Questions to ask when you are having a HEART HEALTH CHECK

What is my risk of having a heart attack or stroke?
Chance of having a heart attack or stroke in the next 5 years:

- LOW RISK: <10%
- MODERATE RISK: 10-15%
- HIGH RISK: 15%

Talk to someone who is specially trained in heart health care to answer your questions.

Call our Helpline on 13 11 12.

What can I change about my lifestyle to reduce my risk?
How much physical activity should I be doing?

minutes/week

What is my ideal:
Weight: ________________ kg
BMI: ________________

What kinds of foods are heart healthy?

What are the best steps to take to quit smoking?

When is my next Heart Health Check due?

- 6 months
- 12 months
- 24 months

Date: ___ / ___ / ___
What are my risk factors for heart disease?

1. Blood Pressure
What is my blood pressure?
Current: ____________ / ____________ mmHg

What should my blood pressure be?
Systolic / Diastolic mmHg

How often should I have my blood pressure checked?

2. Cholesterol
What are my cholesterol levels?

<table>
<thead>
<tr>
<th>MY LEVELS</th>
<th>IDEAL LEVELS</th>
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<tbody>
<tr>
<td>TOTAL CHOLESTEROL (mmol/L)</td>
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<tr>
<td>HDL CHOLESTEROL ‘GOOD FATS’ (mmol/L)</td>
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<tr>
<td>LDL CHOLESTEROL ‘BAD FATS’ (mmol/L)</td>
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3. What are my other risk factors for heart disease?

How does diabetes affect my risk of heart disease?

How does my family history of heart disease affect my risk?

How does my cultural background affect my risk of heart disease?

If recommended, what do I need to know about my medication(s)?

BLOOD PRESSURE LOWERING MEDICINE
Name of medicine:
Strength:
How do I take this?
Common side effects:

CHOLESTEROL LOWERING MEDICINE
Name of medicine:
Strength:
How do I take this?
Common side effects:

Other notes: