

# I Have Heart Failure WITH REDUCED EJECTION FRACTION. Now What?



MY ACTION PLAN FOR HEART FAILURE • [CardioSmart.org](http://CardioSmart.org)

If you find out that you or a loved one has **heart failure with reduced ejection fraction** (also called HFrEF or systolic heart failure), it's normal to feel scared. You may feel worried or unsure about the future. Thankfully, recent advances in our understanding of how to best manage the disease provide hope for many.

While your life may not be exactly the same, taking steps to manage your heart failure can help you reach your best “new normal,” which is how many people farther along in their heart failure journey describe it. We hope this action plan and the accompanying tools will help. This resource, developed by the American College of Cardiology, is designed to help you be successful in starting your treatment and understand what to expect in the first six months to a year.

Remember that **you are at the center of your care**, so it's important that you feel comfortable sharing any concerns or questions with your health care team now and in the future.

Your treatment plan will be tailored to your goals and how severe your heart failure is.

## MY ACTION PLAN FOR HEART FAILURE — WHAT'S INSIDE

This action plan will help you and your health care team review:

■ <b>Your goals</b> and preferences, as well as what worries you most about heart failure .....	3
■ Your initial treatment plan, which will include:	
• Paying attention to <b>how you feel</b> each day; watching for and telling us about any signs or symptoms that your heart failure might be getting worse .....	5
• Starting <b>medications</b> .....	7
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# MY ACTION PLAN FOR HEART FAILURE

Today's date: \_\_\_\_\_

Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Health care professional's name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Caregiver name/relationship to patient: \_\_\_\_\_

Phone number: \_\_\_\_\_

Please note any history of other heart problems, stroke, diabetes and/or kidney or liver problems to help coordinate care:

Condition(s)	Date diagnosed (if known)

# ▶ MY GOALS & PREFERENCES

Heart failure does not mean that your heart has stopped working. But it is weaker and has to work harder to pump blood to the rest of your body. Treatment can help you feel better, live longer and prevent hospital stays. **Although your health care team will have specific clinical goals for treating your heart failure, they also want to know what matters most to you when it comes to your treatment.**

*Think about your main goals for managing heart failure, as well as what concerns you most. Write down your thoughts now or before your next visit.*

▶ **When it comes to treating my heart failure, it is most important that I am able to** (for example, making sure my condition doesn't limit my ability to do certain tasks, hobbies, travel or other activities, child care, life events):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Treatment goals usually center around:

- Treating any conditions that may have led to heart failure
- Easing symptoms
- Slowing how quickly the condition gets worse
- Helping you live longer and with a better quality of life
- Improving your heart's pumping function

Are there other things that are important to you?

▶ **When I think about my heart failure, I am most worried about:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

▶ **What is most important to me when it comes to my heart failure care?**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## MY GOALS & PREFERENCES (CONTINUED)

### How important is it to me that my heart failure treatment: (Check which ones are most important)

- Helps my symptoms**  
Which are most bothersome?

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- Improves my ability to do my usual activities**  
Which activities are most important?

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- Makes my quality of life better**  
In what ways?

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- Addresses my other health issues**  
Which ones, specifically?

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- Keeps me out of the hospital**
- Helps me live longer**
- Other goals that are not listed above:**

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### TIP

**Your goals may change** over time. Let your heart care team know so they can best meet your needs.

# MY TREATMENT PLAN

Heart failure is best managed with a mix of heart healthy habits, medications and paying close attention to signs that suggest your condition may be flaring up or getting worse. At some point, a device to help the heart work may be needed.

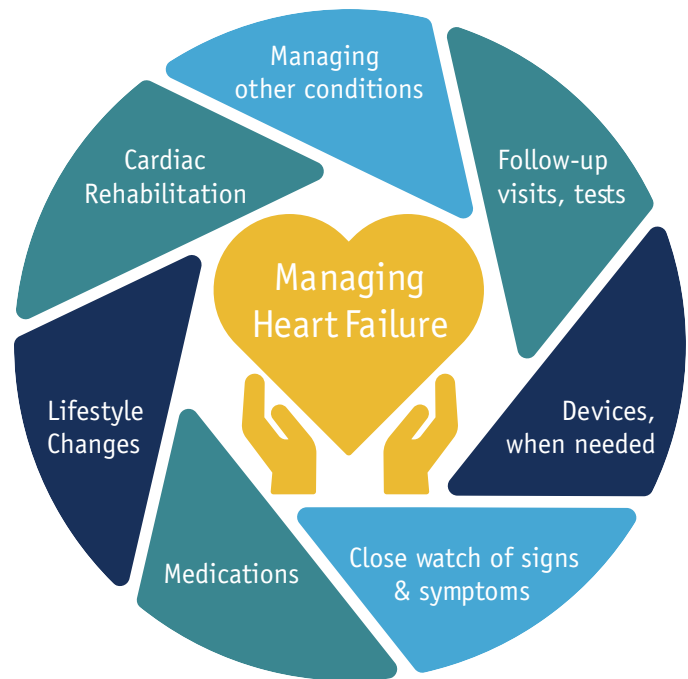
## ▶ **Paying Attention to How I Feel Each Day and Reporting Any Changes**

One of the best ways to manage heart failure well is to understand how you are feeling day-to-day. For example, what is a “good day” with heart failure? What about a “bad day”? What does that look and feel like? Paying close attention to and reporting how you feel can help guide your treatment.

**Take the time to check in with yourself each day. Tell your health care team if and when you start to feel badly.** Many people say they know their heart failure is getting worse when they feel very drained, zapped of energy or more easily out of breath even though they haven’t been doing too much. This is different from feeling tired after traveling or a big event, which is often expected with heart failure.

### **Asking yourself these questions can help:**

- In general, how do I feel today – both physically and emotionally?
- Compared with a regular or average day with heart failure, today I feel:
  - Better
  - Worse
  - About the same
  - Different – In what way(s)? \_\_\_\_\_
- How does having heart failure affect my emotional health? My sleep? My concentration or ability to focus on tasks?
- What activities am I able to do (or not do) because of my heart failure?



REPORTING HOW I FEEL

## TIP

One of the best ways to effectively manage heart failure is to understand how you are feeling day-to-day.

## MY TREATMENT PLAN (CONTINUED)

■ Are there signs that my heart failure might be getting worse? Do I notice:

- ⚠ **Swelling** in my feet, legs, ankles or stomach
- ⚠ **Sudden weight gain**, which can be a red flag that fluid is building up in my body

*Call your health care professional right away if you gain 3 pounds in a 24-hour period or more than 5 pounds in a week*

- ⚠ **That I need to sit upright in a chair** or use pillows to prop myself up to sleep or breathe easier
- ⚠ **Feeling out of breath** even with small bouts of activity

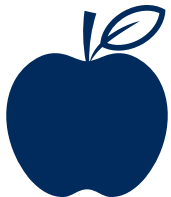
### ► Things I can do every day to stay as heart healthy as possible:



**Weigh myself** with the same scale every morning after going to the bathroom and before breakfast and write it down using the monthly calendar [My Daily Weight Tracker](#)



**Stay in sync with my body and pay attention to signs that my heart failure is getting worse;** use [How Heart Failure is Affecting My Life](#)



**Choose heart healthy foods that are low in salt (sodium)**



**Take my medications as directed;** use [Heart Failure Medicine Tips to Remember](#)

### TIP

It is important to play an active role in your health, make decisions with your care team, report how you are feeling and ask questions. Use the worksheets, **How Heart Failure is Affecting My Life** and **My Daily Weight Tracker**, to help track heart failure symptoms, triggers and how the condition affects usual activities in between your health care visits.

# STARTING MEDICATIONS

Medications are central to managing heart failure well. They are used to help:

- The heart pump better
- Ease the symptoms of heart failure, such as fluid build up or shortness of breath
- Slow how quickly the disease progresses (gets worse)

## Taking the right combination of heart failure medications can help you stay out of the hospital and live longer.

Many people are surprised to learn that heart failure medications are taken for life. They also need to be adjusted over time, especially in the first two to three months when your care team is increasing the dose (also called titrating or escalating the dose). Your medications and/or the amount you take may also be changed or increased when you are feeling well.

To help manage my heart failure, my care team recommends that I start or continue taking the following \_\_\_\_\_ (insert #) medications. We will use [My Heart Failure Medication List](#) to list each medication, my starting dose (amount), when and how to take each one, and other important information.

Starting and being on so many medications can feel overwhelming. Ask questions if you are unclear about what to do if you miss a dose.

MY HEART FAILURE MEDICATION LIST									
Drug Type	Medication Name	Reason For Taking	Start Date	Starting Dose (amount)	Target Dose (amount)	How Often (for example: 1 day, 2x/day)	Time of day to take it and how to take (see or with food)	What to do if I miss a dose	Side effects to call my clinician
Example: ACE inhibitor	Lisinopril	Heart Failure and High Blood Pressure		10 mg		1	morning		
Diuretic									
Aldosterone Receptor Antagonist									
ACE Inhibitor — OR — ARB — OR — ARNI									
Beta Blocker									
Sinoatrial node inhibitor									
Isosorbide/hydralazine									
Digoxin									
Other									

### TIP

Many people with heart failure take upwards of 8 different medications. Each medication works differently — often in complementary ways — to help relieve your symptoms and keep your heart from working so hard to pump blood to your body.

Taking so many medications can make missing a dose more likely. Forgetting to or not taking medications is among the most common reasons people with heart failure end up in the hospital.

Speak up if you have concerns about your medication schedule, possible side effects or costs, or have other questions about how to take them at the right time, in the right way and at the right amount (dose).

# ▶ STARTING MEDICATIONS (CONTINUED)

Below is a list of heart failure medications that are available to treat HFrEF, and very simply how each one works. We will use the medication list that follows to write down the name of each medication you should start taking and note other important information.

▶ I am being prescribed the following \_\_\_\_\_ medications (noted with a check):

Medications for Heart Failure with Reduced Ejection Fraction	Common examples – listed by the generic followed by (Brand) name
<input type="checkbox"/> <b>Diuretic (water pill)</b> Diuretics help get rid of excess water (fluid buildup) in the body.	furosemide (Lasix) bumetanide (Bumex) torsemide (Demadex)
<input type="checkbox"/> <b>Aldosterone receptor antagonist</b> Another type of diuretic that helps the body remove excess water and sodium through the urine, but prevents loss of potassium.	eplerenone (Inspra) spironolactone (Aldactone)
<input type="checkbox"/> <b>Angiotensin-converting enzyme inhibitors (ACE inhibitors)</b>  — OR — <input type="checkbox"/> <b>Angiotensin II receptor blockers (ARBs)</b> ACE inhibitors and ARBs widen and relax blood vessels and ease the amount of work the heart has to do to pump blood. They also lower blood pressure.  — OR — <input type="checkbox"/> <b>Angiotensin II receptor blocker neprilysin inhibitor (ARNI)</b> NOTE: ACE-inhibitors, ARBs and ARNIs each work similarly, but ARNIs are stronger due to an additional ingredient. It should only be started 36 hours after stopping an ACE inhibitor. To help decide if an ARNI is right for you, ACC has created a tool to help. <a href="http://CardioSmart.org/HFDecisionAids">CardioSmart.org/HFDecisionAids</a>	captopril (Capoten) enalapril (Vasotec) lisinopril (Prinivil, Zestril) ramipril (Altace)  — OR — candesartan (Atacand) losartan (Cozaar) valsartan (Diovan)  — OR — sacubitril/valsartan (Entresto)
<input type="checkbox"/> <b>Beta blocker</b> Beta blockers slow the heart rate, lower blood pressure and may reverse some of the heart damage.	bisoprolol (Zebeta) carvedilol (Coreg) metoprolol succinate (Toprol)
<input type="checkbox"/> <b>Sinoatrial node inhibitor</b> This medicine slows heart rate and reduces the amount of oxygen the heart needs and how much the heart needs to work to pump blood. It is used with beta blockers if they do not lower heart rate enough.	ivabradine (Corlanor)
<input type="checkbox"/> <b>Hydralazine and isosorbide dinitrate</b> Widen or relax blood vessels to make it easier for the heart to pump.	hydralazine isosorbide dinitrate
<input type="checkbox"/> <b>Digoxin</b> Slows heart rate and strengthens heart muscle contractions to pump more blood.	digoxin (Lanoxin)





# ▶ STARTING MEDICATIONS (CONTINUED)

## ▶ Other Medications I Take

When starting a new treatment plan, it's important to review other medications (both prescribed and over-the-counter) you take for other heart issues (blockages in the blood vessels, enlarged heart muscle, heart rhythm disorder, previous heart attack, high blood pressure), stroke, diabetes, or other medical conditions. For example, do you take a blood thinner, a statin (to lower cholesterol) or aspirin?

Health condition(s)	Medication(s)
Notes	

# LIFESTYLE CHANGES

Check all that apply and add personal recommendations.



- Eat heart healthy.** There are several eating plans known to be good for the heart.

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- Limit sodium (salt).** Doing so helps prevent fluid buildup (swelling) and eases heart failure symptoms.

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I should consume no more than \_\_\_\_\_ milligrams of **sodium** per day.



1 teaspoon salt  
= 2,300 mg sodium

## TIP

- Beware that processed and prepared foods can have a lot of “hidden” sodium
- Start reading food labels to see how much salt is in a serving
- When eating out, ask the server what dishes have little or no salt or, better yet, if the chef can prepare a meal with no salt
- Ditch the salt shaker and add some flavor with herbs, lemon juice and spices



- Get regular exercise.** Exercise has many health benefits, including strengthening the heart. It can also help boost one’s energy level, mood and outlook.

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I should aim to get \_\_\_\_\_ minutes of physical activity on most days of the week.  
The types of activities that are safe for me include:

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Swimming                                      | <input type="checkbox"/> Dancing      |
| <input type="checkbox"/> Biking  | <input type="checkbox"/> Gardening    |
| <input type="checkbox"/> Taking a walk (even around the block or yard) | <input type="checkbox"/> Other: _____ |
-

## LIFESTYLE CHANGES (CONTINUED)



- **Go to cardiac rehabilitation, if you qualify.** Cardiac rehab is an option for many people with your type of heart failure depending on insurance coverage and your ejection fraction (a measure of how your heart is pumping blood out of the heart).

Among other things, this three-month outpatient program offers:

- One-on-one supervised exercise that is tailored to your fitness ability and heart function
- Practical advice for heart healthy eating and lowering stress
- Support for managing medications
- Smoking cessation for those who use tobacco

Read more at [CardioSmart.org/CardiacRehab](https://www.CardioSmart.org/CardiacRehab)

Cardiac rehab is a great way to jump start physical activity in a monitored and controlled way. For patients who haven't been very active, this can allay any fears of starting to work out. The fact that it is supervised gives them a confidence boost and additional medical and social support if needed.



- **Restrict fluids.** Some people need to pay attention to how much fluid they get from foods and beverages. Fluids in fruits, soups and other foods also count toward your daily amount.

I should limit my **daily** fluid intake to \_\_\_\_\_ cups, which is about \_\_\_\_\_ ounces.



- **Avoid tobacco use.** Let your health care team know if you smoke and need help quitting. It's not easy, but there are resources to help. It's also a good idea to avoid breathing in other people's tobacco smoke.



- **Use alcohol in moderation.** It's generally a good idea to limit alcohol to no more than one drink a day. If, however, your heart failure was thought to be due to alcohol, it should be avoided.



- **Reduce stress and talk about your feelings.** Stress and anxiety can make the heart work harder. Find ways to cope with stress in healthy ways. You might try deep breathing exercises, yoga, music therapy, joining a support group, or seeing a mental health counselor.

Also, tell your health care team if you are feeling unusually sad or down. You may be depressed, and there are treatments available.

# DEVICES

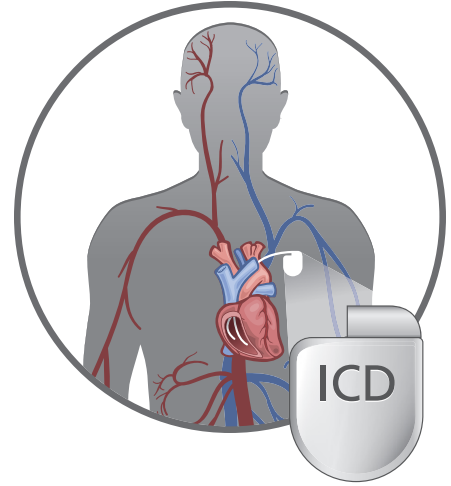
Many people with heart failure are advised to consider adding a device. A device is placed near the heart to help it work and/or to monitor someone's condition.

For people with your type of heart failure, these may include:

- An implantable cardioverter-defibrillator (ICD)
- Cardiac resynchronization therapy (CRT)

▶ **My care team and I discussed placing a (check all that apply):**

- ICD
- CRT-Pacemaker
- CRT-Defibrillator



▶ **Together, we decided I should:**

- Have an \_\_\_\_\_ (insert device name)  
placed \_\_\_\_\_ (date)
- Revisit our discussion about a device as an option  
in \_\_\_\_\_ (month/year)

▶ **Use the space below to write down any other important notes or follow-up questions:**

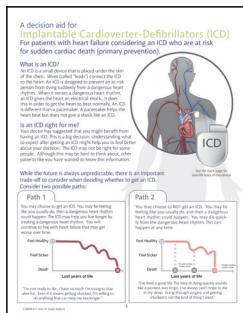
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For more information, ACC has a Decision Aid for Implantable Cardioverter-Defibrillators (ICD) [CardioSmart.org/ICDDecisionAid](https://www.cardiosmart.org/ICDDecisionAid)

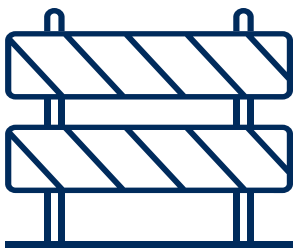
# ▶ AVOIDING SETBACKS IN MY CARE

Following your heart failure action plan is critical to your heart’s success. But many things can get in the way. For example:

- You might find it hard to take your medications as directed or keep up with follow-up appointments, routine blood work and imaging tests
- Other conditions can also make heart failure worse if they aren’t treated

It is helpful for your health care team to know what might get in the way when managing your treatment plan.

## ▶ Possible Roadblocks to Sticking with My Treatment Plan



Certain factors might make taking your medications, exercising, limiting fluids or engaging in your heart failure plan more difficult. For example, out-of-pocket costs, forgetting to take all of your medications, concerns about side effects, no help at home, travel, not knowing how to get started or understanding the information you were given.

It can be helpful to think about and recognize what makes it easy or hard to manage your condition. It can help your care team come up with possible solutions to support you.

Concern	What makes it hard	What seems to help
Taking my medications		
Limiting my sodium intake		
Weighing myself daily		
Exercising		
Making it to my medical visits or going for follow-up tests		
Other:		

# ▶ AVOIDING SETBACKS IN MY CARE (CONTINUED)

## ▶ Conditions That Can Make Heart Failure Worse And Should Be Treated



Half of people with heart failure have five or more co-existing conditions. Many of these can aggravate heart failure if they are not treated.

If you have any of the following conditions, it's important for us to discuss them. Be sure to tell each of your health care professionals about all of your health issues and treatments. This will help to coordinate your care.

- Blockages in my heart's arteries (coronary artery disease)
- Chronic kidney disease
- Diabetes
- Sleep apnea
- Atrial fibrillation or other issues with your heart rhythm
- Thyroid disease (having either too much or too little thyroid hormone)
- Heart valve disease (when one or more of the heart's valves doesn't work properly)
- Depression or anxiety
- High blood pressure or cholesterol
- High use of alcohol
- Previous cancer treatment
- Anemia or iron deficiency
- Other conditions: \_\_\_\_\_  
\_\_\_\_\_

▶ Notes and follow-up: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# FOLLOW-UP VISITS AND TESTS

## How will my care team and I know if my heart failure is getting worse?

By taking into account:

- How you are feeling (better, worse, the same or different in some way)
- Your report of signs and symptoms (shortness of breath, swelling, fatigue, any rapid weight gain)
- Physical exams
- Results of lab work and imaging tests
  - Echocardiograms show moving pictures of your heart's structure and how well it is pumping; you have low ejection fraction, which means that the amount of blood the heart is able to squeeze out is much less than it is normally
  - Electrocardiograms or ECGs check for problems with the heart's electrical activity
  - Blood tests can give information about lots of things, including:
    - ◆ How your kidneys are working
    - ◆ If you have elevated levels of BNP, a hormone that rises during heart failure episodes (Note: some medications can cause higher BNP levels, so talk with your health care professional)
    - ◆ Low iron levels or anemia



It's important to remember that you will have frequent follow-up visits and tests to assess how you are doing.

## My Test or Lab Results

Use this space to write down recent test results and what they mean:

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# ▶ WHAT TO EXPECT FOR THE FIRST 6+ MONTHS

## MEDICAL FOLLOW UP

### ▶ Living with Heart Failure Diagnosis

#### ○ One to three months after

- The focus centers mostly on getting on the right combination of heart failure medicines
- Blood tests to check and adjust medications usually happen every two to three weeks in the beginning
- Referral to other experts – sleep specialist, counselor, social worker, dietitian or nutritionist
- Start cardiac rehabilitation, if eligible, 6 weeks after being in the hospital or after being on medical therapy
- Review eating and physical activity habits

#### ○ ~3-6 months after

- Consider having a device placed based on latest echocardiogram
- Repeat echocardiogram or other imaging tests to look at the heart

ONGOING

- Listen to your body — Keep an eye on how you're doing by tracking your weight, symptoms, limits on function, adopting lifestyle changes
- Learn about heart failure — what it means and what is needed to manage it well
- Take your medications
- Ongoing coordination with other health care professionals and management of other conditions
- Address other treatable heart failure risk factors

### ▶ When to Call

Call your health care team at any point if you notice any of these symptoms:

- Chest pain
- Dizziness or fainting
- Feeling especially drained or tired
- Swelling in legs, ankles, hands or abdomen
- Gaining 3 or more pounds in one day or 5 or more pounds in a week
- New or worsening shortness of breath
- Difficulty breathing when lying flat
- Long-lasting cough
- Noticing your heart skipping beats

Everyone's heart failure journey is different. This "road" may not be true for everyone with HFrEF.

# WHAT TO EXPECT FOR THE FIRST 6+ MONTHS

## EMOTIONAL JOURNEY

**Having heart failure is a journey. ...  
And you need to take one step at a time.**

**Right after being diagnosed you may:**

- Be flooded with emotions — some expected, some not
- Have fear and uncertainty about the future
- Feel guilty, possibly relieved

"How do I tell my family?"  
"Am I going to die?"  
"Will I be there for my children?"  
"Where do I go from here?"  
"What caused it? Could I have done something to prevent this?"

"Utter shock and disbelief"  
"Like getting hit with a brick"  
"How do I get through this?"  
"You cry about it."

**Next, you may find yourself trying to adjust and learning new skills**

- Controlling negative thoughts and focusing on what I can do
- Getting used to the sheer number of medications, and taking time to adjust to them
- Learning how to eat a low-salt diet, especially when traveling or being out socially
- Learning how to be more in tune with my body, coping with being so tired
- Seeking out and talking to other people living with heart failure can be helpful
- Helping my family understand that my heart failure couldn't be fixed with a band-aid
- Coping with depression

"Acceptance is the hardest part."

**Accepting my "new normal" and the challenges that come with it**

- Celebrate small successes
- Understand there will be good days and bad
- Treatments that work today may not always, and my goals may change over time
- Wanting to be seen as a person with life to live and not the disease

"It took time to get my head around the enormity of the situation."  
"I'm not alone in this."  
"I try to remember every day is a gift."

# ▶ WHAT TO EXPECT FOR THE FIRST 6+ MONTHS

## EMOTIONAL JOURNEY (CONTINUED)

### ▶ My Emotions

In the first month or two	
Between 3-6 months	
After 6 months	

What might help me feel better supported?

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Things I may need:

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Other notes:

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**TIP**

**Find Support** — Talking to someone else who has heart failure and can share tips and advice can be very helpful. Visit [CardioSmart.org](https://www.CardioSmart.org) for a list to get started. [CardioSmart.org/Connect/Community-Peer-Support](https://www.CardioSmart.org/Connect/Community-Peer-Support)

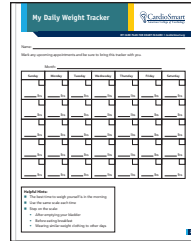
# ▶ MY WORKSHEETS AND RESOURCES TO HELP

The American College of Cardiology has developed a number of downloadable worksheets and tools designed to help you track how you are doing and facilitate discussions with your care team. In addition, [CardioSmart.org](http://CardioSmart.org), our patient education website, has a wealth of resources.



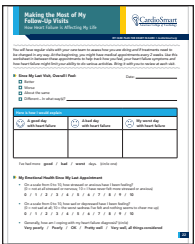
## My Heart Failure Checklist

Steps you can take to best manage heart failure



## My Daily Weight Tracker

Write down how much you weigh each morning on this calendar.

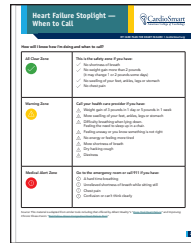


## Making the Most of My Follow-Up Visits

Log your heart failure symptoms and how often they occur. Keep tabs on how heart failure affects your ability to take part in activities.



## Heart Failure Medicine Tips



## Heart Failure Spotlight Tool

### ▶ At [CardioSmart.org](http://CardioSmart.org):

- To learn more about heart failure, go to the expanding heart failure hub on [CardioSmart.org/HeartFailure](http://CardioSmart.org/HeartFailure)
- To find peer support [CardioSmart.org/Connect/Community-Peer-Support](http://CardioSmart.org/Connect/Community-Peer-Support)
- To learn more about the medications, go to the medications page on [CardioSmart.org/Meds](http://CardioSmart.org/Meds)
- Resources to help pay for my medication [CardioSmart.org/Drugs-and-Treatments/Drug-Costs-Support](http://CardioSmart.org/Drugs-and-Treatments/Drug-Costs-Support)
- Resources to help adopt heart-health habits [CardioSmart.org/Heart-Conditions/Heart-Failure/Content/HFGuide](http://CardioSmart.org/Heart-Conditions/Heart-Failure/Content/HFGuide)

*CardioSmart is sponsored in part by Novartis Pharmaceuticals Corporation.*

# My Heart Failure Checklist

Here are steps that I can take to best manage my heart failure:



- Listen to my body and check for signs that my heart failure might be getting worse:** [How Heart Failure Affects My Life](#)
  - Swelling in my feet, legs, ankles or stomach
  - Sudden weight gain
  - Needing to sit in a chair or to prop myself up with pillows to be able to sleep, breathe more easily
  - Feeling winded even with small bouts of activity

“Remember, heart failure is not something that gets treated and then fixed and part of your past. It’s a day-to-day, ongoing journey.” — *Person living with heart failure*



- Weigh myself on the same scale every morning before breakfast and write it down** [My Daily Weight Tracker](#)



- Eat foods low in salt (sodium)** [CardioSmart.org/Salt](http://CardioSmart.org/Salt)



- Take my medications as directed, set up reminders** and consider using a pill box to pre-sort medications; Remember that many medications need to be adjusted over time, and sometimes when I’m doing and feeling well. Always report any side effects or other concerns, including how to best juggle multiple medications and the cost. [CardioSmart.org/Meds](http://CardioSmart.org/Meds)



- Adopt heart healthy habits** such as getting regular exercise, eating well, not smoking and lowering stress



- Know my heart failure triggers** by being familiar with what makes my symptoms worse (for example, periods of stress, eating out, travel, alcohol, etc.) [How Heart Failure Affects My Life](#)



- Accept the need for frequent breaks** – because of the added strain on my heart, I may tire easily after periods of activity, travel, etc. Stay connected to the things I love to do, even if it means I need to participate in a different way or cut back a bit. It’s OK if daily tasks seem to take longer. [CardioSmart.org/Connect/Patient-Stories/Melissa-Cappuccilli](http://CardioSmart.org/Connect/Patient-Stories/Melissa-Cappuccilli)  
[CardioSmart.org/Connect/Patient-Stories/Roxanne-Watson](http://CardioSmart.org/Connect/Patient-Stories/Roxanne-Watson)



- Manage my other conditions**, including telling my care team about any feelings of continued sadness or anxiety and trouble sleeping or focusing



- Get a flu shot every year** to prevent illness and avoid complications. Ask if you need a pneumonia vaccine too.



- Find my village**, those positive people who will help to buoy my spirits and support and advocate for me when needed

# Making the Most of My Follow-Up Visits

## How Heart Failure is Affecting My Life






MY ACTION PLAN FOR HEART FAILURE • [CardioSmart.org](http://CardioSmart.org)

You will have regular visits with your care team to assess how you are doing and if treatments need to be changed in any way. At the beginning, you might have medical appointments every 2 weeks. Use this worksheet in between these appointments to help track how you feel, your heart failure symptoms and how heart failure might limit your ability to do various activities. Bring it with you to review at each visit.

### ▶ Since My Last Visit, Overall I Feel:

Date: \_\_\_\_\_

- Better
- Worse
- About the same
- Different – In what way(s)? \_\_\_\_\_

Here is how I would explain		
 A good day with heart failure	 A bad day with heart failure	 My worst day with heart failure

I've had more **good** / **bad** / **worst** days. (circle one)

### ▶ My Emotional Health Since My Last Appointment

- On a scale from 0 to 10, how stressed or anxious have I been feeling?  
(0 = not at all stressed or nervous; 10 = I have never felt more stressed or anxious)  
**0 / 1 / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10**
- On a scale from 0 to 10, how sad or depressed have I been feeling?  
(0 = not sad at all; 10 = the worst sadness I've felt and nothing seems to cheer me up)  
**0 / 1 / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10**
- Generally, how am I coping with my heart failure diagnosis? (circle)  
**Very poorly / Poorly / OK / Pretty well / Very well, all things considered**

### ▶ My Symptoms

Paying careful attention to what might signal heart failure is getting worse is essential to manage the disease. Doing so can help you stay out of the hospital and prevent other complications.

Since my last appointment, I feel or have had:	Not at all	Some-times	Often	Most of the time	All the time
Fatigued or very tired	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short of breath (when walking a block or more or climbing a flight of steps)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swelling in my feet, ankles or legs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swelling in my stomach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dry (unproductive cough)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Need to sleep sitting up or propped with pillows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waking up at night to sit up and breathe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 **Call 911 immediately for markedly worse or extreme shortness of breath, if you feel faint or collapse or if you have chest pain, pressure or discomfort**

### ▶ My Triggers

Many people living with heart failure have, over time, learned what can trigger a flare-up of their heart failure. For example, if they eat a big meal, don't take medications, travel or have too much alcohol. Make note of possible triggers and what you can do to avoid them.

I know certain things can cause my heart failure to get worse. These include:

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**▶ How My Heart Failure Limits What I Can Do**

Since my last appointment, I've noticed that my heart failure limits these activities or aspects of my daily life:	Not at all	Some-times	Often	Most of the time	All the time
Working (fulfilling job responsibilities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Showering or bathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking quickly or jogging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doing housework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hobbies, recreational activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being social	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Going out for meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staying emotionally health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thinking clearly or concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sleeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**▶ How I'm Doing with My ACTION Plan**

	What makes it hard	What seems to help
Taking my medications		
Limiting my sodium intake		
Weighing myself daily		
Exercising		
Making it to my medical visits or going for follow-up tests		
Other:		



# My Daily Weight Tracker



MY ACTION PLAN FOR HEART FAILURE • CardioSmart.org

Name: \_\_\_\_\_

Mark any upcoming appointments and be sure to bring this tracker with you.

Month: \_\_\_\_\_

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs	_____ lbs

### Helpful Hints:

- The best time to weigh yourself is in the morning
- Use the same scale each time
- Step on the scale:
  - After emptying your bladder
  - Before eating breakfast
  - Wearing similar weight clothing to other days

# Heart Failure Medicine Tips to Remember






- **Learn about your medications.** Be sure you understand why you are taking each medication, how each one works and possible side effects.
- **Always take your medications exactly as prescribed.** Do not skip a dose, stop or make changes to a medication without talking with your care team.
- **Know what to do if you miss a dose.** Talk with your health care team about what to do. In general, take a missed dose as soon as you remember; if it's very close to when you take the next dose, it's often recommended to skip the missed dose.
- **Come up with a consistent schedule for taking your medications.** For example, at a certain time of day and with food, if needed. Setting reminders with an alarm on your phone or using a pillbox can be helpful.
- **The dose or amount of the medication you start with may need to be adjusted over time – even when you are feeling good.** You will usually start with low doses to make sure your body can tolerate the medication. The amount will then be increased to what has been shown to be helpful to patients in clinical trials. These adjustments (called titrating) will be done little by little to see how you are feeling and whether you are having any side effects.

For example, when first starting a beta blocker, many people say they feel sluggish and tired, but over time people tend to feel better. Changes can often be made to help manage or avoid side effects, so it is important to check in.

- **Certain medications can make heart failure worse.** Some examples are nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Motrin or Advil) or naproxen (Aleve) and calcium channel blockers (verapamil or diltiazem). Certain antacids and cough medicines also have sodium.
- **Refill prescriptions before they run out.** Ask your pharmacist if you can:
  - Automate refills
  - Get all of your medications on roughly the same schedule to make reordering easier
- **Share any worries with your care team.** For example, about how and when you should take your medications, how to afford them or concerns about side effects.

# Heart Failure Stoplight — When to Call

## How will I know how I'm doing and when to call?

<p><b>All Clear Zone</b></p> 	<p><b>This is the safety zone if you have:</b></p> <ul style="list-style-type: none"> <li>✓ No shortness of breath</li> <li>✓ No weight gain more than 2 pounds (it may change 1 or 2 pounds some days)</li> <li>✓ No swelling of your feet, ankles, legs or stomach</li> <li>✓ No chest pain</li> </ul>
<p><b>Warning Zone</b></p> 	<p><b>Call your health care provider if you have:</b></p> <ul style="list-style-type: none"> <li>⚠ Weight gain of 3 pounds in 1 day or 5 pounds in 1 week</li> <li>⚠ More swelling of your feet, ankles, legs or stomach</li> <li>⚠ Difficulty breathing when lying down. Feeling the need to sleep up in a chair.</li> <li>⚠ Feeling uneasy or you know something is not right</li> <li>⚠ No energy or feeling more tired</li> <li>⚠ More shortness of breath</li> <li>⚠ Dry hacking cough</li> <li>⚠ Dizziness</li> </ul>
<p><b>Medical Alert Zone</b></p> 	<p><b>Go to the emergency room or call 911 if you have:</b></p> <ul style="list-style-type: none"> <li>⚠ A hard time breathing</li> <li>⚠ Unrelieved shortness of breath while sitting still</li> <li>⚠ Chest pain</li> <li>⚠ Confusion or can't think clearly</li> </ul>

Source: This material is adapted from similar tools including that offered by Alliant Quality's "[Zone Tool Heart Failure](#)" and Improving Chronic Illness Care's "[Red-Yellow-Green Congestive Heart Failure Tool](#)."