> <ul style="list-style-type: none"> • Continue my medicines. • Rest and limit activity. • Take my rescue medicine if I have gained 2 pounds or more and I have any signs that are new or worse for more than 24 hours. • Call my health care provider to report that I am taking my rescue medicine and any changes in my signs. • Follow any other instructions I am given. 
<p>I feel I am in danger. I have 1 or more of these signs:</p> <ul style="list-style-type: none"> • Feel I cannot breathe or I am very short of breath. • New pain, pressure, heaviness, or tightness in my chest. • Trouble sleeping when flat in bed, if able to before. • Sweating or sudden weakness or fainting. • Confused or cannot think clearly. • Heart beat is very fast or irregular. 	<p>Action:</p> <p>Call 911 or emergency medical services right now!</p> <p>You need to get to the nearest emergency department for care.</p> 



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