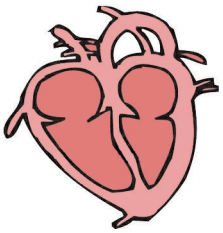
Health Tips for Heart Failure

This information can help you understand heart failure. It can also help you learn how to monitor and manage your condition. As you read it, mark any sections where you have questions. Bring it to your next visit so you can discuss these questions with your provider.

What is Heart Failure?



Heart failure is a condition when the heart 'fails" to keep up with your needs by not pumping as well as it should. It does not mean that your heart stops working. It means that your heart cannot supply enough blood, food and oxygen to your organs and muscles. This may cause you to feel tired and fatigued. When the heart is not pumping as well as it should, fluid can build up and cause leg and ankle swelling. If fluid builds up in the lungs, it can cause coughing and shortness of breath.

Heart failure can be caused by high blood pressure (hypertension), heart attack, coronary artery disease (atherosclerosis or hardening of the arteries), or even heavy alcohol use. It cannot be cured, but it can be treated.

What can you do?

The list below shows how to monitor and manage heart failure. Not every item may apply to you, so ask your provider to go over the list and check the important items for your care plan.

1. Diet

- Reduce salt in your diet. Be aware of foods with "hidden" salt such as hot dogs, salami, canned foods, and cheese. Do not add salt to your food or when cooking. Ask your doctor about using salt substitutes.
- Reduce saturated fats, especially whole milk products and fatty meats.
- Reduce total cholesterol.
- Eat more fruits.
- Eat more vegetables.
- Limit water or other fluids to less than 3 liters per day.

2. Exercise

- Get some exercise (for example, walking, cycling, swimming) or some physical activity (for example, yard work) almost every day for at least 30 minutes based on your healthcare provider's recommendation.

3. Weight

- Weigh yourself daily, at the same time of day (morning is preferred, after emptying your bladder). You can use the form that is included with this information sheet to keep track of your weight.
- If you gain more than 2 pounds overnight or 3-5 pounds in one week, call your provider.
- Reduce your weight to within 10% of your ideal weight.
- Your goal weight is _____ pounds.

4. Alcohol, smoking and other drugs

- Limit alcohol use to one drink per day.
- Stop tobacco use.
- Do not use illicit (street) drugs.

Access this document for downloading at
http://www.oqp.med.va.gov/cpg/CHF/P/Health_Tips_for_Heart_Failure4.doc

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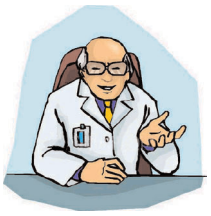
5. Medications

- Take your medicines as directed.
- If you forget to take your medicine, take it as soon as you remember if it is within a few hours of the missed dose. If you do not remember until your next dose, just take the next dose as prescribed. Do not double the next dose.
- Do not stop or start medicines without talking to your provider first.
- Remember to order refills at least 1 to 2 weeks before your pills run out.
- Take enough pills with you when you travel, and keep them with you in a carry-on bag.
- Write down the name and dose of each medicine that you take, including the non-prescription medicines you buy at the drug store. Also write down the times that you take each medicine. Carry the list with you everywhere you go. You can use the form that is included with this information sheet to keep track of your medicines.
- Pill organizers can make it easier to take your medicines. They are available at most pharmacies and food stores if not available at your VA pharmacy.

Other important things to know



- See your provider regularly and keep all your appointments. If you cannot make an appointment, call ahead to re-schedule.
- Get a pneumonia vaccine (one time only for most people).
- Get a yearly flu vaccine.
- Explain your condition to your family or other caregivers so that they know how to help you.
- Fill out an Advanced Directive form so that your provider and family will know what to do in case you become seriously ill.
- Choose someone to make important health care decisions for you in case you become seriously ill and unable to make decisions for yourself. Explain to that person what you want done so that they can help the providers make the best decision for you.

Write your provider's name and phone number here

Name _____

Telephone number _____

Call your provider if you start to have any of the following symptoms, or if the symptoms you have become worse:

- Increasing shortness of breath, especially when you exercise or are active
- Shortness of breath if you lie flat at night
- Breathing difficulty that wakes you up from sleep
- Need to sleep using more pillows or sitting up in a chair to breathe easier
- Chest pain or pressure
- Fast or irregular heart beat
- Fatigue or weakness
- Dizziness or fainting
- Swelling of the ankles, legs or abdomen (belly)
- Persistent (frequent) coughing

Go to the emergency room or call 911 if you have any of the following:

- Chest pain that does not go away with rest or after taking nitroglycerin
- Severe trouble breathing
- Severe dizziness or fainting

Daily Weight Chart for _____

Month _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Month _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Medications List for _____

Name of Medication	Amount	Reason for Taking	Time Morning	Time Afternoon	Time Evening