

# "How is My Heart?"

## WOMEN'S HEART HEALTH AND RISK CHECKLIST \*



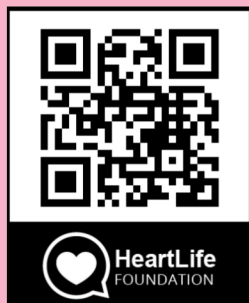
### WHAT YOU CAN EXPECT AT THE DOCTORS

- ✓ Blood pressure
- ✓ Heart rate / pulse
- ✓ Waist circumference
- ✓ Medication review
- ✓ Blood work and/or an EKG may be considered

### MEDICATIONS, VITAMINS AND OTHER

Bring with you a complete list of your prescription medications, vitamins, and other treatments you are using.

'Know Your Risk. Reduce your Risk' awareness campaign is sponsored by:



For more information: [LifeInHearts.ca](http://LifeInHearts.ca)

### ABOUT YOU

Age: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

### RISK FACTORS

Do you have high blood pressure? \_\_\_\_\_

Do you have high cholesterol? \_\_\_\_\_

Are you diabetic or pre-diabetic? \_\_\_\_\_

Have you been pregnant? \_\_\_\_\_

Have you been through menopause? \_\_\_\_\_

### LIFESTYLE BEHAVIOURS

Do you eat well? \_\_\_\_\_

Do you exercise regularly? \_\_\_\_\_

Do you smoke / vape / use cannabis? \_\_\_\_\_

Do you feel stress/anxiety sometimes? \_\_\_\_\_

Do you drink alcohol? \_\_\_\_\_

How is your sleep? \_\_\_\_\_

### FAMILY HISTORY

Does anyone in your family have diabetes? \_\_\_\_\_

Is there a family history of heart disease or stroke? \_\_\_\_\_

Anyone in your family have high blood pressure? \_\_\_\_\_

\*This checklist is meant to be used as a conversation starter between you and your doctor about your heart health and risk for developing heart disease. It is not intended as a medical diagnosis document. (ver 2.0 /2023)