

A Cardiac Education Manual





A message from the Physicians and Team Members of the TriHealth Heart Institute and Cardiovascular Service Line

Dear Patient,

Thank you for choosing the physicians and surgeons of the TriHealth Heart Institute for your care. Whether you are here suddenly and unexpectedly or after careful consideration of all your health care choices, we want you to know that you are in capable hands.

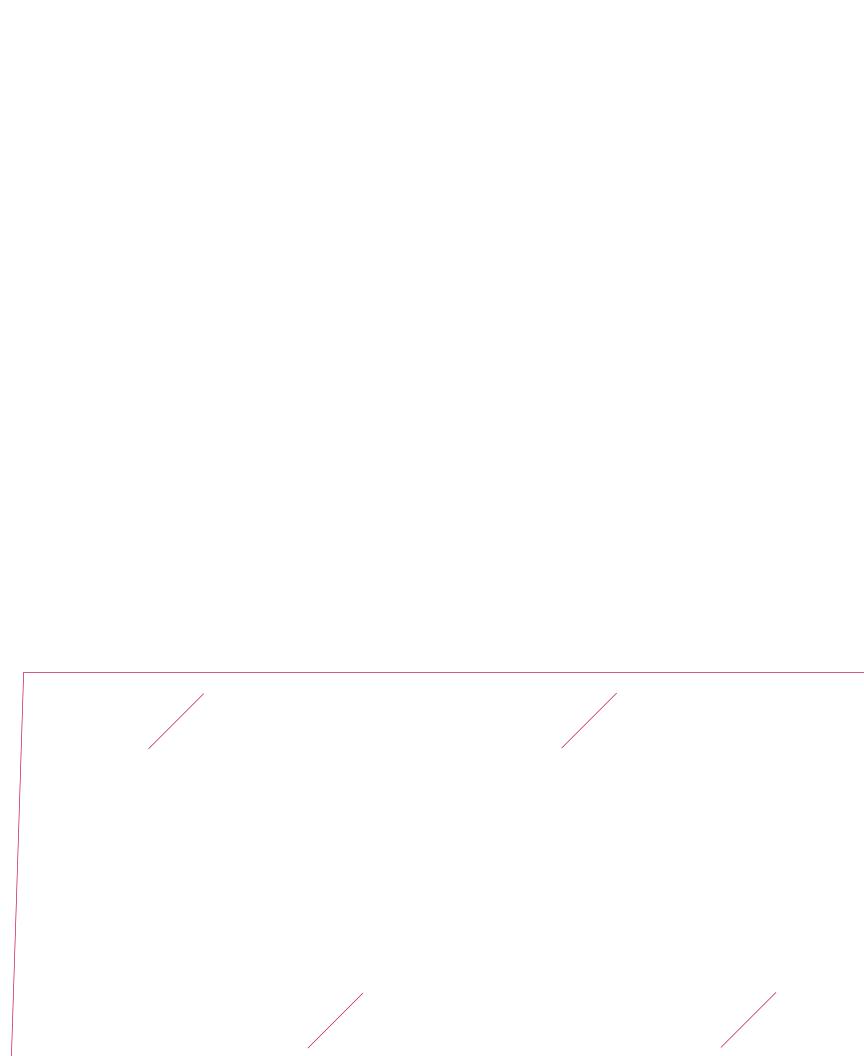
TriHealth Heart Institute was created to provide seamless, patient-centered care for heart patients. We're dedicated to offering the most up-to-date, minimally invasive treatment options. We have received national recognition for quality heart care and we participate in clinical trials to bring leading treatments and procedures to our patients. Our physicians work together across all disciplines to ensure that each patient gets the care and treatment that is best for them. In fact, our entire team is dedicated to providing quality care.

Our commitment to you is to do everything we can to help you return to good health. This book is a tool packed with information you need to get back on your feet as quickly as possible. Our team will work with you to get the most out of this book while you are here, and then we encourage you to take it home as an ongoing reference as you recover.

We wish you the best in your treatment and recovery, as we work together to help you live better.

Sincerely,

The Physicians and Team Members of the TriHealth Heart Institute and the Cardiovascular Service Line





TriHealth.com/heart

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Access to Cardiac Binder online with QR code



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In this section, you will learn how the heart works and the important role played by the coronary arteries, valves and electrical system of the heart. You also will receive some basic information about irregular heartbeats, coronary artery disease, angina (chest pain) and heart attacks.

How the Heart Works

The heart is a muscle about the size of your fist. Its job is to pump blood to all parts of the body.

The heart is made up of four chambers that hold and pump blood. The top two chambers are the right atrium and left atrium. The atria collect blood returning to the heart from the veins. The atria then release the blood into the bottom chambers through valves. Heart valves act as one-way doors to separate the chambers and keep the blood moving forward.

The bottom two chambers are called the right ventricle and left ventricle. A wall (septum) separates the two right chambers from the two left chambers. Because of this, you may hear your heart described as two pumps, the "right heart" and the "left heart." When the ventricles contract, they force blood out of the heart to different parts of the body.

The heart is surrounded by a tough protective sac called the pericardium.

Valve Conditions

There are four heart valves that act as one-way doors to keep blood moving in the right direction through the heart. Valve disease occurs when a valve doesn't work the way it should. If a valve doesn't close all the way, blood may leak backward. This is called regurgitation or insufficiency. If a valve doesn't open all the way, less blood moves through the opening. This is called stenosis. Valve problems cause the heart to work harder to pump the same amount of blood. Fluid may back up in the lungs or body and can cause swelling, shortness of breath and dizziness.

Septal Defects

The atrial septum is a wall of tissue that separates the upper chambers of the heart. An atrial septal defect (ASD) is a hole or opening in this wall that fails to close during the body's development before birth.

The ventricular septum divides the two lower chambers (ventricles) of the heart. A ventricular septal defect (VSD) is an opening that can be caused by a birth defect or by an extensive heart attack.

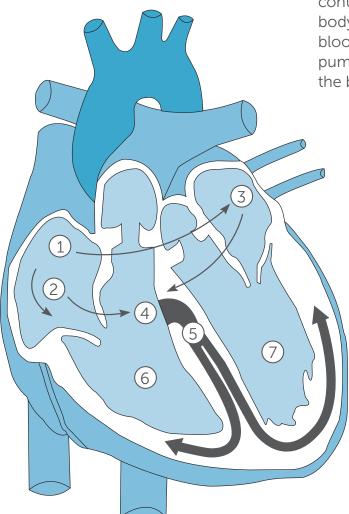
If the hole in the septum is large enough to increase the risk of bacterial infection or cause problems in pressure between two heart chambers, surgery may be needed. During surgery, the hole is covered by a patch or simply closed by sewing the edges of the opening together.

In an average lifetime, the heart beats more than two and a half billion times. The fist-sized organ beats 100,000 times per day, pumping five or six quarts of blood each minute or about 2,000 gallons per day.

An electrical signal starts in the sinus node (#1) which is located in the right atrium. The sinus node tells the upper pumping chambers of the heart (atria) when and how fast to pump. It is the "pacemaker" of the heart.

The Heart's Electrical System

The heart's pumping action is controlled by an electrical system that carries impulses, or signals which causes the pumping chambers of the heart to contract. The signal travels through the right (#2) and left (#3) atria, then to the AV node (#4) in the middle of the heart. The AV node holds the signal briefly until the lower pumping chambers of the heart (ventricles) are filled with blood. The signal then travels through the right and left bundles (#5), distributing the signal to the right (#6) and left (#7) ventricles, which contract to pump the blood out to the body. The right ventricle pumps the blue blood to the lungs, while the left ventricle pumps oxygenated blood to the rest of the body.



The Heart's Electrical Pathway

- 1. Sinus node
- 2. Right atrium
- 3. Left atrium
- 4. AV node
- 5. Right and left bundles
- 6. Right ventricle
- 7. Left ventricle

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& Vascular Institute

Irregular Heartbeat (Cardiac Arrhythmia)

Irregular heartbeat, or cardiac arrhythmia, is a problem with your heart rhythm. The heart may beat too fast or too slow, or may skip beats. You may feel palpitations, a rapid heart rate, skipped beats, thumping or pounding in your chest. Cardiac arrhythmias may make you feel anxious, nervous, dizzy, faint or short of breath.

Ventricular Fibrillation (V-fib)

Ventricular fibrillation, or V-fib, is a lifethreatening arrhythmia that can be triggered by a heart attack or damage to your heart. Without emergent treatment, it is fatal. If you are at risk for V-fib, your doctor may recommend an internal cardiac defibrillator (ICD) and/or medication.

Atrial Fibrillation (A-fib)

Atrial fibrillation, or A-fib, is a common problem that is rarely life-threatening. With A-fib, the upper chambers (atria) beat fast and irregularly. About 33 million people suffer from A-fib. One in four adults over age 40 will develop A-fib in their lifetime. People with A-fib are five times more likely to suffer a stroke.

Four Levels of Atrial Fibrillation

According to the Heart Rhythm Society

- 1. **Paroxysmal:** Recurrent A-fib (greater than two episodes) that ends within seven days.
- 2. **Persistent:** A-fib that is sustained more than seven days.
- 3. **Longstanding Persistent:** Continuous A-fib of more than one year duration.
- 4. Permanent: A-fib for which the

decision has been made not to try to restore sinus rhythm.

Risk Factors of Atrial Fibrillation

- · Coronary artery disease
- · High blood pressure
- Advanced age
- Sleep apnea
- Family history
- Binge drinking drinking 4-5 drinks in 2 hours

Symptoms of Atrial Fibrillation

Sometimes people with A-fib have no symptoms. Others may feel one or more of the following symptoms:

- Palpitations a feeling of racing heartbeat
- Weakness
- Reduced ability to exercise
- Fatigue
- Lightheadedness
- Dizziness
- Confusion
- · Shortness of breath
- Chest pain

Coronary Arteries

The coronary arteries lie on the outside surface of the heart. The right coronary artery (RCA) supplies blood to the right side of the heart. The left coronary artery starts as the left main artery and divides into the left anterior descending (LAD) and circumflex (Cx) arteries. The left coronary artery supplies blood to the left side of the heart. Coronary arteries are about the size of cooked spaghetti. Many smaller branches lead from these main arteries. The heart gets its blood supply from the coronary arteries. Blood is pumped from

the left ventricle into the aorta, a large artery coming off the left ventricle. The aorta supplies blood to the arteries of the heart as well as to the rest of the body.

Problems occur if the left ventricle is damaged and cannot pump enough blood to the coronary arteries. If blockages in the coronary arteries prevent blood from flowing smoothly, the heart muscle may not receive enough oxygen and nutrients to pump blood as it should.

Coronary Artery Disease

The inside of a coronary artery has a smooth lining through which blood easily flows. Coronary artery disease starts when the lining of the coronary artery is damaged. This often is due to a risk factor, such as smoking, obesity, elevated total or LDL cholesterol, hypertension or diabetes. A plaque deposit (a fatty material composed of cholesterol and other abnormal cells) forms between layers of the artery wall. This buildup, called atherosclerosis, causes the arteries to become stiff and slows the flow of blood

to the heart muscle. Over time, buildup of stable plaque can clog the artery and cause a partial or total blockage.

Another way a coronary artery blockage can occur is when a plaque deposit becomes inflamed and unstable and actually ruptures inside the artery (see illustration below). A rupture can narrow the artery even more and can cause a blood clot to form. If the blood clot is large enough, it will cut off blood flow immediately, and severe chest pain or a heart attack will result. If the heart muscle does not receive enough blood and oxygen, it is called ischemia. A symptom of ischemia is chest pain, called angina.

Angina

Angina is not a disease but a symptom of heart trouble. It is a pain or discomfort that happens when part of the heart muscle is not getting enough blood. It is usually brief, lasting just a few minutes.

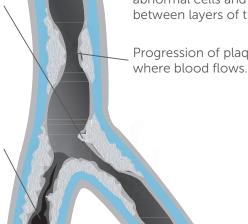
Plaque deposits can sometimes rupture if they become inflamed or unstable.

A rupture can cause a blood clot to form in the narrowed area.

Plaque formation occurs when the lining of the artery becomes damaged and allows abnormal cells and fatty deposits to form between layers of the artery wall.

Progression of plaque narrows the channel

A blood clot (thrombus) can block the artery's flow of blood, causing severe pain and a heart attack.





You may have pressure, tightness or pain in your chest, arms, shoulder, neck, jaw, upper back, or have stomach indigestion.

Angina discomfort often is temporary. It usually occurs during physical activity, after eating a heavy meal, after being outside when the temperature is below 32° F or above 80° F, or during emotional situations.

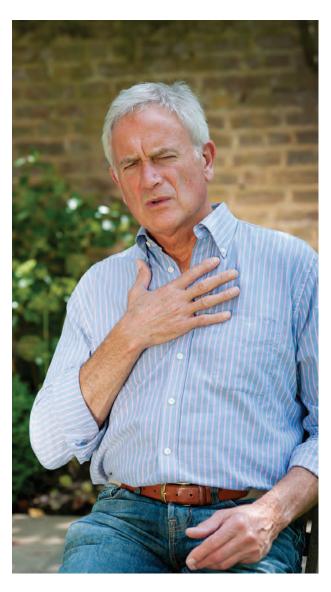
When Angina Occurs

- Stop the activity. This is a sign your heart is not getting enough oxygen.
- Sit down and rest.
- If the pain does not go away in one to two minutes, place a nitroglycerin tablet under your tongue.
- If the pain does not go away in five minutes, take another nitroglycerin.
- If the pain still doesn't go away, call 9-1-1, take another nitroglycerin, and one uncoated aspirin. The aspirin acts as a blood thinner.
- We only have hours to stop a heart attack before there is damage to your heart.

Ways to Avoid Angina

- Eat small, frequent meals.
- Avoid heavy exercise or physical activity for one hour after eating.
- Check your heart rate during activity and do not exceed 20 beats above your resting heart rate.

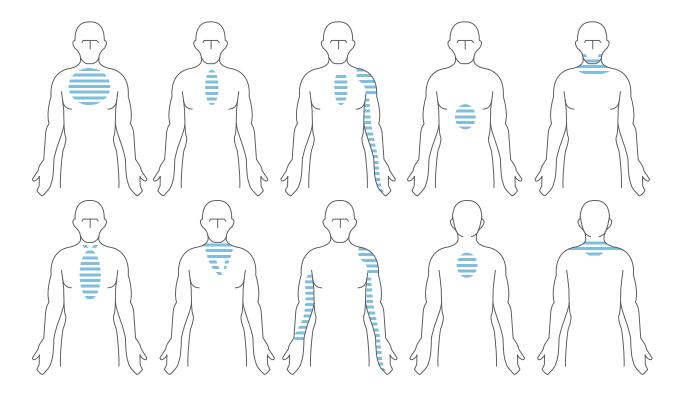
- Do not stay out for long periods in very hot or very cold temperatures (above 80° F, below 32° F), or in high humidity.
- Avoid hot tubs and saunas.
- Manage stress.
- Take your medications as prescribed by your doctor.



Warning Signs

Angina	Heart Attack
Symptoms occur with activity or exercise and stop with rest	Symptoms may occur with or without activity and do not stop with rest
Chest tightness, pressure, burning—with or without pain—may go to arms or back	Chest tightness, pressure, burning— with or without pain—may go to arms or back
Shortness of breath, extreme tiredness, dizziness, nausea, sweating, heartburn	Shortness of breath, extreme tiredness, dizziness, nausea, sweating, heartburn

Where Angina Discomfort Can Occur



Heart Attack (Acute Myocardial Infarction)

A heart attack occurs when a blood vessel (coronary artery) that feeds the heart becomes blocked and cuts off blood flow to the heart muscle (myocardium). This blockage can occur from either fatty deposits (plaque), a spasm in the blood vessel or a clot.

A heart attack damages the heart muscle. The damage may be slight or extensive, depending on which blood vessel was blocked and how long the blood flow was cut off to the muscle.

Your doctor may recommend additional lab work and cardiac testing to determine if further treatment is needed. Your doctor also will prescribe medicines to help reduce your heart's workload, in order to help the arteries heal and to improve blood flow.

Most patients will have a cardiac catheterization to determine which artery is blocked and the best treatment options. These options include: angioplasty, stent placement, open heart surgery, and valve procedures.

During your hospital stay, your health care team will monitor you closely, watching for any complications. If they occur, it is usually within a few days after a heart attack.

Common Complications

- · Heart rhythm problems
- Heart pumping problems or heart failure
- Inflammation or swelling around the heart (pericarditis)

The heart muscle heals slowly. Scar tissue forms where the heart muscle fibers were damaged and this new tissue may not contract as well as the original tissue. The healthy heart muscle near the scarred area has to work harder. Over time, tiny new blood vessels can grow from the nearby arteries to carry blood to and around the damaged muscle. These little "natural bypasses" are called collateral circulation.



Notes:



Treatment for coronary artery disease and blockages has improved greatly in recent decades, allowing for faster recoveries and longer-lasting results. The goal of these procedures is to detect and re-open blocked arteries before a lack of blood flow can cause permanent damage to the heart muscle. The primary diagnostic procedure is a cardiac catheterization, also called an angiogram.

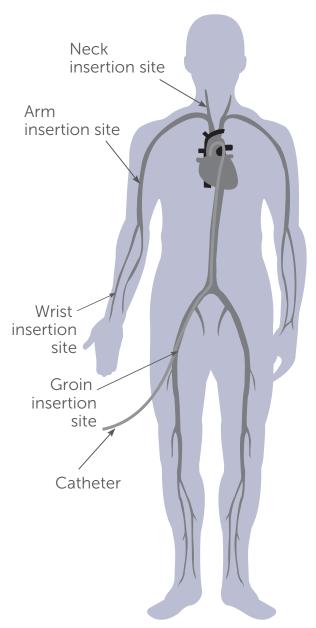
Cardiac Catheterization

During a cardiac catheterization (coronary angiogram) a catheter (a soft, hollow tube) is threaded up to the heart through an artery in your leg or arm. Dye is injected through the catheter which allows the arteries, and blockages to be seen on X-ray pictures.

The doctor also will be able to measure pressures inside your heart, how well the valves of your heart are working, and how well the muscle of your heart contracts (pumps).

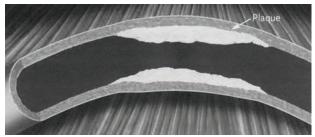
If your coronary arteries are normal, or the doctor determines the blockages are not significant, you will not need any further procedures.

If blockages are found, your doctor may recommend that you have an angioplasty or a stent placed to open the blockages. These procedures often can be done at the time of the angiogram. The doctor also may recommend coronary artery bypass surgery and/or medical treatment for the blockages found.



Balloon Angioplasty

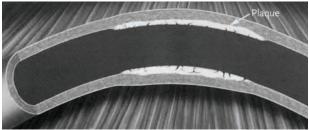
Angioplasty is a procedure using a catheter (a hollow tube) with a balloon on it to open a blockage or narrowing of a coronary artery. The procedure is also called percutaneous transluminal coronary angioplasty (PTCA). The procedure takes about 30 to 90 minutes.



Narrowing of the artery before balloon angioplasty



Balloon is inflated



Artery is opened for better blood flow

@ Medtronic

Angioplasty often can be done while you are in the catheterization room for your cardiac catheterization. Your doctor replaces the diagnostic catheter with a different catheter with a balloon on it. The balloon is placed in the center of

the blockage and inflated to press fatty deposits (plaque) against the wall of the artery. This opens the artery and allows for better blood flow to the heart muscle. Once the artery is opened, the balloon is removed.

Coronary Stent Implant

A coronary stent is an expandable, slotted metal tube that is inserted into a coronary artery. It looks much like a ball-point pen spring. The purpose of the stent is to keep the artery open.

There are two types of stents: Bare metal stents and Drug-eluting stents. Drug-eluting stents have a drug coating that is time-released to help prevent thickening and re-blockage (called restenosis) in the artery walls. Your doctor will determine which type of stent is appropriate for you.



Stent with balloon inflated



Stent is implanted and balloon is withdrawn

@Medtronic

The hollow stent is mounted on a balloon catheter, and inserted into the

coronary artery at the blockage. The balloon is then inflated and the stent is expanded to press into the wall of the artery. One or more stents may be used, depending on the length of the blocked areas.

Your body will eventually coat the stent with a new tissue lining, making it part of you. Until this happens you need to take an anti-platelet medicine. These medicines prevent too much build-up of tissue on the inside of your new stent. If the anti-platelet medicine is stopped, there is a very high risk of the blockage reforming, causing a heart attack. Never stop these medicines without talking with your doctor who ordered them.

Supplementary Procedures

The following are heart procedures that may be used in select cases with angioplasty or stents to improve results.

Angiojet

An angiojet is a device to remove a blood clot from a coronary artery during a heart attack or after angioplasty. A catheter with tiny holes at the tip is placed at the area of a blood clot, and the clot is pulled back. An angioplasty or a stent procedure usually goes along with this procedure.

Rotoblator

A rotoblator is a device used to open blocked arteries. The rotoblator has a high-speed, rotating shaver that removes and grinds up plaque from the inside walls on an artery.

Cutting Balloon

A cutting balloon is a device used on blockages that are resistant to traditional balloon angioplasty. This catheter has a balloon and cutters at the tip that allows your doctor to make several small cuts in the plaque. This helps to reduce the plaque and injury to the blood vessel during the angioplasty.

Filterwire

A filterwire is a device that may be used during an angioplasty or stent procedure of a coronary bypass graft. The catheter is placed below the blockage, and a small hoop is opened at the end of the catheter to hold and remove debris that may come loose during an angioplasty or stent procedure.

IVUS (Intravascular Ultrasound)

An IVUS is a diagnostic tool used to determine the extent of the blockage in the coronary artery. A catheter is advanced to the area of blockage, and pictures are taken and then measured to help the doctor determine if angioplasty or a stent procedure should be performed.

Pressure Wire

A pressure wire may be used during an angiogram. It helps to determine the severity of blood flow blockages in the coronary arteries by performing an internal stress test. The wire helps the doctor identify if the blockage needs an angioplasty or stent.

Laser Technology

Laser technology uses a precise cutting tool to open total blockages in the arteries of the heart or legs.

Sometimes a blockage can grow to the extent that it will totally block the artery, allowing absolutely no blood to flow through the artery. Over time, the blockage becomes hard, which prevents the doctors from passing anything, such as a balloon catheter, through the blockage. In order to unclog the artery, the doctor uses a laser to cut a tiny hole through the blockage. This will allow the doctor to pass the thin wire through the blockage and unclog the artery using a balloon and/or stent.

After Your Angioplasty or Stent Procedure

After your procedure you should rest. If your procedure is done as an out-patient, make sure someone is able to stay with you for the first 24 hours.

- No driving or drinking alcohol for the first 24 hours.
- Don't take Metformin for 48 hours after your procedure.
- Drink plenty of fluids for 48 hours after your procedure. The dye used can be harmful to your kidneys and this will help flush out the dye.
- You may shower after the dressing is off. Let the soapy water run over site, do not scrub

- Do not submerge the procedure site in water for four days, (tub baths, hot tubs, swimming pool).
- If excessive bruising, swelling, pain or signs of infection (redness, drainage, warm to touch or fever) occurs, call your doctor.
- If active bleeding occurs, apply very firm pressure to site and call 911.

Care for Radial (Wrist) Procedure Sites

- Avoid bending wrist for 24 hours.
- Remove arm board and dressing after 24 hours. Leave it open to air.
- No lifting greater than 5 pounds for four days (1/2 gallon of milk).

Care for Femoral (Groin) Procedure Sites

- No lifting greater than 10 pounds for one week (gallon of milk).
- Limit steps, fast walking, bending, squatting, and siting with leg bent for extended periods of time for two days.



Medications

You should take the following medications. Your nurse will check the ones that apply to you.

- It is normal to have increased bruising while on these medicines. Please speak with your doctor if you are concerned or have any unexpected bleeding, bruising or blood in your feces or urine.
- You should never stop taking any of these medicines without talking to your cardiologist first.

Clopidogrel (Plavix)		
75 mg once a day	☐ for 12 months	☐ for months
Ticagrelor (Brilinta)		
90 mg twice a day	☐ for 12 months	☐ for months
Prasugrel (Effient)		
5 mg once a day 10 mg once a day	☐ for 12 months ☐ for 12 months	☐ for months ☐ for months
AND Aspirin		
81 mg once a day 325 mg once a day	□ lifelong □ lifelong	

Managing Your Care at Home

The healing process has begun. Your goals for the first two weeks are to follow the instructions given to you at discharge. Walk daily as prescribed and relax. Your body is healing, so you may feel more tired than usual.

Listen to your body. If you have family or friends, let them help you. Continue to remain active but keep the activities light and enjoyable. Your doctor will tell you when it is okay to increase the level of activity.

Your cardiologist will determine when you can return to work and other activities (such as playing golf). Please speak to your doctor about when you may return to work before you leave the hospital.

You will be given a prescription for cardiac rehabilitation. Cardiac rehabilitation is the best way to ensure your recovery and that your life is long and healthy.

It is common for you and your close family and friends to feel a wide range of emotions after experiencing a heart attack. At times, you may find yourself feeling tearful and depressed or you may feel overwhelmed with thankfulness and gratitude. Other common feelings are anger with yourself and those closest to

you, discouragement when you don't think you are improving as fast as you should or scared that it will happen again. Express your feelings. Sharing with others can make the road to recovery a lot less bumpy.

Returning to sexual activity may be a concern of yours. You may not feel any desire for sexual activity at first or you may worry it will trigger another heart attack. Ask your doctor when you can return to sexual activity. In most cases, you can resume when you are able to climb two flights of stairs without chest pain, shortness of breath or an irregular heart rate. Meanwhile, showing affection with hugs, caresses and kisses is a good way to get back in touch with your partner.



You can make lifestyle choices that will help your heart to be stronger and healthier. The following pages will help you to evaluate your controllable risk factors and to take steps to reduce those risk factors in your life. You also will learn about our Cardiac Rehabilitation program, which is designed to put you back on the path to recovery and wellness.

Risk Factor Assessment

Risk factors are those things that helped create your heart disease. You cannot change risk factors such as age, sex, heredity and race. There are risk factors that you can change, however. Making changes to reduce these risk factors can help keep your heart problem from getting worse.

Do you currently use tobacco (smoke, chew or dip)?	NO	YES	packs per day x years					
Is your LDL greater than 55, or HDL less than 40 for men and 50 for women, or triglycerides over 150?	NO	YES	Total Triglycerides LDL HDL					
Have you ever been told you had high blood pressure?	NO	YES						
Do you exercise less than 30 minutes a day, three times a week?	NO	YES	Frequency Does it make you sweat? Type					
Do you have diabetes or central obesity?	NO	YES						
Do you have a family history of heart disease, age 55 or younger?	NO	YES	Family member(s)					
Are you overweight?	NO	YES	Height Weight Body Mass Index (see instructions on page 21)					
How would you rank your daily stress level?	NO	YES	Low High 1 2 3 4 5					
Do you drink alcohol?	NO	YES	How many drinks/week?					
Do you have chronic depression?	NO	YES						

The more times you answered YES, the higher your risk for heart disease.



Reducing Risk Factors

Take charge of controllable risk factors:

- Stop tobacco use
- Reduce high cholesterol
- Control high blood pressure
- Manage diabetes and central obesity
- · Lose excess weight
- Exercise
- Manage stress
- Limit alcohol intake
- Seek help for depression

The American Heart Association website is an excellent resource to help you to identify and take action against your risk factors. Visit mylifecheck.org.

Stop Tobacco Use

Tobacco use (cigarette, e-cigarette, vaping, cigar and pipe smoking, snuff and chewing tobacco) is the number one preventable risk factor for heart disease. Quitting is the best thing you can do for your overall health, the health of your arteries, and the health of your family.

Harmful Effects of Tobacco Use

- Damages the lining of the coronary arteries, making blockages worse.
- Nicotine causes heart rate and blood pressure to rise and increases risk of blood clots.
- Decreases the amount of oxygen reaching the heart muscle, making your heart work harder.
- Decreases longevity by 13 to 14 years.
- Decreases the ability to exercise.

- Decreases HDL which is your good cholesterol.
- Can cause cancer, chronic bronchitis, asthma, and emphysema.

Tips for Quitting

- Make a firm decision to quit and decide on a date you will quit. Mark it on the calendar and tell people you have quit.
- Find a buddy or friend who will quit with you.
- Make a list of the reasons why you are quitting. Read the list when you feel like smoking.
- Identify daily routines that trigger your desire to light up (drinking coffee, driving to work, stressful situations, being around others who smoke). Be creative and develop new routines.
- Substitute healthy alternatives to smoking, such as carrots or celery sticks, brushing your teeth, or a drink of flavored water when you feel the urge to smoke.
- Exercise as an alternative to smoking.
- Reward yourself with the money you save. The average person spends between \$500- \$3,000 per year on nicotine.

Cessation Aids

- Nicotine replacement therapies, such as nicotine patches, lozenges, gum, spray and inhalers. Most can be found over the counter at your drugstore. It is important not to use tobacco products when using these aids. Limit use to a few months.
- 2. Non-nicotine medicine that requires a prescription from your doctor:



- Buproprion hydrochloride (Wellbutrin): It is an antidepressant that reduces withdrawal symptoms and the urge to smoke.
- Varenicline (Chantix): It targets nicotine receptors in the brain and blocks nicotine from reaching them, which reduces the urge to smoke.
- 3. Alternative therapies such as hypnosis, acupuncture, relaxation techniques and tobacco-cessation classes for behavioral change.

You may feel discomfort and withdrawal symptoms as your body rids itself of nicotine. The symptoms will pass in three to five days. Cravings may last longer, so stay active to distract yourself and overcome them. Even if you've tried to quit before, don't give up. Take one day at a time. Many smokers try quitting four to five times before they succeed.

What Happens After You Quit Smoking?

20 minutes

- Blood pressure decreases
- Pulse rate decreases
- Circulation to the hands and feet improve

12 hours

- Carbon monoxide level in blood decreases
- Oxygen level in blood improves

2 weeks to 3 months

- Circulation improves
- Walking becomes easier

Lung function increases up to 30 percent

1 to 9 months

- Coughing, sinus congestion, fatigue and shortness of breath decrease
- Cilia (fine, cleaning hairs) regain normal function in the lungs, increasing their ability to handle mucus, clean the lungs and reduce infection

1 year

 Risk of coronary heart disease is half that of a smoker

5 years

- Risk of cancer of the mouth, throat, esophagus, and bladder is cut in half
- Risk of cervical cancer and stroke return to that of a non-smoker

10 years

- Risk of dying from lung cancer is about half that of a person who is still smoking
- Risk of cancer of the larynx and pancreas decreases

15 years

 Risk of coronary heart disease is reduced to that of a non-smoker

Sources: American Cancer Society; Centers for Disease Control

All benefits are lost by smoking just one cigarette a day, according to the American Cancer Society.

Smoking Cessation Programs/ Resources

Ohio Tobacco Quit-line 1-800-Quit-Now (1 800 784 8669)

TriHealth Integrative Health and Medicine TriHealth Fitness Pavilion 6200 Pfeiffer Road, 513 985 6736

Many additional resources are available through the American Lung Association and American Cancer Society's websites.

Reduce High Cholesterol

High blood cholesterol is also a major risk factor that causes heart disease. Cholesterol can build up in the coronary arteries and cause blockages. The best ways to lower your cholesterol levels are to lower the amount of fat in your diet, exercise on a regular basis and take your medicines as prescribed. Reducing your cholesterol is one of the most controllable risk factors.

Cholesterol is a natural fat-like substance made in the liver. Your body makes 75 percent of the cholesterol it needs, so it doesn't require much from what you eat.

There are two types of cholesterol: HDL (high-density lipoprotein), also known as "good cholesterol" and LDL (low-density lipoprotein) also known as "bad cholesterol."

HDL helps remove bad cholesterol from your blood, helps your body to heal when injured or damaged and helps prevent plaque from building up on the inside walls of your arteries.

LDL is the big ingredient in plaque formation in your arteries. This build-up is what contributes to the blockages or narrowing on the inside of your arteries.

Methods to Increase HDL and Lower LDL and Triglycerides

- 1. Stop tobacco use
- 2. Lose weight
- 3. Exercise regularly
- 4. Manage stress
- 5. Eat a heart-healthy diet
- 6. Take medicines as ordered by your doctor

Control High Blood Pressure (Hypertension)

About 78 million Americans have high blood pressure. Many people do not know that they have high blood pressure because there are usually no symptoms. That's why hypertension (high blood pressure) is called the "silent killer." Untreated high blood pressure can lead to coronary artery disease (CAD), stroke, heart attack, heart failure, kidney failure, blindness and other medical problems.

Blood pressure is measured in numbers and represents the force of the blood pushing against the artery wall when the heart squeezes (systolic) and when the heart relaxes (diastolic).



Blood Pressure	Meaning
120/80 or less	Normal
120-129/80	Elevated
130-139/80-89	Hypertension stage 1
140/90	Hypertension stage 2
180/120 or higher	Hypertensive crisis

If your blood pressure is 180/120 or higher, you need immediate medical attention. A person with diabetes should have a blood pressure under 120/80.

Many of the steps to help lower your blood pressure can also help improve your total health. Here are some things you can do to help lower your blood pressure.

- Stop tobacco use and avoid secondhand smoke.
- Exercise 30 minutes a day.
- Eat healthy foods and limit the amount of salt you eat.
- Control your weight—losing as little as 10 to 20 pounds can help lower your blood pressure.
- Limit alcohol to one to two servings per day.
- Limit caffeine to one to two cups per day.
- Take your medicine at the same time every day.
- Seek diagnosis and treatment for sleep apnea; sleep apnea increases your risk of heart disease.

Manage Diabetes

Diabetes is a disease in which you have too much sugar in your blood (hyperglycemia). It is a lifelong disease that can lead to serious health problems.

Normally, insulin moves sugar from food into the cells. The cells use the sugar for energy. The lack of insulin or the lack of normal response to insulin causes sugar to build up in the blood. The cells are unable to use the sugar for energy. You may be able to control your blood sugar with diet and exercise. As diabetes progresses, some people may need to add pills or insulin shots to control their sugar.

Diabetes is diagnosed when blood sugar levels are too high. Your blood sugar level may be checked by one or more of the following blood tests:

- A fasting blood glucose test with blood sugar above 126 mg/dL
- A random blood glucose test with blood sugar above 200 mg/dL
- A hemoglobin A1c blood glucose test 6.5% or above (5.7% to 6.4% is considered prediabetes)

High blood sugar damages the walls of the artery and narrows the pathway of blood flow. Heart disease may then occur, as well as damage to many other organs including the brain and kidneys. With proper care of your disease you can greatly reduce the risk of these health problems.

Outpatient Diabetes Resources

There are many diabetic resources available to you to assist you in managing your diabetes as an outpatient. These Include:

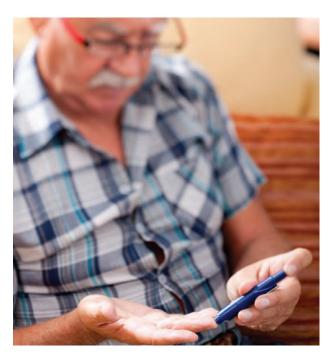
- Diabetes self-management education
- Medical nutrition therapy
- Annual review classes
- Prediabetes classes

To make an appointment with a diabetes educator and dietitian call:

- Bethesda North Hospital 513 569 6777
- Good Samaritan Hospital 513 569 6602
- McCullough-Hyde Memorial Hospital 513 524 555

For helpful tips on diabetes care, check out:

www.trihealth.com/diabetes www.diabetes.org



Lose Excess Weight

Obesity is linked to many diseases that put you at risk for heart disease, diabetes, high cholesterol and high blood pressure. Your heart must work harder to supply blood to the extra weight. The key to weight loss is to eat or drink fewer calories than you burn. Diet and exercise can help you do this. If you are overweight, just a 10 percent weight loss will help your heart.

Determine If You Have Central Obesity

BMI (body mass index) is as accurate as waist circumference in assessing risk of disease. Research shows that as a person's BMI or waist circumference increases, so does insulin resistance as well as triglycerides and higher blood sugar concentration in the blood. This means you have a higher risk of developing diabetes and increased risk of developing heart disease. (See chart on next page.)

One way to determine if you have central or abdominal obesity is to measure your waist in inches across your stomach at the level of your belly button. Women with a waist measurement of 35 inches or bigger, or men with a waist measurement of 40 inches or bigger, have central obesity.

Body Mass Index (BMI) Chart

Find your height and weight on the chart to determine your body mass index. An ideal range is 19 to 24. A BMI over 25 puts you at risk for high blood pressure, stroke, osteoarthritis, heart disease and certain cancers. A BMI of 25 to 29.9 is considered overweight and a BMI of 30 or higher is considered obese. For people whose BMI may be higher due to large bone structure or greater muscle mass, the waist circumference measurements described on the previous page will help determine whether you are truly at higher risk for serious diseases.

Ht. (In.)	Во	Body Weight (pounds)															
58	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167
59	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173
60	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179
61	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185
62	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191
63	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197
64	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204
65	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210
66	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216
67	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223
68	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230
69	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236
70	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243
71	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250
72	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258
73	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265
74	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272
75	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279
76	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287
ВМІ	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
	Desirable Range				Ove	erwei	ght			Obe	sity/Ir	ncreas	sed H	ealth	Risk		

Exercise

Exercising frequently is one of the best things you can do for your heart. Cardiovascular fitness allows the heart and blood vessels to supply the body with the oxygen it needs during rest and exercise. A fit person will be able to carry out daily activities with little or no fatigue. You also will be able to respond to physical and emotional stress without an excessive increase in heart rate and blood pressure. Check with your doctor before beginning any exercise program to see if you have any exercise restrictions.



Make Exercise a Permanent Part of Your Life

It is important to design a lifelong home exercise routine. Walking is one of the easiest and most convenient options, but there may be others you enjoy. Cardiovascular exercise should be continuous and rhythmical. It should be done at a comfortable pace. The "no pain, no gain" principle does not apply. If you stick with a regular, consistent program, you can expect these rewards:

- More energy and endurance (stamina) throughout the day
- Improved appearance
 - —a slimmer, trimmer body
 - better blood flow throughout your body
 - -better posture
- · Weight loss
 - -less body fat
 - -increased muscle tone
- Decreased appetite following exercise
- Lower heart rate and blood pressure
- Stronger heart muscle: the more you use your heart muscle, the stronger it becomes
- Improved use of oxygen in the body.
 The ability of the body to use oxygen effectively is considered by many to be the best measure of overall fitness
- Better sleep at night
- Stronger bones and a lower risk of osteoporosis
- Better resistance to illness
- Decrease in LDL and increase in HDL
- Lower stress, anxiety and depression



How to Design an Exercise Program

Your exercise plan should be based on the FITT principle:

Frequency of training Intensity of training Time of training Type of training

Get approval from your doctor before starting your program.

Frequency

According to national guidelines, adults need 30 minutes of moderate physical activity five times a week. People who only exercise "every once in a while" have a greater risk of exercise-related heart attack compared to those who work out more regularly, according to a report from the American Heart Association.

Intensity

You will get the most benefit for your heart when you exercise hard enough to get your heart rate (pulse) 20-30 points above resting, or as directed by your doctor. Exercising above your target heart rate increases the risk of problems and is not advised for people with heart disease.

Two Ways to Tell if You Are Working Out Safely

Talk Test

Moderate Intensity: You should be able to talk normally while exercising. Vigorous Intensity: If you are too short of breath to carry on a conversation, you are working too hard. Slow down.

Target Heart Rate

You should keep your target heart rate within the range given to you by your doctor or cardiac rehab staff. Generally, 75-80 percent of maximum heart rate is considered adequate. The formula for calculating your maximum heart rate = 220 – your age.



Time

If you are just starting an exercise program, begin with five to 10 minutes of exercise, four times a day. Add five minutes more each week until you are able to do 30 to 60 minutes once a day, most days, every week.

Type

The best kind of exercise is aerobic. This exercise is done by using your arms and/or legs in a continuous, rhythmic movement in order to increase your heart rate (pulse).

Aerobic activities include:

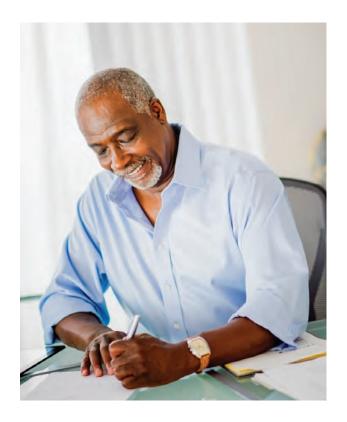
- Aerobics
- Dancing
- Skating (ice or roller)
- · Bicycling/Stationary bike
- Hiking
- Swimming
- Jogging/Walking
- Rowing

Pick an aerobic exercise that you enjoy, as you will most likely keep doing it on a regular basis. Other activities (sports, gardening, shopping, housework, etc.) help improve your overall fitness, but will not improve your heart health for long-term benefits.

Tracking Your Progress

One of the best ways to monitor your progress is to write down what you do. Keep track of:

- Weight (record once a week)
- Blood pressure (if you have a homemonitoring kit)
- Minutes of exercise each day
- Symptoms (are you having any symptoms that would be of concern?
 If so, be sure to contact your doctor.)
- Glucose values (for people with diabetes)



How to Exercise

Each exercise session should start with a warm-up and stretching, and end with a cool-down and stretching. Wear comfortably fitting shoes with good support. The shoes should not rub or chafe against your feet.

Warm-Up

A warm-up helps the body prepare for aerobic exercise by slowly raising the body's temperature and pulse. This is best done by walking or bicycling slowly for five to ten minutes. Warm-up may include stretching to improve your flexibility and prevent injuries. To stretch properly, stretch the muscle and hold that position for 10 to 30 seconds (don't bounce). Breathe normally during the stretch and do not hold your breath.

Aerobic Exercise

Aerobic exercise can make all the muscles in your body stronger, including your heart. See types of aerobic exercise in the previous column.

Cool-Down

The reason for a cool-down is to help the body return to a resting state. End your exercise session by slowing down your exercise for five minutes. Then repeat the stretching exercises that you did during your warm-up. This takes away the waste products that build up during exercise and helps reduce muscle soreness.

The cool down time slowly lowers your heart rate and blood pressure, helps prevent injuries and reduces the pooling

of blood in your legs. Some experts believe this is the most important part of your workout.

Stop exercising and tell your doctor if you have any of these symptoms during, or even several hours after, exercise:

- Lightheadedness or dizziness
- Chest discomfort
- Rapid heart beat
- Jaw, arm, or upper back discomfort
- Nausea
- Unusual shortness of breath
- Sudden weakness
- Severe or unusual fatigue or sleepiness
- Severe discomfort of any kind

Hints for a Successful Exercise Program

- 1. Set short- and long-term goals for yourself. Reward yourself when you meet them.
- 2. Frequently review how exercise benefits you.
- 3. Exercise with music or in front of the television.
- 4. Wait one hour after eating before exercising.
- 5. Pick an exercise you like that fits into your lifestyle.
- 6. Exercise with a friend for both safety and motivation.
- 7. Follow the walking guidelines on the next page.

Walking

When you first come home from the hospital, you should begin to walk daily, as allowed by your doctor. If you are feeling extremely tired and ill on a given day, you can skip that day. Walk at a comfortable, easy pace.

Follow These Guidelines

- Do not walk within one hour after meals.
- Walk on level ground, avoiding hills and grades.
- Walk inside if the temperatures are too hot or too cold, or during extreme humidity or a pollution alert.
- In summer, walk in the cooler part of the day and wear light, loose-fitting clothes.
- In winter, put on hat and gloves and wear a scarf to cover your nose and mouth.
- Always carry an ID with you and don't walk in secluded places.
- Carry your cell phone for emergencies.

Listen to your body. If you develop any form of chest discomfort, extreme shortness of breath, dizziness, sudden weakness or excessive sweating, stop and rest five minutes or until the symptoms go away. Call your doctor if the symptoms do not go away completely, or if you have these symptoms again.

As your body grows stronger after you leave the hospital, you should increase to a moderate, steady walking pace. Follow your doctor's orders or the instructions given to you.

Limit Alcohol Intake

If you drink alcohol it should only be done in moderation. This means an average of one to two drinks a day for men, and one drink a day for women.

A drink of alcohol is equal to:

- 1.5 ounces 80-proof distilled spirits (liquor)
- 12 oz. beer or wine cooler
- 4 oz. wine

Drinking more than one to two servings of alcohol a day relaxes the heart muscle too much and limits the amount of blood the heart feeds itself. When you drink too much alcohol, the heart muscle cannot pump or squeeze as strongly. Extra fluid can build up inside the heart, causing it to stretch or get bigger. The extra pressure on the heart muscle weakens the heart, eventually causing congestive heart failure (buildup of fluid in the heart and lungs).

Drinking large amounts of alcohol increases blood pressure, cholesterol and triglyceride levels. This causes atherosclerosis, or hardening of the arteries

Current research does not support the consumption of wine or any form of alcohol as a way to improve overall heart health. The action of all heart medication may be changed with drinking alcohol. If you have questions about using alcohol, please discuss this with your doctor.

Stress

Many people try to avoid stress as much as possible; others thrive on it. No matter what you do, stress is unavoidable. Any change, even positive or good change, brings some stress. Stress is the body's way of dealing with change. Once you begin to view stress as a part of normal life, you can begin to recognize and learn to deal with it better.

Long-term stress that you do not deal with properly may become bad for your health and may help cause heart disease by:

- Increasing blood pressure
- Increasing heart rate
- Increasing cholesterol levels
- Increasing blood sugar levels

Some possible symptoms of stress are:

- Irritability
- Bowel problems
- Tense muscles in the jaw, neck and shoulders



- Depression
- Mood swings
- Sleep problems
- Stomach problems

People who successfully deal with stress in their lives feel more relaxed. Some effective stress management techniques include:

- Exercise
- Meditation
- Use of guided imagery
- Muscle relaxation
- Listening to music
- Deep-breathing techniques
- Visiting with friends
- Taking time to do an activity you enjoy
- Reading a book
- Stress-management class or support group

The best way to manage stress is to practice healthy habits such as eating a nutritious diet, exercising, avoiding alcohol and drugs and getting six to eight hours of sleep each night.

Cardiac Rehabilitation

The TriHealth Cardiac Rehabilitation program guides you in making lifestyle changes that will help your heart. The purpose of cardiac rehabilitation is to help people return to everyday life. An important goal is to prevent a heart attack and halt or slow disease progression. Cardiac rehab focuses on these main areas:

- Exercise to make you stronger
- Education about your heart problem
- Advice on healthy habits
- Assistance with making life changes, such as losing weight or quitting smoking
- Counseling to help you cope with depression and learn how to deal with stress

The patients in the program will be a lot like you. Anyone with heart disease, regardless of age, will benefit from cardiac rehab. It is proven that if you complete a cardiac rehab program you are less likely to have any recurrent cardiac issues, even years down the road.

People who go to cardiac rehab include those who have had heart disease such as angina or heart failure, a recent heart attack, recent heart surgery, cardiac intervention such as balloon angioplasty or stent placement, or a heart transplant.

The Two Phases of Cardiac Rehabilitation

Phase I – Inpatient

While you are in the hospital, the Phase I nurse (heart educator) may see you and your family. This education starts after you have been treated for a heart problem. The nurse will teach you about your specific heart condition and risk factors that caused your heart disease. You will be given written material.

You may watch a video or attend a class about your heart problems and

treatments. The Phase I nurse also will explain the outpatient Phase II cardiac rehab program, which is designed to help your heart get healthy again and help you reduce your risk factors. You will receive written information regarding entry into a program.

Phase II – Immediate Outpatient

Upon discharge from the hospital, you will receive a referral for the cardiac rehab program. The program is usually 3 sessions a week for up to 3 months. Most insurance policies will cover hospital-affiliated outpatient programs.

At each session, you will be monitored closely by a cardiac rehab nurse and an exercise physiologist. A personal exercise plan will be developed based on your needs, abilities and goals. These exercise classes are fun, upbeat and slightly challenging.

Group classes and individual education play a big role in the Phase II program. Weekly educational classes also are offered.

Class Topics

- Heart disease
- Risk factors
- Lifestyle changes and goal setting
- Nutritional counseling
- Stress management
- Exercise guidelines



Goals for Phase II

- Improve your energy level by strengthening your heart with exercise
- Provide education about lifestyle changes that will keep your heart healthy
- Reduce the fear and anxiety about increasing your activities and exercise
- Assist you in making social, emotional and psychological adjustments to your heart disease and lifestyle change

Cardiac Rehabilitation at the TriHealth Fitness & Health Pavilion 513 985 6776

Good Samaritan Cardiac Rehabilitation Western Ridge 513 862 2837

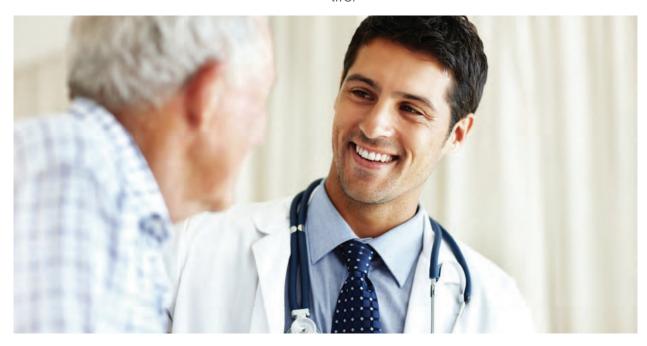
McCullough Hyde Cardiac Rehab 513 524 5445

The Cardiac Rehab Team

You are the most important member of the team! Your commitment to take care of yourself is the key to your recovery and ongoing heart health. The cardiac rehab team involves health care providers who are trained to guide your recovery. Your team includes:

- You
- Your family
- Doctors (your family doctor, cardiologist and/or heart surgeon)
- Cardiac nurses
- Exercise physiologists
- Dietitians

Coming back after a heart attack, heart surgery or a diagnosis of heart disease can be challenging for many reasons. Take advantage of the program classes and work with your health care team to design your own plan to lead a healthier life.



Notes:



Taking your medications as ordered is an important part of keeping your heart healthy. It is important for you and your family to understand the reasons for each medicine and be aware of possible side effects or drug and food interactions that can occur. Many types of medicines are prescribed for heart patients.

After you leave the hospital, your medicines may change. Always make sure you fully understand the changes. It is important to know which medicines to continue and which medicines to stop.

You will be given general information about your medicines. Please talk with your pharmacist or doctor for more information if you have any questions or concerns.

General Tips on Taking Medicines

- Make sure all your doctors are aware of all the medications you are taking. This includes medicines from other doctors, over-the-counter and herbal products.
- Check with your pharmacist or doctor for drug interactions before taking over-the-counter or herbal medicines.
- Always carry a current list of medications in your wallet.
- Read information that comes with each medicine and know why you are taking it.
- Take your medicine exactly as ordered.
- Know whether to take medicines with food or on an empty stomach and if

you should avoid any foods.

- Be aware of possible side effects of each medication.
- Talk to your doctor if you have financial concerns about paying for your medicine.
- Make sure you understand any changes your doctor has made to your medicines.

Your Heart Medications

Listed on the next page are common types of heart medications. Before discharge, your nurse will review your medications with you. For more information, go to the page number listed after each medicine.



Heart Medicines	Prescribed For	What They Do	Possible Side Effects
ACE-Inhibitors and ARB Agents page 43	high blood pressure heart failure heart attack	relax blood vessels reduce heart's workload	dry cough, dizziness, drowsiness, sensitivity to the sun
Antiarrhythmics page 44	irregular heart rhythms rapid heart rate	control heart rhythm and rate	drowsiness, lightheadedness or fainting, swelling of hands and feet
Beta Blockers page 45	angina high blood pressure heart failure heart attack	slow heart rate reduce heart's workload	tiredness, shortness of breath, trouble sleeping, impotence
Blood-Thinning Agents (including aspirin) page 46	angina heart failure heart procedure heart attack	thin blood, reduce risk of blood clots and heart attack	stomach irritation, unusual bleeding, bruising
Calcium Channel Blockers page 47	angina high blood pressure heart rhythm problems	relax blood vessels reduce heart's workload	headache, dizziness, swelling of ankles, constipation
Diuretics page 48	high blood pressure heart failure	reduce blood volume by removing excess sodium and water	muscle cramps, dry mouth, ringing in ears, dizziness or lightheadedness
Lipid-Lowering Agents page 49	high cholesterol	lower the amount of cholesterol made by the liver	muscle pain or soreness, stomach and intestinal upset
Nitrates (such as Nitroglycerin) page 50	angina	relax blood vessels reduce heart's workload	headache, lightheadedness, flushing



ACE-Inhibitors

Ramipril (Altace)

Lisinopril (Prinivil, Zestril)

Enalapril (Vasotec)

Captopril (Capoten)

Benazapril (Lotensin)

Moexipril (Univasc)

Quinipril (Accupril)

Trandolapril (Mavik)

Fosinopril (Monopril)

Perindopril (Aceon)

Angiotensin II Receptor Blockers

Losartan (Cozaar)

Valsartan (Diovan)

Candesartan (Atacand)

Irbesartan (Avapro)

Olmesartan (Benicar)

Azilsartan (Edarbi)

Telmisartan (Micardis)

Eprosartan (Teveten)

Combination

Lotrel (Benazapril & Amlodipine) Hyzaar (Hydrochlorthiazide & Losartan)

Uses

These drugs are used to reduce blood pressure (hypertension), and for congestive heart failure and kidney disease. These medicines can affect kidney function, so your doctor will get labs to monitor your kidneys.

Instructions

Take this drug exactly as prescribed. Take it at the same time(s) each day. Do not suddenly stop taking this drug without talking to your doctor. If you miss a dose, take it as soon as you remember but not if

it is within 8 hours of the next dose. If it is within 8 hours, skip the missed dose and resume your usual dosing schedule. Do not take two doses at one time to catch up. Females: Do not take this medicine if you are pregnant or breast-feeding. Notify any doctor or dentist that you are on this medication before you have any surgery.

Side Effects

Dizziness, drowsiness, dry cough, sensitivity to the sun.

Call Your Doctor If

- You have swelling of the face, lips, tongue or throat—call 911 if you are having difficulty breathing.
- You develop chest pain.
- You develop extreme weakness.
- You develop an irregular heartbeat.
- You develop yellowing of skin or eyes.
- You develop a dry cough that continues beyond a few days.

Food and Drug Interactions

Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy, or diet drugs. Check with your pharmacist or doctor before taking any over- the-counter pain/ fever relievers that contain ibuprofen or naproxen (NSAIDs). Tell them about any other drugs you are taking. Ask them to check for any drug interactions.

This medication should be taken with plain water.

Antiarrhythmics

Amiodarone (Cordarone, Pacerone) Propafenone (Rythmol) Sotalol (Betapace) Dronedarone (Multaq) Dofetilide (Tikosyn)

Uses

These drugs are used to slow the heart rate, or to treat irregular heart rhythms.

Instructions

Take this drug exactly as ordered. Take it at the same time(s) each day. Sustained-action or long-acting tablets or capsules must be swallowed whole and must not be crushed. Do not suddenly stop taking this type of drug without talking to your doctor. If you miss a dose, take it as soon as you remember but not if it is within 8 hours of the next dose. If it is within 8 hours, skip the missed dose and resume your usual dosing schedule. Do not take two doses at one time to catch up.

Count your number of heartbeats per one minute each morning. If your number of heartbeats in one minute is less than 60, call your doctor to check if you should take your medicine.

Side Effects

This medicine may make you feel dizzy or faint, especially if you get up quickly after sitting or lying down. Swelling of hands and feet may occur.

You may experience fatigue, constipation or dry mouth. Amiodarone (Cordarone, Pacerone) also may cause increased sensitivity to the sun.

Call Your Doctor If

- You develop hives, itching, rash.
- You develop severe dizziness.
- You develop severe nausea.
- You develop trouble breathing.
- You develop irregular heartbeat, slow heartbeat, or palpitations.
- You develop lower leg swelling or unexplained weight gain.
- You develop chest pain.
- You develop difficulty walking.
- You develop blurred vision.

Other changes may occur when using these medications. If you have questions about these changes, call your doctor or pharmacist.

Food and Drug Interactions

Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy, or diet drugs. These meds contain decongestants that increase blood pressure and heart rate. Diet drugs contain stimulants that increase heart rate and blood pressure. Tell them about any other drugs you are taking. Ask them to check for any drug interactions.



Beta Blockers

Atenolol (Tenormin, Tenoretic)
Carvedilol (Coreg)
Metoprolol (Lopressor, Toprol XL)
Sotalol (Betapace)
Bisoprolol (Zebeta, Ziac)
Bystolic (Nebivolol)

Uses

These drugs are used to slow the heart rate (pulse) and lower blood pressure (hypertension). They can also be used for the treatment of angina (chest pain), tremors or migraine headaches. These drugs protect your heart by decreasing the amount of work your heart has to do.

Instructions

Take this drug exactly as ordered. Take it at the same time(s) each day. Sustained-action or long-acting capsules must be swallowed whole and must not be crushed. Do not suddenly stop taking this drug without talking to your doctor. If you miss a dose, take it as soon as you remember but not if it is within 8 hours of the next dose. In this case, skip the missed dose and then follow your usual dosing schedule. Do not take two doses at one time to catch up.

Count your number of heartbeats for one minute before each dose. If your number of heartbeats in one minute is less than 60, call your doctor to see if you should take your medicine.

Side Effects

These drugs may make your feet and hands more sensitive to cold weather. Talk to your doctor if you have a decrease in sex drive because the doctor may be able to change your medicine. Since beta blockers slow your heart rate, they may make you feel tired. This tiredness usually lasts 2-3 weeks until your body adjusts to the new medicine.

Call Your Doctor If

- You are diabetic and have increased episodes of low blood sugar.
- You have dizziness when standing up.
- You develop a harsh cough.
- You develop trouble breathing.
- You develop nausea or vomiting.
- You develop swelling of feet or lower legs, or unexplained weight gain.
- You develop chest pain.

Other changes may occur when using these medications. If you have questions about these changes, call your doctor or pharmacist.

Food and Drug Interactions

Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy, or diet drugs. These meds contain decongestants that increase blood pressure and heart rate. Diet drugs contain stimulants that increase heart rate and blood pressure. Tell them about any other drugs you are taking. Ask them to check for any drug interactions. This drug can be taken with or without food.

Blood-Thinning Agents

Aspirin

Clopidrogrel (Plavix)

Enoxaparin (Lovenox)

Warfarin (Jantoven, Coumadin)

Prasugrel (Effient)

Ticagrelor (Brilinta)

Dabigatran (Pradaxa)

Rivaroxaban (Xarelto)

Apixiban (Eliquis)

Edoxaban (Savaysa)

Fondaparino (Arixtra)

Dalteparin (Fragmin)

Uses

These medications are used to prevent blood clots. They may be used to treat or prevent complications from blood clots such as heart attack, stroke or pulmonary embolus.

Instructions

- Aspirin should be taken with food to decrease stomach irritation.
- Take Plavix with a full glass of water.
- Lovenox, Arixtra and Fragmin are injections. Follow the instructions.

Take at the same time every day. If you miss a dose one day, do not double your dose the next day. Alert any physician or dentist taking care of you that you are on this medication.

A Special Note About Plavix, Brilinta and Effient

If you are taking one of these meds because you have a drug-coated stent, missing a dose for even a few days can cause the stent to become blocked. Research shows you need to take these meds for at least one year after stent

placement. If you cannot afford it, discuss this with your doctor before you stop taking it.

Side Effects

Easy bruising, prolonged bleeding.

Call Your Doctor If

- You develop an allergic reaction (rash, itching, or hives).
- You develop bloody diarrhea, tarry stools, blood in vomit or urine.
- You develop swelling of the lips.
- You develop trouble breathing.
- You develop a sudden severe headache.
- You develop confusion or numbness on the face, arm or leg.
- You develop chest pain.
- You have unusual bleeding or bruising.

Food and Drug Interactions

Check with your doctor or pharmacist before taking any over-the-counter medications that contain aspirin, ibuprofen, naproxen, or any other NSAID. Also check with your doctor or pharmacist before taking any over-the-counter herbal products. Avoid alcohol, which increases your risk of bleeding.

Warfarin

- Take at the same time every day.
- Do not start or stop medications, including vitamins and herbs, without double-checking with your doctor.
- Call your doctor if your diet changes, you have nausea or vomiting, or diarrhea.

Blood tests will be done regularly to adjust your dose.



Calcium Channel Blockers

Diltiazem (Cartia XL, Cardizem, Tiazac) Verapamil (Calan, Isoptin) Amlodipine (Norvasc) Nifedipine (Procardia, Adalat CC) Felodipine (Plendil) Isradapine (Dynacirc)

Uses

These drugs are used to slow the heart rate (irregular heart beat) and reduce blood pressure (hypertension). They can also be used for the treatment of chest pain (angina).

Instructions

Take this drug exactly as ordered. Take it at the same time(s) each day. Sustained-action or long-acting tablets or capsules must be swallowed whole and must not be crushed. Do not suddenly stop taking this drug without talking to your doctor. If you miss a dose, take it as soon as you remember but not if it is within 8 hours of the next dose. If it is within 8 hours, skip the missed dose and resume your usual dosing schedule. Do not take two doses at one time to catch up.

Count your number of heartbeats per one minute each morning. If your number of heartbeats in one minute is less than 60, call your doctor to check if you should take your medicine.

Side Effects

This medicine may make you feel dizzy or faint, especially if you get up quickly after sitting or lying down. Swelling of hands and feet may occur. You may have fatigue, constipation or dry mouth. This usually

gets better over time as you adjust to the new medicine.

Call Your Doctor If

- You develop hives, itching, rash.
- You develop severe dizziness.
- You develop severe nausea.
- You develop irregular heartbeat.
- You develop swelling of feet or lower legs, or unexplained weight gain.
- You develop chest pain.

Other changes may occur when using these medications. If you have questions about these changes, call your doctor or pharmacist.

Food and Drug Interactions

Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy, or diet drugs. These meds contain decongestants that increase blood pressure and heart rate. Diet drugs contain stimulants that increase heart rate and blood pressure. Tell them about any other drugs you are taking. Ask them to check for any drug interactions. Avoid grapefruit juice if taking Felodipine, Nifedipine, Verapamil, Amlodipine.

Diuretics

Loop Diuretics

Furosemide (Lasix)
Torsemide (Demadex)
Bumetanide (Bumex)

Thiazide Diuretics

Hydrochlorothiazide (Hydrodiuril) Chlorothiazide (Diuril) Metolazone (Zaroxolyn) Spironolactone (Aldactone) (potassium sparing)

Uses

Diuretics are "water pills" that remove excess water from the body by increasing urination. Diuretics are used to treat fluid retention and swelling (edema), high blood pressure, congestive heart failure or other conditions as determined by your doctor.

Instructions

Take this drug exactly as ordered. This medication increases the frequency of urination. Take the last dose of the day before 6 p.m. If you miss a dose, take it as soon as you remember unless it is almost time for the next dose. In that case, skip the missed dose and take the next one as directed. Do not take double doses.

Side Effects

You may have dizziness and lightheadedness. Rise slowly from a sitting or lying position. These drugs may increase sun sensitivity. Other effects include nausea, vomiting, diarrhea, rash, muscle cramps, dry mouth, thirst and weakness. Thiazide diuretics can affect blood sugar; diabetics may need to adjust

medications. Thiazide diuretics can also worsen gout.

Diuretic medicines may drive potassium from your body. Your physician may prescribe a potassium-rich diet (i.e. bananas, oranges) or potassium supplement. You may need blood tests to monitor your potassium level.

Call Your Doctor If

- You develop an allergic reaction, such as hives, rash, itching, or trouble breathing.
- You develop severe nausea, vomiting or diarrhea (decreases potassium).
- You develop muscle cramps (it may be a sign of low potassium).
- You develop severe thirst (dehydration).
- You have ringing in your ears or hearing loss (loop diuretics).
- You develop weakness or dizziness.

Food and Drug Interactions

Many drugs interact with these medicines and can possibly cause side effects. Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy, or diet drugs. Tell them about any other drugs you are taking. Ask them to check for any drug interactions.



Lipid-Lowering Agents

Statins

Simvastatin (Zocor)

Pravastatin (Pravachol)

Atorvastatin (Lipitor)

Lovastatin (Mevacor)

Fluvastatin (Lescol)

Rosuvastatin (Crestor)

Simvastatin & Ezetimibe (Vytorin)

Niacin, Atorvastatin & Tricor (Trilipix)

Pitavastatin (Livalo)

Nicotinic Acid

Niacin (Niaspan, Niacor)

Cholesterol Absorption Inhibitor

Ezetimibe (Zetia)

Fibrates

Gemfibrozil (Lopid) Fenofibrate (Tricor)

Bile-Acid Binding Resins

Colestipol (Colestid)

Colesevelam (Welchol)

Fish Oil (Lovaza, Maxepa)

This is general information about lipidlowering agents with a focus on statins. Please consult your pharmacist or doctor for details on a specific product.

Uses

These medications are used to lower cholesterol and triglyceride levels when diet and exercise alone have not lowered them enough. Reducing cholesterol and triglycerides helps prevent strokes and heart attacks. Each class of lipid-lowering agent can be used alone or in combination with another agent.

Instructions

Take these drugs exactly as ordered.

Extended-release products must not be crushed. If you miss a dose, take it as soon as you remember unless it is almost time for the next dose. In that case, skip the missed dose and take the next one as directed. Do not take double doses.

Side Effects

Gastrointestinal side effects are common. These drugs can affect the liver, so periodic blood tests are required.

Combinations of statins plus either fibrates, nicotinic acid or ezetimibe may be needed, but can increase the risk of serious muscle pain, and can sometimes lead to kidney failure.

Niacin can cause flushing, tingling or a sensation of warmth when you first start taking it. These effects usually decrease with continued use.

Call Your Doctor If

- You develop muscle pain or tenderness, especially if you have a fever or feel fatigued.
- You have allergic reactions such as hives, rash, or trouble breathing.
- You develop extreme weakness in your arms or legs.

Food and Drug Interactions

Many drugs interact with these medicines and can possibly cause side effects. Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy, or diet drugs. Tell them about any other drugs you are taking. Ask them to check for any drug interactions.

Nitrates

Isosorbide Mononitrate (Imdur, Ismo, Monoket) Isosorbide Dinitrate (Isordil) Nitroglycerin Patch (Nitrodur, Nitroderm) Nitroglycerin SL Tab (Nitrostat) Nitroglycerin SL Spray (Nitrolingual) Nitroglycerin Ointment

Uses

This medication helps relax the blood vessels and improves blood flow. Nitroglycerin is used to treat chest pain.

Instructions

Take these drugs exactly as ordered. Extended-release products must not be crushed. If you miss a dose, take it as soon as you remember unless it is almost time for the next dose. In that case, skip the missed dose and take the next one as directed. Do not take double doses.

For tablets, keep in the original, brown bottle. Keep with you at all times. At the first sign of chest pain, sit or lie down and place one tablet or spray under your tongue and allow it to dissolve. If there is no relief after 5 minutes, take another tablet or spray. If there is no relief after 3 tablets or sprays, call 9-1-1.

Topical patches are often removed at bedtime to allow a drug-free time period. This helps prevent building a tolerance to the drug.

Side Effects

Nitroglycerin can cause headaches, dizziness, flushing, rapid heartbeat, nausea, or vomiting. Headaches are often a sign that the medication is working. Treat headaches with Tylenol (Acetaminophen). Rise slowly from a sitting or lying position to prevent dizziness and lightheadedness.

Call Your Doctor If

- You develop a severe headache.
- You have dry mouth.
- You develop a rash.
- You have blurred vision.
- You have new chest pain relieved by nitroglycerin tablets or spray.
- You have chest pain not controlled with your medication.

Call 9-1-1 if you have chest pain unrelieved by 3 doses (tablet or spray) of nitroglycerin.

Food and Drug Interactions

Do not take Viagra, Cialis or Levitra with nitroglycerin. When taken together, your blood pressure may get too low. Certain drugs for migraines and high blood pressure may interact with nitroglycerin. Do not drink alcohol with this medication. Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy or diet drugs. Tell them about any other drugs you are taking. Ask them to check for any drug interactions.

Pain Medications

Hydrocodone/Acetaminophen (Vicodin) Oxycodone/Acetaminophen (Percocet) Tramadol/Acetaminophen (Ultracet) Oxycodone (Roxicodone) Tramadol (Ultram)

Uses

These medications are painkillers (analgesics). They contain a combination of a narcotic analgesic and acetaminophen (Tylenol) to treat moderate to severe pain.

Instructions

Take these medications exactly as prescribed. Take only for the condition for which they were prescribed. Do not take more or take for a longer time than prescribed. Do not take more than 3,000 mg of acetaminophen (Tylenol) per day. Make sure you understand how much Tylenol each pain tablet contains and how many tablets you can take per day.

Side Effects

These medications may make you dizzy or drowsy. Do not drive or operate machinery unless you are fully alert. They may also cause nausea, vomiting or constipation. Take with food to minimize stomach upset. A stool softener or Senna may help relieve constipation.

Call Your Doctor If

- You develop a rash.
- You experience trouble breathing.
- You have trouble urinating.
- You have ringing in your ears.
- You develop depression or hallucinations.
- You have a rapid heartbeat.
- You develop bloody or dark urine.
- You develop yellowish skin or eyes.

Food and Drug Interactions

Check with your pharmacist or doctor before taking any over-the-counter cough, cold, allergy or diet drugs. Tell them about any other drugs you are taking. Ask them to check for any drug interactions.

Talk to your health care provider if you are taking sedatives, antihistamines, antidepressants or nerve medicines. Do not drink alcohol while taking this medication, as the combination may cause liver damage.

With the exception of Tylenol, these medications are controlled substances. It is illegal to give them to anyone else.

Notes:



Improve your heart health by eating foods low in fat (especially saturated fat), and sodium. Making healthy food choices can lower blood pressure, weight and cholesterol levels. The guidelines in this booklet are a next step toward reaching these goals.

Make a Change and Take It to Heart

Changing your diet and sticking with the changes can be difficult. It is easier if you make changes slowly. It may take several months of diet and lifestyle changes to see a drop in your blood cholesterol levels. By sticking with new eating habits, you will help your heart and the rest of your body.

If you follow your diet closely on most days, you may eat small amounts of food high in fat for special occasions. The same is true for food high in sodium unless you have congestive heart failure or kidney disease. In those cases, you always should avoid high-sodium foods, since they can cause serious problems.

Your dietitian can help you make changes in your diet. If you are taking cholesterol-lowering medication, diet works with the medicine to help bring your cholesterol levels down.

The Diet-Heart Connection

Cholesterol is a waxy material that is made and stored by your body. You also get extra cholesterol from all animal and other food products. It is used for building cells. If your blood cholesterol level is high, you are more likely to develop atherosclerosis, a buildup of fatty substances along your artery walls. You cannot control the amount of cholesterol your body makes, but you can choose the types of fat you include in your diet. If you lower the amount of cholesterol in your body, you may be able to slow down or prevent atherosclerosis.

Lose Weight if You Are Overweight

If you were told you need to lose weight, your dietitian can help you find ways to lose weight safely. Fad diets are not the answer. Fast weight loss is not good for your health. You should not lose more than one to two pounds a week. In most cases, you should not try to lose weight before or right after surgery.

You may not need a special weightloss diet. If you eat less fat and smaller portions of food, you will take in fewer calories and lose some weight.



Limit Your Sodium Intake

Sodium is a mineral that helps control the amount of water in your body. Too much sodium can cause your body to hold extra fluid. This makes the heart work harder and can affect your blood pressure.

This can be a problem if the heart already has been damaged. The American Heart Association recommends limiting sodium to no more than 2,000 milligrams per day.

Sodium is found in everything you eat. The amount found naturally in fresh fruits, fresh vegetables and fresh meat usually is not a concern. Most of the sodium in your diet comes from the sodium that is added

when food is processed and from salt you add to your food.

You can start reducing the amount of sodium in your diet by not adding extra salt at the table and not cooking with it. In addition, try to eat fewer processed foods:

- Salted snack foods
- Processed meats (such as hot dogs, lunch meats and sausage)
- Canned soups
- Frozen dinners

Salt-Free Seasoning Ideas

You can add flavor to food without adding salt. Try adding herbs and spices to foods. Try mixing different flavors like chicken with orange sauce or meatloaf with pineapple.

Also consider using homemade seasoning mixes or any of the Dash salt-free seasoning mixes. Some salt substitutes are made with potassium chloride. Check with your doctor before using any salt substitute made with potassium chloride.

Studies have shown that after 8 to 12 weeks on a lower-sodium diet, people actually prefer less salty foods.



Salt-Free Seasoning for Meat, Fish and Poultry		
Beef	bay leaf, dry mustard powder, bell pepper, marjoram, fresh mushrooms, nutmeg, onions or onion powder, pepper, sage or thyme	
Chicken	green pepper, lemon bell, marjoram, fresh mushrooms, paprika, parsley, poultry seasoning, sage or thyme	
Fish	bay leaf, curry powder, dill, dry mustard powder, bell pepper, lemon juice, marjoram, onions or paprika	
Lamb	curry powder, garlic or garlic powder, mint, mint jelly, pineapple or rosemary	
Pork	apple, applesauce, garlic or garlic powder, onions or sage	
Veal	bay leaf, curry powder, ginger, marjoram or oregano	

Salt-Free Seasoning for Vegetables		
Asparagus	garlic or garlic powder, lemon juice, onions or vinegar	
Carrots	dill, ginger, honey, marjoram, mint or thyme	
Corn	bell pepper, nutmeg or fresh tomato	
Cucum- bers	chives, dill, garlic or vinegar	
Green beans	lemon juice, marjoram, nutmeg, pimiento or sweet basil	
Greens	onion or onion powder, pepper or vinegar	
Peas	bell pepper, mint, fresh mushrooms, onion or parsley	
Potatoes	dill, bell pepper, mace, onions, paprika or parsley	
Squash	brown sugar, cinnamon, ginger, mace, nutmeg or onion	
Tomatoes	basil, marjoram, onions or oregano	

Why You Should Limit Foods With Fat Trans Unsaturated Fats

The amount and kind of fat in your diet affects how your body makes and uses cholesterol. Large amounts of any fat, but especially saturated fat, tend to raise your cholesterol. Try to limit the total amount of fat in your diet to only about a third of your calories. Choose monounsaturated and polyunsaturated fat over saturated fat whenever possible.

Unsaturated Fat

Monounsaturated and polyunsaturated fats may help control your cholesterol level. These fats are liquid at room temperature. Most vegetable oils are unsaturated.

Oils high in monounsaturated fat:

• Olive, canola, peanut and sesame oils

Oils high in polyunsaturated fat:

• Soybean, corn, sunflower, safflower, flaxseed, walnut oils and fatty fish oils

Saturated Fat

No more than one-third of your fat intake should be saturated, or 10 grams per day. They are solid at room temperature. Animal fats tend to be high in saturated fat. Ways to limit saturated fat include to trim fat from meat, remove skin from chicken and turkey, and eat smaller portions. Try to avoid high-fat animal products such as butter, lard, gravies, sauces and whole-milk dairy products.

Vegetable oils high in saturated fat include coconut oil, palm oil, palm kernel oil and cocoa butter (found in chocolate).

Trans unsaturated fats (or "trans fats") should be limited in the diet. Snack foods and baked goods made with "partially hydrogenated vegetable oil" or "vegetable shortening" are sources of trans fats. Other sources of trans fats include crackers, cookies, french fries, fast foods, and fried foods. Choose tub or liquid margarine, or trans fat-free spreads. Use olive oil or canola oil when cooking.

Eat Plenty of Fruits, Vegetables and Grains

Fruits, vegetables and whole grains taste good and are good for you. They are full of vitamins and minerals and other natural ingredients that your body needs. They can help fill you up because they are high in fiber. Some kinds of fiber also may help lower your cholesterol level.

Soluble Fiber binds with cholesterol and removes it from the body. Some foods high in soluble fiber include apples, broccoli, dried beans, lentils, oatmeal, pears and raisins.

Insoluble Fiber ("roughage") adds bulk to stools and helps prevent constipation and promotes regularity. Foods high in insoluble fiber include bran cereals, cauliflower, fruits and vegetables with edible skins, dried beans and peas, nuts and seeds.

Gradually increase your fiber intake to 20 to 35 grams of fiber per day. Adding high fiber foods too quickly can cause cramping, gas and diarrhea.



Eating From the Major Food Groups

On the following pages you will find charts listing many common foods. The foods are listed in three columns, showing how you should use them in your diet. Use these charts to help you make your food choices.

Foods in the *Good Choices* column are very low in fat and sodium. Unless you are on other diet restrictions, you can eat these foods every day.

Foods in the *Use in Moderation* column contain some fat. Many of these foods are an important part of a heart-healthy diet.

You can use them, but you need to limit the portion or how often you eat them.

Foods in the *Not Recommended* column should not be a regular part of your diet. They are either very high in fat or sodium. Limit food choices from this group to twice a month—less is even better.

Foods that are marked with an "*" are high in sodium, but are low in fat. In addition to eating good foods, drink 8 to 10 glasses of water or fluids each day. Drinking water helps prevent constipation and keeps your body hydrated. If fluids have been restricted by your doctor, follow the restricted fluid amounts.



Bread, Cereal, Rice and Pasta

6 to 9 servings per day

Suggested serving size: 1 slice bread (1-ounce slice) 1/2 cup rice, pasta (cooked) 4 to 6 soda crackers
1/2 cup starchy vegetables, cooked
Each serving in the first column contains:
80 calories, 3 grams protein
15 grams carbohydrate
1 gram fat

Good Choices	Use in Moderation	Not Recommended
Bread White, wheat, rye, French, Italian, raisin, pumpernickel Bagels (made without egg) Plain dinner rolls Buns, hamburger or hot dog Tortillas, corn or flour (made without lard, not fried) Fat-free tortillas Cereal Cooked cereal Dry cereal (except those made with fat, coconut or chocolate) Grains/Rice/Pasta Rice, white or brown Bulgar Barley Pasta (spaghetti, macaroni, rotini, etc.) Noodles (made without egg) Crackers/Snacks Angel food cake Pretzels, unsalted Popcorn (made without salt or fat) Melba Toast Matzo (made without egg) Fat-free crackers that are low in salt, or have "unsalted tops"	Bread Biscuits, muffins, pies, cakes, corn bread and cookies, made with allowed ingredients** (with no more than 3 grams of fat per serving) Cereal Low-fat granola cereals Grains/Rice/Pasta Egg noodles (limit to 1/2 cup per day) Crackers/Snacks Graham crackers Soda crackers, unsalted	Egg or cheese breads Croissants Biscuits, muffins and corn bread made with whole milk or whole eggs Butter rolls Tortillas made with lard or other saturated fat Self-rising flour* Cereal Cereal made with chocolate, nuts or coconut Granola cereals Grains/Rice/Pasta Pasta and rice mixes made with animal fat, hydrogenated fat or a lot of sodium Stuffing mixes Crackers/Snacks Snack crackers high in salt and fat (especially saturated fat) Fried snack foods (chips, etc.) Egg matzo Donuts and sweet rolls Cakes, pies, cookies and other baked products that are high in fat or made with eggs, butter or whole milk products

^{*}High in sodium but not high in fat.



^{**}Look for good and moderate choices under "Fats" on page 54.

Vegetables

3 to 5 servings per day
Suggested serving size:
1 cup raw leafy vegetables
1/2 cup other vegetables, cooked or raw

Each serving in the first two columns contains:
25 calories, 2 grams protein
5 grams carbohydrate



Use in Moderation **Good Choices** Fresh, Frozen (plain) or Onions Regular tomato sauce* Canned (unsalted, "no Spaghetti sauce (check **Parsnips** Peas** labels for fat content salt added" or rinsed) Artichoke Peppers since they vary by (green, red, orange, brand) Asparagus Rinsed regular canned Bamboo shoots yellow) Potatoes** vegetables* Beans (green or wax) Radishes Beets Rutabagas Broccoli Snow peas (pea pods) Brussels sprouts Cabbage Sprouts Squash, pumpkin Carrots Not Recommended Sweet potatoes** Cauliflower Celery Tomato Corn** Sauerkraut* Tomato or vegetable Pickles* Cucumbers juice, tomato sauce Vegetables made in Eggplant (unsalted brine (salt water)* Greens (spinach, beet, or no salt added) Vegetables made with Water chestnuts kale, turnip, collard, **7ucchini** butter, cream, eggs, mustard, dandelion, meat, fat, bacon or Swiss chard) other Lettuce ingredients to be Lima beans** avoided Mixed vegetables Regular tomato or Mushrooms vegetable juice* Okra



^{*}High in sodium but not high in fat.

^{**}Starchy vegetables are higher in calories and carbohydrates.

Fruit

2 to 4 servings per day

Suggested serving size:

1/2 cup unsweetened juice or canned fruit

1 medium piece of fresh fruit

1 cup diced melon

2 pieces dried fruit

Each serving in the first two columns contains:

60 calories, 0 grams protein

15 grams carbohydrate



Good Choices		Use in Moderation
Fresh, Frozen, Canned Apple/apple juice/ apple cider Applesauce Apricot/apricot nectar Banana Blackberries Blueberries Boysenberries Cantaloupe Casaba melon Cherries Cranberries/cranberry juice Dates Figs Fruit cocktail Grapefruit/grapefruit juice Grapes/grape juice Guava Honeydew melon Kiwi Mandarin oranges Mango Nectarine Orange/orange juice	Papaya Peach/peach nectar Pear/pear nectar Persimmon Pineapple/pineapple juice Plums Pomegranate Prunes/prune juice Raisins Raspberries Rhubarb Strawberries Tangerine Tangelo Watermelon Avocados (limit to 1/2 per day)	Not Recommended Coconut

^{*}High in sodium but not high in fat.



Milk, Yogurt and Cheese

2 to 3 servings per day Suggested serving size: 1 cup skim or fat-free milk Each serving in the first column contains: 90 calories, 8 grams protein 12 grams carbohydrate 1 gram fat

Good Choices	Use in Moderation	Not Recommended
Milk and Milk Drinks Skim milk 1/2% milk 1% milk Canned evaporated skim milk Skim milk powder (nonfat dry milk) Fat free or low fat, unsweetened soy milk (calorie and protein content may vary) Nut-based or plant-based "milks", except for refrigerated coconut milk (choose fat free or low fat, if available; calories, protein and fat may vary) Fat-free half-and-half (such as Land O' Lakes brand) Fat-free coffee creamers Yogurt, nonfat (plain or with fruit, Greek) Fat-free yogurt-based drinks (calorie content may vary) Fat-free sour cream Milk Desserts Fat-free puddings Frozen desserts with 0 to 2 grams of fat per serving (such as yogurt, ice milk, or fat-free ice cream) Cheese Fat-free and low-fat cheeses with 1 gram of fat or less per serving	Milk and Milk Drinks (no more than 4 ounces per day selected from the following) 2% milk Buttermilk made from low-fat or skim milk* Canned evaporated low-fat milk (plain, with fruit, frozen) Refrigerated coconut milk Canned "light" coconut milk Canned "light" coconut milk Cocoa made with low-fat milk and cocoa powder Milk Desserts Homemade custard and pudding made with low-fat milk and amount of egg allowed Frozen desserts with 3 to 5 grams of fat per serving size (such as low-fat ice cream or low-fat frozen yogurt) Low-fat or reduced-fat sour cream with no more than 3 grams of fat per serving Cheese Cheeses having between 2 to 5 grams of fat per serving (such as low-fat cottage cheese,* part skim milk cheese, feta cheese, farmer's, mozzarella, neufchatel)	Milk and Milk Drinks Whole milk Buttermilk made from whole milk Canned evaporated whole milk Condensed milk Eggnog Imitation or filled milk Yogurt made from whole milk Cream (light, coffee, whipping) Half-and-half Sour cream Drinks made with whole milk (malts, milk shakes, lattes, cappuccino, etc.) Cocoa made with whole milk, chocolate or cocoa butter (homemade or instant) Milk Desserts Custard and pudding made with whole milk or more eggs than allowed Ice cream, ice milk or other frozen desserts made with cream, coconut or palm oil, other restricted ingredients, or containing more than 5 grams of fat per serving Cheese Cream cheese Cheese with more than 5 grams of fat per serving Specialty cheese containing sausage

^{*} High in sodium but not high in fat



Meat, Poultry, Fish, Dried Beans, Eggs and Nuts

No more than 5 to 6 ounces per day

- Trim off fat before cooking, choose lean cuts.
- Bake, broil, microwave, braise, poach roast or grill meat without adding extra fat.
- Limit beef and pork to 2 servings per week.

Each serving in the second column contains:

55 calories, 7 grams protein 0 grams carbohydrate

3 grams fat



Good Choices	Use in Moderation	Not Recommended
These have 1 gram of fat or less per serving and less than 1 gram of saturated fat. They also are low in sodium. Egg whites Egg substitutes with no cholesterol Dried beans, peas, lentils	Even though these are good choices, portions must still be limited. They have between 2 and 5 grams of fat per ounce and up to 2 grams of saturated fat. Seafood Fish (plain), fresh or frozen Fish, canned in water, rinsed Shellfish (clams, crab, oysters, lobster, shrimp, scallops) not fried and not served with "Avoid" ingredients on page 54 Poultry White meat if possible, no skin Cornish hen Chicken Turkey, fresh, frozen, ground breast Game Rabbit Squirrel Venison (lean)	These have more than 5 grams of fat per ounce (with more than 2 grams saturated fat) or are high in cholesterol or sodium. Seafood Roe, caviar Anchovies, sardines Fish canned in oil Fried fish Breaded frozen fish Poultry Duck Goose Squab Poultry skin Veal Breast Commercial ground veal Pork Bacon Boston butt Commercial ground pork Rib chops Sirloin roast Spareribs Sausage, bratwurst, metts

Meat, Poultry, Fish, Dried Beans, Eggs and Nuts (Continued)

Good Choices	Use in Moderation	Not Recommended
You do not have to give up meat entirely, but watch the portions you eat. Aim for 3-ounce servings. It is OK to eat red meat occasionally. Aim for 2 servings per week, 3 ounces each serving. Choose lean meats. Eat heart-healthy fish such as salmon, tuna, mackerel and lake trout 2 to 3 times a week, in 3- to 4-ounce servings.	Cutlets Leg (round, rump) Loin (roast, chops, sirloin) Ribs (chops, steaks) Shanks Shoulder (roast, steak, breast) Pork Ham (lean center slices)* Loin (chops, roast) Tenderloin Beef Ground beef, lean (from round or sirloin) Roasts (sirloin tip, round, rump, arm) Steaks (flank, shoulder, round, tenderloin) Chipped beef Processed Meat Luncheon/deli meats and hot dogs with no more than 5 grams of fat per ounce* Lamb Roast and steak (leg) Chops (loin, rib, shoulder) Eggs Whole eggs or egg yolk (limit to one per day) Miscellaneous Tofu (soybean curd) Peanut butter (limit to 1 tbsp. daily) Nuts, unsalted (limit to one small handful a day) Soy meat substitutes, such as Garden burgers, Boca burgers, etc.	Beef Any well-marbled meat Brisket Corned beef Rib roast, rib steak Club steak Porterhouse steak T-bone steak Commercial ground beef or hamburger Processed Meat Regular cold cuts, hot dogs, luncheon/deli meats Light or reduced-fat meats or hot dogs with more than 5 grams of fat per ounce Lamb Breast Commercial ground lamb Organ Meats Liver Kidney Brain Heart Tongue Miscellaneous Frozen, prepared meat and entrée items with more than 7 grams of fat per serving

^{*} High in sodium but not high in fat



Fats

No more than 3 tablespoons per day

(This includes any fat used in processing or preparing food)

Suggested serving size:

- 1 tablespoon regular salad dressing
- 1 teaspoon margarine, oil, mayonnaise
- 1 tablespoon nuts and seeds

Each serving in the second and third columns contains:
45 calories, 0 grams protein
0 grams carbohydrate
5 grams fat

Good Choices	Use in Moderation	Not Recommended
These items have less than 2 grams of fat per serving and less than 1 gram of saturated fat. Fat-free fat substitutes (such as Butter Buds and Molly McButter) Fat-free mayonnaise, margarine, cream cheese, salad dressing, sour cream, coffee creamer Salad dressings with less than 2 grams of fat per serving* Fat-free whipped topping	These items have up to 5 grams of fat per serving but less than 1 gram of saturated fat. Oils (Monounsaturated) Olive oil Canola oil Peanut oil Oils (Polyunsaturated) Sunflower seed oil Safflower oil Corn oil Soybean oil Sesame seed oil Cottonseed oil Flaxseed oil Margarine (first ingredient listed is liquid vegetable oil) Mayonnaise with 2 to 5 grams of fat per serving (and made with one of the oils listed above) Nondairy creamers made with one of the oils listed above (such as Coffee Rich)	These items have the same amount of fat as items in the second column, but they are higher in saturated fat. Oils Coconut oil Cocoa butter Palm and palm kernel oil Hydrogenated oil Fats Butter Margarine made with a high percentage of saturated fat or made with animal fat (lard or butter) Vegetable shortening Roquefort, Bleu cheese or other salad dressings made with fats to avoid Sour cream Imitation sour cream made with fats in this column Cream (light, coffee, whipping, nondairy whipped topping)

^{*} High in sodium but not high in fat



Fats (Continued)

Good Choices	Use in Moderation	Not Recommended
Use unsaturated oil or monounsaturated fats when baking. When baking a cake, substitute applesauce, baby food prunes or pureed prunes for cooking oil.	Low-fat sour cream with no more than 3 grams of fat per serving Reduced-fat cream cheese Nuts and Seeds Nuts, unsalted—almonds, walnuts, peanuts, pecans (limit to 1 tablespoon daily) Seeds, unsalted—sesame, sunflower (limit to 1 tablespoon daily)	Creamers containing coconut and/or palm oil Half-and-half Cream cheese (containing 5 or more grams of fat per serving) Lard, bacon, bacon fat, salt pork Chicken fat Beef fat, suet Chitterlings Coconut milk

Miscellaneous

Good Choices	Use in Moderation	Not Recommended
Beverages Decaffeinated drinks (tea, coffee, soft drinks, fruit drinks, Postum) Coconut water, unsweetened Soups Fat-free, low-salt broth or bouillon Soups made with allowed ingredients Candy, Sugar and Desserts Fat-free baked desserts Hard candies Gum drops Marshmallows Plain sugar candies Jam, jelly, marmalade Sugar, sugar substitute Honey, molasses, syrups Gelatin Sherbet, fruit ices Angel food cake, meringues Seasonings and Sauces All herbs and spices made without salt Vinegar Liquid Smoke	Beverages Alcoholic beverages only with doctor's permission Caffeinated drinks, if allowed by doctor (coffee, tea, soft drinks that contain caffeine; cocoa if made with allowed ingredients)** Seasonings, Sauces and Condiments Ketchup, mustard (limit to 1 tablespoon daily)* Sauces such as soy, steak, BBQ, Worcestershire (limit to 1 teaspoon daily)* Salt substitutes made with potassium chloride should be used only with doctor's permission	Beverages Gatorade or other "energy" drinks* Any beverage containing ingredients to avoid** Soups Regular canned, dried or dehydrated soups Soups containing ingredients to avoid*** Candy and Desserts Candy or desserts made with chocolate or coconut Caramels or candy made with butter or cream Cakes, pies, cookies, frozen desserts made with ingredients to avoid*** Seasonings and Sauces Seasoning salt* Monosodium glutamate* Hollandaise sauce and other sauces containing fat or other ingredients listed under "Avoid"*** Canned gravy, sauces or instant mixes Meat tenderizer containing sodium* Salt, sea salt, Kosher salt

^{*}High in sodium but not high in fat. **See guidelines under "Milk," page 51.

^{***}Look for good and moderate choices under "Fats," page 54.



Seven Ways to Size Up Your Servings

Measure food portions so you know exactly how much food you are eating. When a food scale or measuring cups are not handy, you can still estimate your portion. Remember:



3 ounces of meat is about the size and thickness of playing cards





A medium apple or peach is about the size of a tennis ball.





1 ounce of cheese is about the size of 4 stacked dice.





1/2 cup of ice cream is about the size of a racquetball or tennis ball.





1 cup of mashed potatoes or broccoli is about the size of your fist.





1 teaspoon of butter or peanut butter is about the size of the tip of your thumb.





1 ounce of nuts or small candies equals one handful.



Eating Out

Choose foods with care when eating out. Often you can ask for foods that are not on the menu (such as skim milk, or margarine instead of butter). You also can ask for food to be made with no extra fat or salt. Remember, just because a portion is large or an item comes with the food ordered (such as gravy, sauces and whipped toppings) does not mean you have to eat it. Ask for the chef to leave off the sauces and gravies. Order the smaller-sized portion if available.

Eating healthfully at fast-food restaurants can be a challenge. Therefore, it is best to limit how often you eat fast-food, but when you do, try to choose healthier options. Many fast-food restaurants have nutrition information on web sites or menus.

Choose a small hamburger or grilled chicken sandwich instead of a double or triple cheeseburger. Some fast-food restaurants offer side salads and low-fat or fat-free salad dressings. Avoid fatty sandwich toppings, such as bacon, mayonnaise and cheese—choose lettuce, tomato, onion, ketchup and mustard instead.

Avoid "supersizing," which can add significant amounts of fat and calories to your meal. For example, an extralarge soft drink (48 ounces) adds about 450 calories, and an extralarge order of french fries (7 ounces) adds about 600 calories to your meal.

Appetizers

Choose fruit, fruit juice, fresh vegetables with low-fat dip or salad with low-fat or fat-free dressing. Avoid cheeses, fried foods or high-fat dips and spreads.

Soups and Salads

Choose plain fruit salads, gelatin salads or vegetable salads. Use fat-free dressing or a small amount of regular oil-based dressing (such as Italian, French or vinaigrette) served on the side (dip your fork into the dressing and then spear the salad). Avoid salads made with cream cheese, mayonnaise, sour cream, bacon, high-fat meats or eggs. Avoid cream soups and chowders, as these soups are high in fat and salt. Some vegetable and chicken-based soups can be low in fat.

Entrees

Choose baked or broiled fish (without fat added), grilled or roasted chicken or turkey (do not eat the skin), lean veal, pork or beef (limit the amount to 3 ounces. If the portion served is large, you can share it with someone or take some home for another meal.

Starches

Select a baked potato with margarine, unbuttered rice, noodles or other pasta, plain rolls or bread. Avoid buttered noodles and rice, rice pilafs or wild rice dishes, au gratin, scalloped, fried, buttered or mashed potatoes.

Vegetables

Ask for vegetables made without fat. Avoid vegetables that are buttered, creamed or made with fat or cheese.



Desserts

Choose fruit ice, low-fat ice cream, frozen yogurt, sherbet or angel food cake. Avoid pies, cakes, cookies, ice cream, puddings and custard.

Beverages

Choose skim or 1% milk, coffee, unsweetened tea, juices (made with 100% juice) or diet soft drinks. Alcoholic beverages and drinks made with caffeine are allowed if approved by your doctor and used in moderation. Avoid whole milk and drinks made with ice cream.

Shopping and Cooking Tips

Read Food Labels

Make a habit of reading labels before buying food. Use them to compare different foods and different brands, and to make better food choices. Many foods are labeled as "low-fat," "lean," "low saturated fat," and "light". Some of these foods may be good choices, while others may not. The nutrition information on the label will tell you the difference.

Serving Size—Pay close attention to serving size. If you eat twice that serving size you will get twice the amount of nutrients, calories, and fat per serving.

% Daily Value—This column is just a general guide. It is based on a person who eats 2,000 calories per day. It shows what percentage of the daily recommended amount of nutrients you would get in one serving of the food. Since you may eat more or less than 2,000 calories per day, these numbers may not be correct for you.

Ingredient Listings

These are the ingredients that are found in the product. They are listed in decreasing order of how much is in the food. The number next to the ingredient is the number of grams of that ingredient in a serving size.

Avoid foods made with ingredients high in saturated fat or sodium. In general, look

for foods with no more than 3 grams of fat per 100 calories or no more than 30 percent of the total calories coming from fat. Saturated fat should be one gram or less.

Trans Fat—

The lower the number, the better.

If this number is not listed

Nutrition I	racts
8 servings per container Serving size 2/3 cup (55g)	
Amount per serving Calories	230
9	6 Daily Value
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol Omg	0%
Sodium 160mg	7%
Total Carbonydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	7.0
Includes 10g Added Su	gars 20%
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 235mg	6%

separately on the label, add up the grams of saturated fat, monounsaturated fat and polyunsaturated fat. The difference between this number and the Total Fat listed can tell you how much trans fat is in one portion of that food.

Manufacturers' Terms

Here are definitions of terms commonly used by manufacturers:

Sodium Free—less than 5 mg of sodium per serving

Salt Free—meets the requirements for "Sodium Free" (see above)

Very Low Sodium—35 mg or less sodium per serving

Low Sodium—140 mg or less sodium per serving

Reduced Sodium—at least 25 percent less sodium when compared with the "regular" product

Less Sodium—at least 25 percent less sodium when compared with the "regular" product

Light in Sodium—50 percent less sodium per serving when compared with the "regular" product

Unsalted, Without Added Salt, No Salt Added— no salt is added during processing

Fat Free—contains a trivial amount of fat, saturated fat or cholesterol

Low Fat—3 grams of fat or less per serving

Low Saturated Fat—1 gram of saturated fat or less per serving

Low Cholesterol—20 mg of cholesterol or less per serving

Light—the product contains one-third fewer calories or half the fat of the

"regular" product. If the food gets onehalf or more of its calories from fat, there must be a reduction of 50 percent of total fat or calories (the term "light" also can mean color or texture).

Lean—less than 10 grams of fat, with less than 4 grams of saturated fat, and less than 95 mg of cholesterol per 3-1/2 ounce serving (or 100 gram serving)

Extra Lean—less than 5 grams of fat, with less than 2 grams saturated fat, and less than 95 mg cholesterol per 3-1/2 ounce serving (or 100 gram serving)

Follow These Guidelines When Selecting Convenience Foods

Frozen Meals—meals should contain less than 600 mg of sodium and less than 10 grams of fat, or a single entree with less than 250 mg of sodium and less than 3 grams of fat

Sweets—one serving should contain less than 140 mg of sodium and 3 grams of fat or less

Snack Foods—one serving should contain less than 140 mg of sodium and 3 grams of fat or less

Cheese—one serving should contain less than 250 mg of sodium and 5 grams of fat or less per ounce



Healthy Substitution

 Do not fry. Instead, dip meat in skim milk, plain yogurt, egg substitute or egg white, then dip into bread crumbs and bake.

Substitute Monounsaturated and Polyunsaturated Fats for Saturated Fats

- If a recipe calls for 1 cup margarine or butter, substitute 3/4 cup unsaturated oil.
- If a recipe calls for 1 cup solid shortening, substitute 2/3 cup unsaturated oil.
- If a recipe calls for 1 tablespoon margarine, substitute 2-1/4 teaspoons unsaturated oil.

Chocolate

- Regular chocolate contains saturated fat. Cocoa powder can be used instead, since most of the fat has been removed.
- If a recipe calls for 1 ounce unsweetened baking chocolate, substitute 3 tablespoons cocoa powder plus 1 tablespoon allowed oil.

Eggs

Substitute egg whites or egg substitutes for whole eggs:

- If a recipe calls for 1 whole egg, substitute with 2 egg whites or 1/4 cup egg substitute, or 1 egg white plus 1 teaspoon oil.
- If a recipe calls for 1 egg yolk, substitute with 1 tablespoon cornstarch, flour or arrowroot per 1/2 cup of liquid.

Heart-Healthy Recipes

Here are some low-fat, low-salt recipes to get you started.

Meat Dishes

Oven-Fried Parmesan Chicken

4 boneless, skinless chicken breast halves
1 cup nonfat plain yogurt
3/4 cup plain bread crumbs
4 tablespoons Parmesan cheese
2 tablespoons flour
1 tablespoon paprika
pinch cayenne pepper
1 teaspoon onion powder
1/2 teaspoon garlic powder
Nonstick cooking spray

- 1. Place the chicken in yogurt and refrigerate. Preheat oven to 450° F.
- 2. Mix the remaining ingredients (except cooking spray) in a Ziploc bag. Place the chicken in the bag and shake one piece at a time.
- 3. Place chicken on prepared baking sheet and lightly spray the top with nonstick spray. Bake 20 minutes or until chicken is fork-tender and juices run clear.

Makes 4 servings.
Nutrition facts per serving:
280 calories
34 grams protein
16 grams carbohydrates
4 grams fat
1 gram fiber
74 mg cholesterol
80 mg calcium
2 grams iron
316 mg sodium



Recipe Source: Nutrition Council of Greater Cincinnati nutritioncouncil.org

Lemon-Herb Roast Chicken

Vegetable oil spray

1/2 tablespoon dried thyme, crumbled

1/2 teaspoon dried basil, crumbled

1/2 teaspoon pepper

1/4 teaspoon salt

4-pound roasting chicken

2 medium garlic cloves, minced

1 lemon, cut into wedges

1 bay leaf

1/2 medium onion

1/2 cup dry white wine (regular or nonalcoholic)



- 1. Preheat the oven to 350° F. Lightly spray a roasting pan and rack with vegetable oil spray.
- 2. In a small bowl, stir together the thyme, basil, pepper and salt.
- 3. Discard the giblets and all the visible fat from the chicken. Rub the outside of the chicken with the herb mixture. Put the chicken with the breast side up on the rack in the roasting pan. Put the garlic, lemon, bay leaf and onion in the chicken. Pour the wine into the pan.
- 4. Lightly spray the outside of the chicken with vegetable oil spray.
- 5. Bake for 20 minutes per pound, or until the internal temperature reaches 180° F or the juices run clear when a thigh is pierced with a sharp knife.
- 6. Let rest for 15 minutes before carving. Discard the skin before serving the chicken.

Makes 6 servings.
Nutrition facts per serving:
188 calories
31 grams protein
1 gram carbohydrates
0 grams fiber
102 mg cholesterol
4.5 grams total fat
1 gram saturated fat
1 gram polyunsaturated fat
1.5 grams monounsaturated fat
210 mg sodium



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Chicken and Vegetable Soup

- 1 pound boneless, skinless chicken breasts, all visible fat discarded
- 1 medium zucchini, thinly sliced
- 1 medium red bell pepper, chopped
- 1-3/4 cups fat-free, low-sodium chicken broth
- 2 ounces dried no-yolk egg noodles
- 1/2 cup frozen whole-kernel corn
- 1/2 cup water
- 1/2 teaspoon dried thyme, crumbled
- 4 or 5 medium green onions (green and white parts), finely chopped (about 1/2 cup)
- 1/4 cup finely snipped fresh parsley
- 1 tablespoon olive oil
- 1/2 teaspoon salt
- 1/4 teaspoon pepper
- 2 tablespoons shredded or grated Parmesan cheese
- 1. Cut the chicken into bite-size pieces.
- 2. Heat a Dutch oven over medium-high heat. Remove from the heat and lightly spray with vegetable oil spray (being careful not to spray near a gas flame). Cook the chicken for 2 to 3 minutes, or until no longer pink on the outside, stirring constantly. Transfer the chicken to a plate.
- 3. Lightly spray the Dutch oven with vegetable oil spray (no need to wipe clean first). Cook the zucchini and bell pepper for 2 minutes, or until just beginning to brown lightly on the edges, stirring constantly.
- 4. Stir in the broth, noodles, corn, water, and thyme. Increase the heat to high and bring to a boil. Reduce the heat and simmer, covered, for 10 minutes.
- 5. Stir in the chicken and any accumulated



- juices. Cook for 3 minutes, or until the chicken is no longer pink in the center. Remove from the heat.
- 6. Stir in the remaining ingredients except the Parmesan.
- 7. To serve, ladle into bowls. Sprinkle with the Parmesan.

Makes 4 servings.

Nutrition facts per serving:

268 calories

31 grams protein

21 grams carbohydrates

4 grams fiber

68 mg cholesterol

6 grams total fat

1.5 grams saturated fat

1 gram polyunsaturated fat

3 grams monounsaturated fat

436 mg sodium



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Fish Dish

Baked Herbed Fish with Rice

6 cups cooked rice

1-1/2 lbs. catfish, cod, orange roughy, haddock or other filleted fish

1 teaspoon oil pinch of salt

1 teaspoon thyme or tarragon

1 teaspoon minced garlic

3/4 cup fresh or frozen chopped onion

1 cup white wine or skim milk (not both) sprinkle of paprika

- 1. Start cooking rice. Preheat oven to 400° F.
- 2. Place fish fillets in baking dish. Combine oil with thyme, salt and garlic. Spread over fish. Top with onions. Pour wine or milk over the fish.
- 3. Bake for 10 to 15 minutes or until fish flakes with a fork.

Makes 4 servings.

Nutrition facts per serving:

(includes 1-1/2 cups rice per serving):

528 calories

47 grams protein

73 grams carbohydrates

2 grams fiber

2 grams fat

93 mg cholesterol

147 mg calcium

433 mg iron

211 mg sodium

Recipe Source: Nutrition Council of Greater Cincinnati www.nutritioncouncil.org

Vegetarian Dishes

Glazed Sweet Potatoes

2 medium sweet potatoes 1/2 cup unsweetened apple juice or cider

- 1. Wash and cut potatoes into chunks.
- 2. Place in small saucepan, cover with water and bring to a boil.
- 3. Boil for 10 to 15 minutes or until tender. Drain and let cool slightly.
- 4. When cool enough to touch, slip off skin. Add apple juice and cook over low heat until the liquid forms a shiny glaze.

Makes 3 servings.

Nutrition facts per serving:

188 calories

2 grams protein

44 grams carbohydrates

2.7 grams fiber

0 grams fat

0 mg cholesterol

25,000 IU vitamin A (498% RDA)

25 mg vitamin C (42% RDA)

36 mg calcium

1.6 mg iron

22 mg sodium

Recipe Source: Nutrition Council of Greater Cincinnati www.nutritioncouncil.org

Baked Fries with Creole Seasoning

4 medium unpeeled russet potatoes (1-1/4 to 1-1/2 pounds)

Creole or Cajun Seasoning:

- 1/2 teaspoon chili powder
- 1/2 teaspoon ground cumin
- 1/2 teaspoon onion powder
- 1/2 teaspoon garlic powder
- 1/2 teaspoon paprika
- 1/2 teaspoon black pepper
- 1/4 teaspoon salt
- 1/8 teaspoon cayenne (optional)

Vegetable oil spray

- 1. Cut the potatoes into long strips about 1/2" wide. In a large bowl, soak for 15 minutes in enough cold water to cover by 1."
- 2. Meanwhile, in a small bowl, stir together the seasoning ingredients. Set aside. Preheat the oven to 450° F. Lightly spray a large baking sheet with vegetable oil spray.
- 3. Drain the potatoes and pat dry with paper towels. Spread the potatoes in a single layer on the baking sheet. Lightly spray the tops with vegetable oil spray. Sprinkle with the seasoning mixture.
- 4. Bake for 30 to 35 minutes or until crisp.

Makes 4 servings.
Nutrition facts per serving:
106 calories
4 grams protein
27 grams carbohydrates
3 grams fiber

0 mg cholesterol 0 grams total fat 150 mg sodium



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Mashed Sweet Potatoes for One

1 medium sweet potato

- 1 to 2 tablespoons orange or pineapple juice
- 1/8 to 1/4 teaspoon cinnamon, nutmeg or ginger
- 1. Wash sweet potato and pierce it several times with a fork, then place on a paper towel.
- 2. Microwave for approximately 6 minutes or until cooked through. Let sit for 1 to 2 minutes.
- 3. Cut open and mash with juice and seasonings to taste.

Makes one serving.

Nutrition facts per serving:

120 calories

2 grams protein

29 grams carbohydrates

2.7 grams fiber

0 grams fat

0 grams cholesterol

25,000 IU vitamin A (498% RDA)

25 mg vitamin C (42% RDA)

29 mg calcium

1.6 mg iron

21 mg sodium

Recipe Source: Nutrition Council of Greater Cincinnati www.nutritioncouncil.org

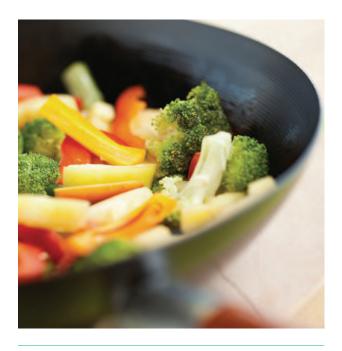


Basic Stir-Fried Vegetables

- 1 tablespoon oil
- 1 teaspoon ground ginger
- 1 teaspoon minced garlic
- 1 lb. vegetables (see suggested combinations)
- 1 teaspoon cornstarch
- 2 tablespoons water
- 1/4 cup to 1/2 cup chicken or vegetable broth
- 1 tablespoon reduced-sodium soy sauce 1/2 teaspoon sugar
- 1. Clean and chop or slice vegetables for cooking or use pre-cleaned and chopped varieties.
- 2. Combine broth, soy sauce, ginger and sugar in a small bowl. Combine water and cornstarch in a separate small bowl.
- 3. In a large skillet sprayed with nonstick spray, heat oil. Add garlic and stir-fry for about 30 seconds. Add vegetables according to their cooking times. Stirfry until crisp tender.
- 4. Add broth mixture. Simmer, covered, until vegetables are done. Thicken sauce with cornstarch paste. Serve with steamed rice.

Makes 4 servings.
Nutrition facts per serving
(includes 1 cup steamed rice):
250 calories
4 grams fat

Recipe Source: Nutrition Council of Greater Cincinnati www.nutritioncouncil.org.



Suggested Combinations for Basic Stir-Fried Vegetables

- Cabbage, onions, green pepper, fresh mushrooms, carrots and snow peas
- Chinese cabbage and dried mushrooms
- Broccoli, fresh mushrooms and carrots
- Zucchini, green pepper, mushrooms, onions and tomatoes
- Cauliflower and fresh mushrooms

Desserts

Chocolate Oatmeal Cookies

1-1/2 cups firmly packed light brown sugar

1/2 cup sifted unsweetened cocoa powder

1/2 cup fat-free milk

1/4 cup acceptable stick margarine, softened

1/4 cup pureed dried plums or unsweetened baby food dried plums

2 teaspoons vanilla extract

1-3/4 cups all-purpose flour

2-1/2 teaspoons baking powder

1/4 teaspoon salt

1-1/2 cups uncooked quick-cooking oatmeal

- 1. Preheat the oven to 350° F.
- 2. In a large mixing bowl, cream the brown sugar, cocoa powder, milk, margarine, dried plums and vanilla.
- 3. In a small bowl, sift together the flour, baking powder and salt. Beat into the brown sugar mixture.
- 4. Stir in the oatmeal.
- 5. Drop by teaspoonfuls onto ungreased baking sheets. (You should have about 60 cookies.)
- 6. Bake for 7 to 9 minutes, or until set in the center (the cookies don't jiggle when gently shaken).

Makes 30 servings. Two cookies per serving.

Nutrition facts per serving:

100 calories

2 grams protein

21 grams carbohydrates

1 gram fiber

0 mg cholesterol

1 gram total fat

77 mg sodium



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Simply Superb Banana Cream Pie

- 2 cups sliced banana (2 medium bananas)
- 1 chocolate-flavored graham cracker pie crust
- 1 package sugar-free instant banana pudding mix
- 2/3 cup nonfat dry milk powder
- 1-1/3 cups water
- 1 cup light whipped cream
- 1 tablespoon chocolate syrup
- 1. Layer bananas on bottom of pie crust. In a medium bowl, combine dry pudding mix and dry milk powder. Add water. Mix well using a wire whisk. Blend in 1/4 cup light whipped cream. Pour mixture over bananas. Refrigerate for about 15 minutes.
- 2. Spread remaining 3/4 cup light whipped cream evenly over filling. Drizzle chocolate syrup over top. Refrigerate until ready to serve.

Makes 8 servings.

Nutrition facts per serving: 214 calories 6 grams fat 38 grams carbohydrates 3 grams protein 1 mg cholesterol .7 grams fiber 78 mg calcium .7 mg iron 298 mg sodium

Recipe Source: Adapted by the Nutrition Council of Greater Cincinnati from "Healthy Exchanges Cookbook" by JoAnna M. Lund.
www.nutritioncouncil.org



1-2-3 Peach Cobbler

1/2 teaspoon ground cinnamon

1 tablespoon tub margarine

1 tablespoon vanilla extract

1 cup dry pancake mix

2 tablespoons cornstarch

2/3 cup all-purpose flour

1 cup peach nectar

1/4 cup sugar

2/3 cup pineapple juice or peach juice 2 cans (16 oz. each) peaches, packed in juice, drained; or 1-3/4 lb. fresh, sliced peaches

2/3 cup evaporated skim milk

1/4 teaspoon nutmeg

1 tablespoon brown sugar

- Combine cinnamon, vanilla, cornstarch, peach nectar and pineapple or peach juice in sauce pan over medium heat. Stir constantly until mixture thickens and bubbles. Add sliced peaches to mixture. Reduce heat and simmer for five to 10 minutes.
- 2. In another sauce pan, melt margarine and set aside. Lightly spray 8" square glass dish with cooking spray. Pour hot peach mixture into dish.
- 3. In another bowl, combine pancake mix, flour, sugar and melted margarine. Stir in milk. Quickly spoon this over peach mixture. Combine nutmeg and brown sugar. Sprinkle on top of batter. Bake at 400° F for 15 to 20 minutes or until golden brown. Cool and cut into 8 pieces.

Makes 8 servings.
Nutrition facts per serving:
271 calories
4 grams total fat
less than 1 mg cholesterol
263 mg sodium
2 grams total fiber
4 grams protein
54 grams carbohydrates

Recipe source: Nutrition Council of Greater Cincinnati www.nutritioncouncil.org



Notes:



Notes:



What is Heart Failure

Heart failure is not a disease, but a condition that occurs when your heart does not pump as well as it should. This does not mean that your heart has stopped working. Chronic heart failure, a type of heart failure that cannot be fixed, is a problem that you will have for the rest of your life. Although there is no cure for chronic heart failure, it can be managed successfully.

About 7 million adults in the United States have heart failure and it is one of the leading causes of hospitalizations. According to the American College of Cardiology, (2017), more than 20% of patients with heart failure are readmitted within 30 days and up to 50% by 6 months. You can prevent readmission by following the guidelines provided by your doctor.

Causes of Heart Failure

All of us lose some blood-pumping ability in our hearts as we get older. If you have heart failure, however, other health problems have either damaged the heart or made it work too hard. If you have heart failure, chances are you have (or had) one or more of the following:

Coronary Artery Disease

Less blood reaches the heart muscle. The area of muscle with decreased blood doesn't pump as well. The healthy heart muscle that remains has to work harder.

Past Heart Attack (Myocardial Infarction)

A part of the heart muscle dies and the remaining healthy muscle has to pump even harder to keep up.

High Blood Pressure (Hypertension)

When pressure in the blood vessels is too high, the heart has to pump harder than normal. Over time, the heart chambers get larger and weaker.

Abnormal Heart Valves

When valves don't open or close all the way during each heartbeat, the heart muscle has to work harder to keep the blood moving in the proper direction.

Heart Muscle Disease (Cardiomyopathy) or Inflammation (Myocarditis)

Heart muscle can be damaged by drug or alcohol abuse, viral infections or unknown reasons. With any heart muscle damage, the rest of the heart has to work harder.

Heart Defects Present at Birth

If the heart doesn't form correctly, the healthy parts have to work harder to make up for it.

Severe Lung Disease

When the lungs don't work properly, the heart has to work harder to get oxygenrich blood to the rest of the body.

Diabetes

If you have diabetes, you have up to eight times greater risk of having heart failure. The disease process in diabetes can damage the heart muscle. Good control of your glucose (sugar) level can decrease this risk.

Abnormal Heart Rhythms, too slow or too fast, can make heart failure worse.



Signs and Symptoms

Your heart pumps blood to all parts of your body—your feet, legs, hands, brain and muscles. Heart failure occurs when the heart cannot pump enough blood to keep up with the body's needs. Congestion (buildup of fluid) can occur. Because of this, you may notice any of the following signs or symptoms:

- Swelling in the feet, ankles and/or legs
- Bloating (fluid in abdomen)
- Fluid in your lungs
- Cough
- Shortness of breath with activity, or even at rest
- Difficulty breathing while lying flat
- Waking up with shortness of breath
- Tiredness and fatigue with the simplest activities
- Loss of appetite
- Nausea
- Weight gain over a short period of time
- Inability to concentrate
- Rapid heart rate, often irregular
- Dizziness or lightheadedness
- Decreased urination
- The need to urinate more often during the night

Types of Heart Failure

Heart failure can involve the heart's left side, right side or both. It usually affects the left side first, causing shortness of breath. The term congestive heart failure often is used to describe everyone with heart failure.

However, congestion (the buildup of fluid) is just one feature of the condition and does not apply to everyone.

Systolic Heart Failure occurs if the left side of the heart loses its ability to pump blood throughout the body. The normal heart pumps more than half of its blood out of the left side with each beat. The amount of blood that is pumped out is called the ejection fraction. A normal ejection fraction is greater than 50 percent. With systolic heart failure, the ejection fraction falls below 40 percent. The heart begins to receive more blood than it can pump out to the body. Over time, the heart gets bigger and stretches as it works harder to pump more blood.

Diastolic Heart Failure occurs when the heart wall becomes thick and stiff over time, and the heart has a problem relaxing. Because the muscle has become stiff, the heart cannot properly fill with blood. The ejection fraction is normal. However, the volume of blood received and pumped by the heart is less than normal. People with this type of heart failure also may have shortness of breath, swelling of the feet and other heart failure symptoms.

The New York Heart Association (NYHA) defines classes of heart failure according to how it affects a person's life. With medication and lifestyle changes, you may be able to improve your class level and your quality of life.



Class	How You Feel
	No symptoms and no limitation in ordinary physical activity.
II	Mild symptoms and slight limitation during ordinary activity. Comfortable at rest.
III	Marked limitation of activity due to symptoms, even during less-than-ordinary activity. Comfortable only at rest.
IV	Severe limitations. Symptoms present even at rest.

Treating Heart Failure

Heart failure caused by structural problems, such as a heart valve problem, may be cured. These defects can be fixed with surgery.

There is no cure for heart failure caused by damaged heart muscle. However, treatment can improve your quality of life and length of survival. This is can be done through lifestyle changes (how you live and eat every day) and medication.

You can lessen the effects of heart failure by controlling your risk factors for heart disease:

- Stop smoking or use of other tobacco products
- · Lose weight if needed
- Avoid alcohol
- Make dietary changes to reduce the amount of salt and fat you eat
- Get regular exercise
- Exercise programs need to be monitored by a healthcare provider

Several types of drugs have proven useful in the treatment of heart failure:

• Diuretics (water pills) help reduce the

- amount of fluid in the body and are useful for persons with fluid retention and high blood pressure.
- Digitalis increases the force of the heart's contractions (pumping action), helping to improve circulation.
- Angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARBs) improve survival and may slow, or perhaps even prevent, the loss of heart pumping action. ACE-inhibitors and ARBs lower the pressure inside the arteries and veins. As a result, the heart does not have to work as hard to pump the blood through the vessels.
- Beta blockers block the effects of harmful stress hormones (substances produced by your body that make heart failure worse and contribute to your symptoms).
- Aldosterone inhibitors prevent the retention of salt and fluid in the body. This may prevent your heart failure from getting worse.

Pacemakers and Defibrillators

Pacemakers and defibrillators are devices that are placed by the doctor to help your heart failure. The doctor puts the device just under your skin, near the collarbone.

Insulated wires are threaded through blood vessels and connected to the device. The wires may be placed in one or both sides of the heart.

Internal Cardioverter Defibrillator (ICD) is a device used to reset the heart if it goes into an erratic or very fast rhythm. This is used to prevent sudden death. A jolt is felt when the ICD fires. If this happens, go to the emergency room.

Cardiac Resynchronization (CRT)/
Biventricular Pacemaker (BiV) may be used to treat certain types of heart failure. The doctor puts a special pacemaker just under your skin near the collarbone. The purpose of CRT is to let both sides of your heart beat together. You usually cannot feel the CRT electrical impulses.

Living with Heart Failure

Weigh Yourself Daily

Please do the following:

- Weigh yourself first thing in the morning after you urinate and before eating.
- Weigh yourself without clothes on.
- Use the same scale and place it on a hard surface.
- Write down your weight every day on a weight record.
- Call your doctor if your weight goes up by 2 to 3 pounds overnight, or if it goes up 5 pounds over a week.
- Bring your weight record with you to every doctor's appointment.
- Take your medications as prescribed.

Maintain Daily Activities and Exercise

Depending on how bad your heart failure is, you may have difficulty with your daily activities.

Always consult your doctor for suggestions on daily activity and exercise.

The benefits of regular exercise include:

- Strengthens muscles
- Helps you feel better emotionally
- Helps you sleep better
- Reduces stress and tension
- Helps you control hypertension (high blood pressure)
- Helps you control cholesterol

Suggestions for Managing Your Daily Activities

- Pace yourself throughout activities don't rush.
- Space activities throughout the day, allowing for lots of rest periods.

Suggestions for Exercise

- Comfortable, easy exercise is recommended for most people who have heart failure. Studies show exercise may slow the progression of heart failure and decrease your symptoms.
- Regular exercise may help you feel better and become stronger so that you can enjoy your regular activities. It can give you a more positive outlook on life.
- Avoid outdoor exercise when it is too hot, too humid or too cold.



- Stop what you are doing if you have any of the following:
 - -Increased or unusual fatigue
 - -Increased shortness of breath
 - -Coughing after exertion
 - -Lightheadedness or dizziness
 - -Chest pain

Eat Healthy

You will need to make changes in the food you eat and limit the amount of sodium that you eat. The most common source of sodium is table salt. Too much sodium in your diet can cause your body to hold more fluid. This extra fluid makes it harder for your heart to pump.

Your doctor will tell you how much sodium you are allowed. The American Heart Association recommends limiting sodium to to less than 1,500 milligrams per day.

1 level teaspoon of salt = 2,400 mg of sodium

Here are some ways to limit the amount of sodium in your diet.

- 1. Read labels on the food you buy. Choose reduced-sodium foods.
- Limit the use of canned, ready-to-use and processed foods that are high in sodium such as bacon, sausage, cold cuts, frozen dinners, canned soups, chips and other salted snacks.
- 3. Limit or avoid high-sodium condiments such as soy sauce, pickles, olives, BBQ sauce, mustard and ketchup.

- 4. Use other seasoning such as pepper, garlic, onions, salt-free herb blends or herbal vinegar.
- 5. Do not add salt at the table. This includes anything that says "salt" on the label such as garlic salt, seasoned salt or onion salt. See "Eating with Your Heart's Consent" in this book for low-sodium seasoning ideas.

Fluid Intake

You may be asked to limit the amount of fluids you drink to 1.5 liters/day (1500 ml). The heart's work is easier if it has less fluid to pump. Discuss with your doctor the amount of fluids that you should drink.

Shopping and Cooking Tips

Read Food Labels

Make a habit of reading labels before buying food. Use them to compare different foods and different brands. Try to find the foods with the lowest amount of fat, cholesterol and sodium.

Nutrition Fa	acts
8 servings per container Serving size 2/3 cu	ıp (55g)
Amount per serving Calories	230
% Da	illy Value*
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol Omg	0%
Sodium 160mg	7%
Total Carponydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Added Sugars	20%
Protein 3g	
Maria D. Carrie	10%
Vitamin D 2mcg	20%
Calcium 260mg	-
Iron 8mg	45%
Potassium 235mg	6%

REMEMBER

The American Heart Association recommends limiting sodium to less than 2000 milligrams per day.

Low Sodium Food List

Food Group	Allow	Not Recommended
Soup	Homemade soups made without added salt and with allowed ingredients. Unsalted broth or bouillon. Low-sodium canned soups. Low-sodium cream soups made with allowed amount of milk.	Regular broth or bouillon. Regular canned or frozen soups or dry soup mixes. Any soup made with added salt or salty ingredients.
Meat, Poultry, Fish, Dried Beans and Nuts 1 oz. contains approximately 22 mg sodium.	Fresh beef, veal, pork, lamb, poultry, game, fresh or frozen unsalted plain fish (no breading or batter), unsalted canned salmon or canned tuna. Regular peanut butter limited to 1 tablespoon per day. As desired: low-sodium cheese, dried beans and dried peas (prepared without salty ingredients—see "Avoid" list). Low-sodium peanut butter.	Canned, dried, salted or smoked meats, such as bacon, ham, salt pork, sausage, hot dogs, brats, chipped beef, corned beef, luncheon meats or Kosher meat. Regular canned salmon, tuna or sardines. Canned, dried, smoked or salted fish. Regular cottage cheese. Regular cheeses. Low-fat or fat-free cheese (unless also low in sodium). Regular frozen dinners.
Eggs 1 egg contains about 65 mg sodium.	Limit eggs to 3 per week. Occasionally an additional egg may be substituted for 2 ounces of meat.	Eggs prepared with salt, salted meat or bacon fat.
Potatoes and Starches 1/2 cup provides about 5 mg sodium.	Fresh white and sweet potatoes. Brown or white rice, macaroni, noodles, pasta prepared without added salt or high-sodium seasonings. Unsalted potato chips.	Frozen, instant, powdered or regular canned potatoes. Seasoned rice, pasta and potato side dishes (such as convenience macaroni and cheese mixes, etc.)



Low Sodium Food List (continued)

Food Group	Allow	Not Recommended
Vegetables 1/2 cup serving of most fresh or frozen vegetables contains about 10 mg sodium. Vegetables naturally higher in sodium contain about 40 mg sodium per 1/2 cup serving.	All fresh or frozen vegetables except those listed under "Avoid." Low-sodium tomato juice. Low-sodium vegetable juices. Low-sodium or "no salt added" canned vegetables. "No salt added" tomato sauce, paste or puree.	Vegetables and vegetable juices canned with salt. Any vegetable prepared in brine such as sauerkraut, pickles or hominy. Frozen succotash, lima beans and peas. Vegetables cooked with salty meat or salted fat. Regular canned tomato sauce, paste or puree.
Breads and Cereals 1 serving of regular bread contains about 150 mg sodium.	White, whole wheat, whole grain, Italian, sourdough, French breads. Yeast rolls. Pita bread. Hamburger or sandwich buns. Crackers with "unsalted tops" or low-sodium crackers. Unsalted matzo. Unsalted or low-sodium pretzels. All cereal except those listed under "Avoid."	Breads, crackers or rolls with salted tops. Quick breads made with regular baking powder, baking soda, salt or self-rising flour. Prepared baking mixes. Salted snack foods. Quick-cooking or instant hot cereals.

Low Sodium Food List (continued)

Food Group	Allow	Not Recommended		
Fats 1 tsp. of salted butter or margarine contains about 45 mg sodium. 1 tbsp. regular	Limit: Regular butter or margarine to no more than 5 tsp. per day. Regular salad dressing to no more than 1 tbsp. per day.	Salted butter, margarine or regular salad dressings in excess of daily allowance. Bacon, salt pork, fat-free salad dressings (unless also low in sodium).		
salad dressing provides between 100–200 mg sodium.	One tbsp. of cream cheese can be substituted for 1 tsp. regular butter or margarine. As desired: Unsalted margarine, butter, oil, vegetable shortening, low-sodium mayonnaise, unsalted salad dressings made with allowed ingredients, unsalted gravy.			
Fruits One serving of fruit contains about 2 mg sodium.	All fresh, frozen or canned.	None.		
Milk 1 cup provides about 120 mg sodium.	Limit to 2 cups per day: Whole, 2%, 1%, skim milk. Reconstituted nonfat dry milk. Chocolate milk. Evaporated or condensed milk. Cocoa made with milk allowance. Yogurt. Soy milk.	Buttermilk. Malted milk. Milk mixes. Dutch processed chocolate. Regular cheeses. Cottage cheese.		
Beverages	Coffee, tea (decaffeinated or regular). Regular non-carbonated beverages. Regular soft drinks. Sugar-free (diet) soft drinks sweetened with NutraSweet or Splenda. Salt-free club soda.	Commercially softened water (purified water is OK). Artificially sweetened beverages containing sodium. Club soda. Sports or "energy" drinks.		

Low Sodium Food List (continued)

Food Group	Allow	Not Recommended
Desserts 1 regular dessert contains about 150 to 350 mg sodium.	Limit to one serving a day from the following list: regular cakes, cookies, gelatin, pie. As desired: Fruit ice; sherbet; baked dessert prepared without added salt, baking powder or baking soda. Ice cream, pudding, custard should be used as part of milk allowance.	Any regular dessert in excess of daily allowance.
Seasonings	Herbs, spices, pepper, sodium-free seasoning mixes such as Mrs. Dash. Fresh garlic and onion. Garlic and onion powders. Butter substitutes, such as Molly McButter.	Salt, "lite" salt, "Salt Sense," seasoning salts such as celery salt, garlic salt and onion salt. Lemon pepper (unless sodiumfree). Monosodium glutamate (MSG). Meat tenderizers. Cooking wines. Some flavored vinegars (check label).

Dining Out and Sodium

It's important to understand what's on the menu when you eat out. You can eat a low sodium heart-healthy diet if you know what to look for. When choosing a restaurant, follow these tips:

- Avoid Fast Food Restaurants.
- No All-You-Can-Eat Try to avoid

restaurants that offer all-you-can-eat buffets or specials, because you will eat more food than you need, most of which is high in sodium.

 Try a Little Planning – If you're familiar with a restaurant's menu, decide what you're going to order before you go. That will help you avoid the temptation of ordering meals high in fat and sodium.



Your Heart Failure Management and Care Team Partnership

Please partner with your physician and care team to provide the best quality of life to you as you manage your diagnosis of heart failure. You have a responsibility to ensure that you are managing your heart failure and reducing the likelihood of needing to return to the hospital. To do so, make sure to do the following:

- Follow-Up Appointment with your cardiologist within 14 days of discharge. If you have kidney disease, follow up with your nephrologist within 14 days of discharge.
- Understand Your Medications Know that your medications may change during your admission and may need to be adjusted by your Cardiologist within that first 14-day period, especially if you have kidney disease.
- **Education** Participate in education with your nurse and health care team while in the hospital. Utilize

- your understanding and self-care by completing the checklist in the next section.
- Home Care If you are eligible, accept home care. Your Cardiologists recommend this as they can more easily make changes in your plan of care and monitor your post discharge progress.
- Stop Smoking

Resources

The following Internet sources have good information about heart failure:

American Heart Association **heart.org**

Heart Failure Society of America **hfsa.org**

National Heart, Lung, and Blood Institute **nhlbi.nih.gov**



Weight Log: Weigh yourself daily at the same time. Record your weight here.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							
Week of Weight							

Congestive Heart Failure Zones for Management

GREEN ZONE: All Clear

Your Goal Weight:

- No shortness of breath
- No swelling
- · No weight gain
- No chest pain
- No decrease in your ability to maintain your activity level

GREEN ZONE MEANS:

- Your symptoms are under control
- Continue taking your medications as ordered
- Continue daily weights
- Follow low-salt diet
- Keep all physician appointments

YELLOW ZONE: Caution

If you have any of the following signs and symptoms:

- Weight gain of 2 or more pounds in 1 day
- Increased cough
- Increased swelling
- Increase in shortness of breath with activity
- Increase in the number of pillows needed
- Anything else unusual that bothers you

Call your nurse if you are going into the YELLOW ZONE

YELLOW ZONE MEANS:

 Your symptoms may indicate that you need an adjustment of your medications

Call your home health nurse

Name:
Phone:
Instructions:

RED ZONE: Medical Alert

- Unrelieved shortness of breath: shortness of breath at rest
- Unrelieved chest pain
- · Wheezing or chest tightness at rest
- Need to sit in chair to sleep
- Weight gain or loss of more than 5 pounds in 2 days or in 1 week
- Confusion

Call your physician immediately if you are going into the RED ZONE

RED ZONE MEANS:

You need to be evaluated by a physician right away

Call your Cardiologist (if you have one) or family doctor right away! If you have a home health nurse, contact them to assist as well.

Physician:
Phone:
Instructions:

Notes:

