

# HEART SMART

*A guide to heart care at every age*



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**THERE'S PROMISING NEWS** when it comes to your heart. While yes, heart disease is the number one killer in the United States for both men and women, your odds of avoiding this fate can be surprisingly good—if you practice a few basic health habits.

The reason: Most heart problems tend to develop slowly, over many years. Damage to the arteries, which is what causes heart attack and stroke, builds up as a result of many small choices you make all through life—from what you eat and how physically active you are to what you weigh, how well you manage stress and whether you smoke. That's why, whether you're in your 20s, your 50s or beyond, prevention is the kindest gift you can give your heart.

“We have a huge window of opportunity throughout life to prevent heart disease with healthy habits, and it's best to start early,” says Johns Hopkins expert Seth Martin, M.D., M.H.S.

Here at Johns Hopkins Ciccarone Center for the Prevention of Heart Disease, we like to say that these basics of a heart-healthy life are as easy as **ABCDE**: **A**ssessing your risk, **B**lood pressure control, **C**igarette cessation and **C**holesterol control, **D**iabetes treatment and **D**iet optimization, and **E**xercise. The goal is to help you identify your heart risks and turn them around.

Use this guide as a starting point to learn about heart risk factors and the simple things you can do that will have a real impact on your overall heart health and well-being. Together, we can greatly reduce your odds of heart disease.

“Your doctor can work with you to interpret your key numbers for cholesterol, blood pressure and glucose, and assess your risk for future heart problems,” says Johns Hopkins expert Bill McEvoy, M.D. “It's never too late to make changes that can make a real difference to your heart.”

*Love your heart—and your heart will love you back!*

## MEET OUR EXPERTS

### **Seth Martin, M.D., M.H.S.**

Pollin Preventative Cardiology Fellow at the Johns Hopkins Ciccarone Center for the Prevention of Heart Disease

### **Bill McEvoy, M.D.**

Pollin Preventative Cardiology Fellow at the Johns Hopkins Ciccarone Center for the Prevention of Heart Disease

*“It's never too late to make changes that can make a real difference to your heart.”*

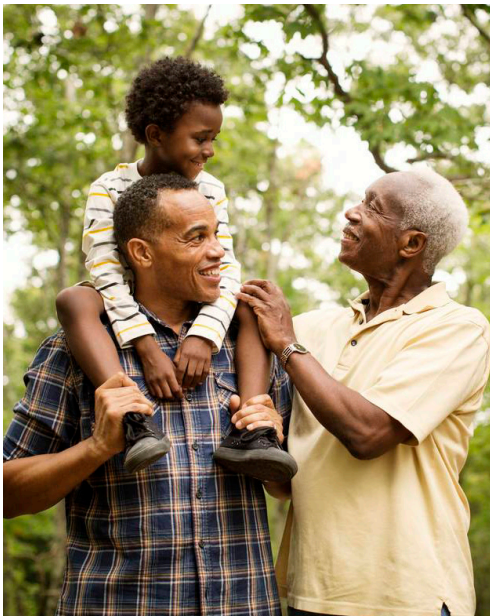
—BILL McEVOY, M.D.

# KNOW YOUR NUMBERS

Keeping track of key measures of heart health will help you spot problems early.

**BY REGULARLY UPDATING** your record of test results, you'll be more aware of changes to your heart health and better prepared to work with your doctor to make necessary changes. Based on your personal health history, your doctor can suggest your optimal numbers and how often you should measure them. (For information about specific heart tests, see page 11.)

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## Heart Disease Risk Factors You Can Control or Treat

- Smoking and exposure to secondhand smoke
- Excess weight
- Being sedentary (physically inactive)
- High cholesterol levels
- High blood pressure
- Diabetes

## Heart Disease Risk Factors You Can't Control

- Your genes (including your race)
- Your age (risk rises as you get older)
- Your gender (men get heart disease earlier)
- Your family history

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### What does diabetes have to do with heart disease?

Diabetes is the strongest risk factor known for heart disease. High glucose (blood sugar) is a key component in the biology that causes hardening of the arteries, or atherosclerosis, which is the main driver of heart attack and stroke. In the cardiology clinic, diabetes is referred to as the number-one “silent killer”—even more so than high blood pressure. Half of all heart attacks occur in people who didn't have any symptoms or warning signs. This is why it's important to get your blood glucose level checked periodically.

—JOHNS HOPKINS EXPERT BILL MCEVOY, M.D.

### BODY MASS INDEX

(BMI)

**Recommended:** Below 25 to 30

My BMI:

My Target:

### BLOOD PRESSURE

**Recommended:** Below 140/90

My Blood Pressure:

My Target:

### CHOLESTEROL

**Recommended:** LDL lower than 130 mg/dL for most individuals, lower than 70–100 mg/dL for those at high risk. HDL of 40 mg/dL or higher. Triglycerides, under 150 mg/dL.

My Cholesterol:

My Target:

### BLOOD SUGAR

**Recommended:** Below 6.4% A1c (“A-one-c” hemoglobin test, or your average blood sugar over the past three months)

My Blood Sugar:

My Target:

### DAILY STEP COUNT

**Recommended:** At least 10,000 steps per day

My Average:

My Target:

# YOUR 20s AND 30s: STAY STRONG

Taking care of your heart at an early age will stave off problems later in life.

**EARLY ADULTHOOD IS** often a time of late nights, eating takeout and junk food, and working long hours—habits that can take a toll on your heart over time. Even as early as the teen years, plaque deposits can start to form in the arteries, but they can take decades to progress to heart disease, says Martin.

## WHAT YOU NEED TO KNOW NOW

Good lifestyle habits developed early on in life can help to prevent heart disease and associated ailments.

## TOP CONCERNS

Poor lifestyle habits, smoking, stress and unchecked anger

## HEART-HEALTHY CHECKLIST

- **DON'T SMOKE, OR IF YOU'RE ALREADY A SMOKER, QUIT.** This is hands-down one of the best things you can do for heart health. Steer clear of secondhand smoke too.
- **ACQUIRE A TASTE FOR A MEDITERRANEAN-STYLE DIET.** Its heart-healthy basics (low saturated fat, lean protein, heavy in vegetables and fruits) can easily be followed for the rest of your life. (See page 5 for more about the Mediterranean-style diet.)
- **TRY DIFFERENT SPORTS OR TYPES OF ACTIVITIES.** The more you try, the sooner you'll be able to identify exercise that you enjoy. Developing habits that keep you active now will help you stick with it throughout life.
- **FIND HEALTHY STRESS OUTLETS.** It's better to offload stress with exercise, yoga or social activities than alcohol, emotional eating or binge-watching TV.
- **COOL DOWN WITH RELAXATION OR ANGER-MANAGEMENT CLASSES.** This is especially helpful if you're hot-tempered. Johns Hopkins research on young men has shown that those who often have angry outbursts have a nearly three times higher risk of premature heart disease and five times higher risk of heart attack.



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### What's the best way to quit smoking?

Different methods work best for different people. Try calling the free Quit Smoking line in your state: 800-QUIT-NOW (800-784-8669). Every state has one. It's staffed by trained coaches who can give you information about options. Some of these programs even offer free nicotine patches. You can also try to schedule more physical activity, such as running, resistance training, playing a recreational sport or adding a new activity to your current workout. Physical activity seems to prevent the urge to smoke, so going to the gym more often can help you kick the habit. And it's a multiple win for your heart, because physical exercise is also linked to lower blood pressure, lower cholesterol, lower blood sugar and a healthy BMI.

—JOHNS HOPKINS EXPERT SETH MARTIN, M.D., M.H.S.

# HEART-HEALTHY EATING AT ANY AGE

Your diet really matters—at every stage of life.

A **MEDITERRANEAN-STYLE** diet can improve heart health in those at risk for, or those who already have, cardiovascular disease. A low-fat diet that provides lean protein and lots of grains, fruits and vegetables helps trim pounds too. Find the basics of this diet here.



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## YOUR HEART-HEALTHY GROCERY CHECKLIST

### MORE FRUITS AND VEGETABLES

- Fresh, frozen or canned (though watch for high sodium levels, especially in canned goods)
- Whole fruit rather than juice
- Choose a variety of colors (as each provides different nutrients)

### HEALTHY OILS

- Olive oil over butter whenever possible
- Avocados
- Nuts
- Fish

### MORE WHOLE GRAINS

- Brown rice, oatmeal, barley, whole wheat

### LOWER-FAT DAIRY

- Skim or 1 percent milk
- Examine labels to avoid added sugar

### LEAN PROTEIN

- Fish (ideally at least twice a week)
- Lean meat or poultry
- Beans and legumes
- Nuts
- Don't add saturated fats and trans fats when cooking proteins (such as frying in shortening)

### LESS PROCESSED FOOD

- Choose whole wheat instead of white bread, brown rice instead of white rice
- Avoid packaged goods
- Beware of partially hydrogenated vegetable oils, added sugars and sodium

### LESS SUGAR

- Watch for added sugars in foods; look at ingredient labels for words ending in “-ose” as well as cane sugar, corn sweetener or raw sugar

### SPICES INSTEAD OF SALT

- Keep an eye out for hidden sodium in packaged goods

## Eat by the Numbers

Follow the American Heart Association guidelines for heart-smart dietary choices.

### 1 CALORIES

Know how much you need per day to maintain or lose weight, based on your age, size, gender, activity level and general health. (Your doctor can advise you on what's best for your individual needs.)

### 2 FATS

In addition to choosing skim, one percent or low-fat dairy products, limit your consumption of saturated fat to no more than 5 percent to 6 percent of total calories. That adds up to about 13 grams of fat for a typical diet of 2,000 calories a day.

### 3 SODIUM

Aim to eat less than 2,400 mg of sodium a day in order to lower blood pressure. The optimal amount is even less—1,500 mg a day.

### 4 ALCOHOL

Drink in moderation, if at all. That's one drink a day for women, two a day for men.

# YOUR 40s: BUILD GOOD HABITS

Make sure to keep your weight in check at this busy time of your life.

**AS YOU HEAD** toward midlife, you may find that you are in the thick of family life and careers. You are often so busy that you may neglect to make health a priority. “This is a time when people put on weight,” says Martin. With excess weight comes an increased risk of diabetes, high blood pressure, high cholesterol and metabolic syndrome—all of which can lead to the artery damage typical of different types of heart disease.

## WHAT YOU NEED TO KNOW NOW

This is the time in your life to make health a priority. Don't keep putting off good-health measures.

## TOP CONCERNS

Weight gain, stress, diabetes, high blood pressure, high cholesterol and family history of early heart attack

## HEART-HEALTHY CHECKLIST

(in addition to recommendations for those in their 20s and 30s)

- **KEEP MOVING.** Sitting is sometimes called “the new smoking,” Martin says. Research has found that being excessively sedentary (sitting for many hours at a stretch) is as much a risk factor for heart disease as tobacco smoke. Take a break every hour while you're working or watching TV to stand up and move around.
- **MAKE TIME FOR HOME-COOKED MEALS.** People tend to eat better and consume fewer calories when they cook at home, preparing meals with more nutritious ingredients that they control.
- **TRACK YOUR NUMBERS.** It's a good idea to have your blood pressure, cholesterol, blood sugar and general health assessed every one to two years (more often if you're having symptoms of health problems).
- **WATCH YOUR WEIGHT.** A healthy diet and regular exercise will go a long way toward maintaining your weight in a range recommended by your doctor. If you're overweight, ask your doctor about joining a gym or other ways to drop excess pounds.
- **AVOID “SELF-MEDICATING” WHEN YOU'RE UNDER STRESS.** Using food, alcohol, sleeping pills, cigarettes or drugs that aren't prescribed to you only introduces new health problems. Try yoga, other forms of exercise and other healthy ways to manage stress.



## Belly Fat and Your Health

Belly circumference could be an important indicator of heart disease.

If your doctor pulled out a tape measure during an office visit, would you be surprised? Don't be—waist circumference is another important number to track. Larger waistlines are linked to a higher risk of heart disease, diabetes, heart attack and stroke. Belly fat indicates visceral fat, the worst kind of fat, which is stored deep in the belly around vital organs. Ideally, your waistline should be under 35 inches if you're a woman and under 40 inches if you're a man. Exercise is one of the best ways to lose belly fat. If you're new to exercise, get your doctor's OK and guidance before you begin.

# HEART QUESTIONS TO ASK YOUR DOCTOR

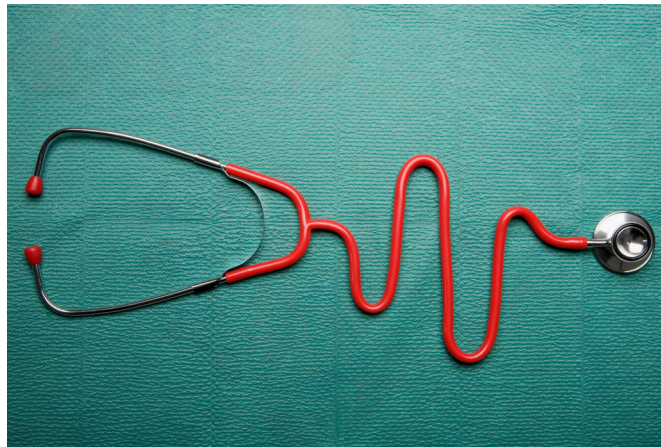
Use these guidelines to begin building a list of key questions for your doctor visits.

**GETTING THE BEST** care means being an active partner with your physician. It's a good idea to write down your key questions beforehand and bring them to your medical appointments.



## SOME QUESTIONS TO GET YOU STARTED

- Do I need any kind of cardiovascular screening tests, and what will they tell me?
- What's my 10-year cardiovascular risk of a heart attack or stroke?
- What are my specific risk factors, and what can I do on my own to help lower them?
- Should I be eating a special diet?
- What can I do to lose weight (if applicable)?
- How can I quit smoking (if applicable)?
- When should I schedule my next appointment?



## FOR A DIAGNOSED CARDIOVASCULAR CONDITION

- Can you explain what this condition means for my overall health and my future health?
- What caused this condition?
- What are my options regarding treatment?
- What can I do on my own to improve my condition?
- Should I make any changes to my diet?
- Is it safe for me to exercise?
- Where can I obtain information to learn more about my condition?



## IF YOU'RE PRESCRIBED A MEDICATION

- What does this medication do for me?
- How and when do I take it?
- What are the potential side effects I should watch for, and what should I do if they occur?
- Is it OK to take this medication with over-the-counter drugs (like aspirin) or the other prescription and non-prescription medications I now take?

## A Quick Guide to Common Heart Conditions

**ARRHYTHMIA:** Irregular heartbeat.

**ATHEROSCLEROSIS:** Also known as "hardening of the arteries" due to accumulated deposits of cholesterol, called plaque.

**CARDIOMYOPATHY:** A disease of the heart muscle, generally inherited.

**CORONARY ARTERY DISEASE (heart disease):** The thickening and narrowing of the arteries to the heart.

**HEART ATTACK:** When blood flow delivering oxygen to the heart is disrupted or cut off.

**HEART FAILURE:** When your heart isn't pumping enough blood.

**METABOLIC SYNDROME:** A group of factors (like low HDL and high triglycerides and glucose levels) that raise heart disease risk when a person has three or more of them.

**PERIPHERAL ARTERY DISEASE (PAD):** Narrowing of the arteries due to plaque in the arms, legs or torso.

**STROKE:** The bursting or blockage of a blood vessel in the brain.

# YOUR 50s: STAY ON TRACK

Now is the time to stay in touch with your doctor about your risks and not brush off symptoms you may be experiencing.

**THE EFFECTS OF** your lifetime of health and lifestyle habits thus far are showing up in your body, including the arteries of your heart. For some people, the effects result in conditions such as diabetes or high blood pressure. Others may experience symptoms such as



shortness of breath or chest pain (angina). “This is when you really need to focus on your numbers, because your risk of heart problems is increasing dramatically,” says McEvoy. “See your doctor to get screened and talk about your risks and appropriate care to take.”

## WHAT YOU NEED TO KNOW NOW

This is the time to take care of certain “back burner” health concerns.

## TOP CONCERNS

Too much weight, lack of sleep, high blood pressure, high cholesterol, diabetes, erectile dysfunction (men), menopause (women), family history

## Your Goal: Getting More Exercise

Aim for at least 30 minutes of aerobic exercise five days a week, or as doctor-recommended.

- 1 Stand up while you're talking on the phone and walk around the room or stretch. Consider devices such as a treadmill desk, or a headset for taking calls while on a walk.
- 2 Don't look for the nearest parking spot; instead, pick one across the lot.
- 3 Take the stairs instead of the elevator, even if you get off just a few floors below your destination.
- 4 Put on workout clothes first thing in the morning so you're more motivated to move before the day's distractions take hold.

## HEART-HEALTHY CHECKLIST

(in addition to recommendations for those in their 20s, 30s and 40s)

- **CONTINUE TO MAKE GOOD LIFESTYLE CHOICES.** The right diet (see page 5) and exercise (see “Your Goal: Getting More Exercise,” this page) matter more than ever because the risk of heart problems rises with age. After menopause, women’s heart risks are no longer lower than men’s.
- **REPORT ANY UNUSUAL SYMPTOMS TO YOUR DOCTOR.** Not all heart-related conditions first show up as chest pain. Fatigue, leg cramps and nausea can all flag problems. For men, difficulty getting or maintaining an erection could signal artery damage that’s restricting blood flow—and if it’s happening in your genitals, it could be happening in your heart as well.
- **DON'T IGNORE SLEEP PROBLEMS, SUCH AS WAKING UP TIRED, INSOMNIA OR SNORING.** One common condition called sleep apnea, in which your airway is briefly blocked during sleep and you stop breathing, is linked to heart disease. Treatments can be as simple as a mouthpiece or as technical as a Continuous Positive Airway Pressure (or CPAP) device to help you breathe at night. Losing weight helps too.
- **LEARN THE SYMPTOMS OF HEART ATTACK AND STROKE.** Prompt response and treatment can save your life, your partner’s or that of someone you know. (See page 9 for the signs of heart attack.)



# YOUR 60s: BEAT THE RISKS

Once you edge into your 60s, lifestyle choices continue to matter, but existing conditions might require special care.

**AGE IS NOT** on your side when it comes to heart health because of the accumulating effects of various habits and body stresses throughout life. “There comes a point, often in your 60s, when in addition to lifestyle options, you have to consider medicines to control blood pressure and other conditions, depending on what your overall risk is,” says Martin.

## HEART-HEALTHY CHECKLIST (in addition to recommendations for those in their 20s, 30s, 40s and 50s)

- **DISCUSS YOUR RISK OF HEART ATTACK AND STROKE WITH YOUR DOCTOR.** Using key measures like blood pressure, cholesterol, blood sugar and sometimes other tests, such as a coronary calcium scan, your doctor can calculate your odds of having a heart attack or a stroke over the next 10 years. This important information is used to suggest whether preventative medications may be useful, and to suggest other treatments.
- **KEEP TRYING.** It’s never too late to make lifestyle tweaks that improve your heart health. Try using an app that helps you count your daily steps, for example, or look for ways to eat more fruits and vegetables. Small changes add up.
- **DO ALL YOU CAN TO MANAGE CHRONIC CONDITIONS, AS DIRECTED BY YOUR DOCTOR.** When you keep your blood sugar in the recommended range if you have diabetes, or consistently take blood pressure medication as prescribed, you go a long way toward lowering your risk of a heart attack or stroke.
- **ADD (OR KEEP UP) WEIGHT-BEARING EXERCISE.** This move can help protect you against loss of muscle mass as you get older, and it improves the muscles’ ability to draw oxygen from the blood. This reduces the need for the heart to pump more blood to the muscles, reducing heart stress.

### WHAT YOU NEED TO KNOW NOW

Even good lifestyle choices might not prevent the need for medication.

### TOP CONCERNS

Taking medications as directed, managing chronic conditions and continuing to keep up with healthy lifestyle habits



## Know the Signs of Heart Attack

Getting help quickly can reduce heart damage or even save the life of someone having a heart attack. Call 911 immediately if these signs are present:

**CHEST DISCOMFORT:** May be felt as a squeezing, a pressure or intense pain that comes and goes or lasts a while.

**UPPER-BODY DISCOMFORT:** Pain may also appear in the neck, shoulders, arms, jaw or stomach.

**SHORTNESS OF BREATH:** Breathing may be difficult, with or without the presence of chest pain

**NAUSEA, VOMITING, COLD SWEAT:** These signs can appear along with those above.

# YOUR 70s & BEYOND: FOCUS ON HEALTH

The organizational skills you've built throughout your life can play a major role in staying healthy now.

**BY THEIR 70s**, many people have been diagnosed with and treated for chronic health conditions, often more than one disease. That doesn't mean it's enough to sit back and let medications and medical procedures take over and do all the work, though. "It's never too late to make lifestyle changes that can make a difference," says Martin.

## WHAT YOU NEED TO KNOW NOW

Communication with your doctors and pharmacist is important at this age.

## TOP CONCERNS

Disease management, multiple diseases and maintaining independence

## HEART-HEALTHY CHECKLIST

(in addition to recommendations for those in their 20s, 30s, 40s, 50s and 60s)

- **BE SURE THAT ALL YOUR DOCTORS ARE UP TO DATE ON WHAT'S GOING ON WITH YOU.** Bring all your medications to each appointment, and keep track of your medical history.
- **DON'T IGNORE WORRISOME SYMPTOMS.** If something feels "off" or different for you, get help immediately. Time can make a big difference.
- **KEEP UP WITH PREVENTATIVE HEALTH CARE.** As you age, you're more vulnerable to the effects of common illnesses, so it's important to get vaccinated against flu, pneumonia and shingles, for example. Coming down with the flu and other illnesses can worsen existing heart disease.



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### How can I best manage the different medications I need to take?

Managing meds can be tough even for someone who's well-intentioned. When you're taking many different kinds, it can be hard to remember if you missed a dose; likewise, taking extra dosages can cause potentially dangerous interactions with other drugs. Work closely with your doctor and your pharmacist to be sure the combination of different drugs you're taking is safe. Always be certain that every doctor knows all the medications you take, not just the ones he or she has prescribed. By consistently filling prescriptions at the same drugstore, your pharmacist will also be aware of your medications. Be sure you understand what each drug is for. Most people find it helpful to use pillboxes organized by time of day that cover a week or a month at a time.

—JOHNS HOPKINS EXPERT SETH MARTIN, M.D., M.H.S.

# YOUR GUIDE TO COMMON HEART TESTS

Some of these tests are given routinely; others only when a problem is suspected.



**ALONG WITH RISK** factors in your personal and family history, as well as your health habits, your doctor uses a variety of tools to assess your overall heart health and determine your risk of heart attack and stroke. How often these tests are given depends on your health status.

## 25

*The highest  
your Body Mass  
Index measure  
(height-weight  
comparison)  
should be—  
at any age.*

### BLOOD PRESSURE

Measured in the doctor's office with a blood pressure cuff. Guidelines typically target a reading of 140 over 90 (shown as 140/90 mmHg) as normal for most adults. You're considered to have hypertension when you have a reading with numbers above these.

### CHOLESTEROL

Usually measured with a blood test called a lipoprotein profile or full lipid profile. Blood is drawn and analyzed, and the test reveals:

- **LOW-DENSITY LIPOPROTEIN (LDL):** Also known as "bad cholesterol," it's what contributes to the buildup of plaque in arteries. A good LDL reading is below 130 mg/dL for most people, or optimally, below 100 mg/dL, especially for those with heart disease. The higher your LDL levels, the greater your risk of heart disease.
- **HIGH-DENSITY LIPOPROTEIN (HDL):** Also known as "good cholesterol," this lipid helps carry LDL cholesterol away from the arteries to the liver, where it can be disposed of. An optimal HDL level is 40 mg/dL or higher. Higher HDL levels are believed to be protective of your heart, while lower HDL levels put you at risk for heart problems.

- **TRIGLYCERIDES:** This type of fat helps store the energy we get from food. An ideal level is under 150 mg/dL. When triglyceride levels are high, you're more likely to have artery damage.
- **TOTAL BLOOD CHOLESTEROL (total cholesterol or total serum cholesterol):** Your total score is the LDL number plus the HDL number plus 20 percent of the triglyceride number. An optimal total number is below 180 mg/dL.

### BLOOD GLUCOSE

This can be measured with a fasting blood sugar test, in which your blood is drawn after not eating for 8 hours. A reading at or greater than 125 mg/dL on two occasions signals diabetes. A reading of 100–125 mg/dL is a sign of prediabetes. In another type of blood test, called the A1C, the goal is a reading below 6.4 percent.

### BODY MASS INDEX (BMI)

This is a measure of your weight as it relates to your height. A measure of 20–24.9 is considered ideal. In addition, your waist-to-hip ratio can help diagnose obesity. A waist size greater than 40 inches for men or 35 inches for women is considered a risk factor for heart disease.

## YOUR GUIDE TO COMMON HEART TESTS *(continued)*



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Depending on the symptoms you have, tests that may be given to provide additional information about heart risk include:

- **CORONARY ARTERY CALCIUM SCAN:** Now considered one of the most important tests for gauging heart health, the coronary artery calcium scan provides images of the heart between beats, showing plaque buildup; images are taken while you're fully clothed.
- **C-REACTIVE PROTEIN BLOOD TEST:** This indicates levels of inflammation in your body.
- **ELECTROCARDIOGRAM (EKG or ECG):** Measurement of the electrical activity of your heartbeat during rest.
- **EXERCISE STRESS TEST ("treadmill test"):** A test often done on a treadmill or exercise bike to measure your heart rate when the heart has to pump harder. For those who are unable use a treadmill, a drug may be given to make the heart respond as if to exercise.
- **ECHOCARDIOGRAM:** An ultrasound image of your heart.
- **CHEST X-RAY:** An image of your heart, lungs and other chest organs.
- **CARDIAC CATHETERIZATION:** A test in which a thin tube is inserted into an artery.
- **CORONARY ANGIOPLASTY (coronary angiogram):** An X-ray of the arteries.

### For More Information

#### GENERAL HEART INFORMATION

**American Heart Association**  
<http://www.heart.org/>

**ASCVD Risk Estimator**  
<http://tools.cardiosource.org/ASCVD-Risk-Estimator/> (American College of Cardiology)

#### NUTRITION INFORMATION

[choosemyplate.gov](http://choosemyplate.gov)

**Dietary Guidelines for Americans**  
<http://www.health.gov/dietaryguidelines/dga2010/DietaryGuidelines2010.pdf>

#### EXERCISE

[fitness.gov](http://fitness.gov)

#### SMOKING CESSATION

**Quit Smoking Line**  
800-QUIT-NOW (800-784-8669)

[smokefree.gov](http://smokefree.gov)

*Talk with your doctor about which heart-health tests may be appropriate for you.*

# YOUR MEDICATIONS CHART

Include prescription medications; over-the-counter medications taken regularly; and herbs, vitamins and other supplements.

**NAME:** \_\_\_\_\_

	1	2	3
NAME OF MEDICATION	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
PURPOSE	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
DOSAGE	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
WHEN TO TAKE IT	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
SPECIAL INSTRUCTIONS	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
PRESCRIBING PHYSICIAN	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

# YOUR MEDICATIONS CHART

Include prescription medications; over-the-counter medications taken regularly; and herbs, vitamins and other supplements.

**NAME:** \_\_\_\_\_

4

5

6

	4	5	6
NAME OF MEDICATION	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
PURPOSE	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
DOSAGE	_____	_____	_____
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WHEN TO TAKE IT	_____	_____	_____
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	_____	_____	_____
SPECIAL INSTRUCTIONS	_____	_____	_____
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	_____	_____	_____
PRESCRIBING PHYSICIAN	_____	_____	_____
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	_____	_____	_____