

## High Blood Pressure — Personal Action Plan

Date:				
The most importance pressure (BP) is you fill out this firm members of your action plan on the	ou. Your health rst page during team may help	care te your v you d	eam will help visit. Other	
Current blood pressure/				
The table below s				
BP category	Systolic	/	Diastolic	
Normal	less than 120	and	less than 8	
Elevated	120 to 129	and	less than 8	
Stage 1 High	130 to 139	or	80 to 89	
Stage 2 High	140 or higher	or	<b>90</b> or highe	
(date)  Urine Albumin / Creatinine ratio (ACR)(date)  My personal BP management goal				
My healthcare team's treatment goals for managing my BP				
☐ Monitoring my ☐ Following a heal ☐ Monitoring my	-	ving ea page 2 e (see p	<u>2</u> ) page <u>2</u> )	
☐ Managing stress or quitting smoking (see page 4)				

M	y next appointment:
Bri	ing this Action Plan to your appointment.
Lo	ocal resources
Ca	re manager or health educator:
Lo	cal clinic phone and website:
Ot	her consultants or providers:

## **Patient education resources**

Write the date you received each checked resource:

☐ <u>BP Basics</u>	(date)
□ BP Tracker	(date)
☐ <u>High Blood Pressure</u>	(date)
and the DASH Diet	

## Online resources

- ☐ Sign up for MyHealth
- IntermountainHealthcare.org/bp
- Hypertension and Your Heart, from AHA <u>Heart.org/HEARTORG/Conditions/High-Blood-Pressure UCM 002020 SubHomePage.jsp#</u>
- Blood Pressure from Utah Department of Health <u>choosehealth.utah.gov/your-health/</u> <u>blood-pressure.php</u>
- HeartWise Blood Pressure Tracker app for smart phones
- Blood Pressure Companion app for smart phones

## Take my MEDICATIONS — See page 9 of BP Basics Check the types of medications you take. Circle or write in the name that's on your pill bottle. ☐ ACE inhibitor — Helps open blood vessels, making it easier for your heart to pump and to lower blood pressure. • lisinopril (Prinivil, Zestril) benazepril (Lotensin) I will remember to take this medication by: enalapril (Vasotec) • quinapril (Accupril) I will watch for these side effects: ramipril (Altace) Cough, dizziness, headache, drowsiness, weakness ☐ ARB — Helps open blood vessels, making it easier for your heart to pump and to lower blood pressure. losartan (Cozaar) I take: candesartan (Atacand) I will remember to take this medication by: • irbesartan (Avapro) valsartan (Diovan) I will watch for these side effects: Cough, dizziness, headache, drowsiness, weakness □ Calcium channel blocker (CCB) — Helps block calcium from entering heart, makes blood vessel cells relax, and widens blood vessels, which lowers blood pressure. amlodipine (Norvasc) • diltiazem (Cardizem, Cartia, Dilacor, etc.) I will remember to take this medication by: verapamil (Calan, Isoptin) I will watch for these side effects: Headache, flushed skin, ankle swelling ☐ **Diuretic** — Helps kidneys get rid of extra fluid and sodium through your urine. These are often combined with an ACE or ARB in one pill. hydrochlorothiazide (HCTZ) I take: lisinopril/HCTZ combination I will remember to take this medication by: • losartan/HCTZ combination chlorthalidone (Thalitone) I will watch for these side effects: furosemide (Lasix) Dizziness, lightheadedness, headache or blurred vision ☐ **Beta blocker** — Helps make your heart muscle function better and lowers your blood pressure. carvedilol (Coreg) metoprolol succinate ER (Toprol XL) I will remember to take this medication by: I will watch for these side effects: ☐ **Statins** — Helps manage cholesterol. atorvastatin (Lipitor) I will remember to take this medication by: rosuvastatin (Crestor) · lovastatin (Altoprev, Mevacor) I will watch for these side effects: pravastatin (Pravachol)

simvastatin (Zocor)

Monitor my BLOOD PRESSURE — See pages 20–21 of BP Basics					
To keep track of my blood pressure I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4	
Measure my blood pressure daily					
Record my blood pressure in a tracker					
Follow a healthy EATING PLAN — See pages 14-15 of	BP Basics		,		
To reduce my sodium (salt) intake, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4	
Limit my sodium intake to per day					
Take the salt shaker off the kitchen table					
Read food labels to see which foods are high in sodium					
Rinse canned foods before cooking and eating them					
Remove one high-salt item from my diet this week					
At restaurants, choose items listed as "healthy choice"					
At restaurants, ask for food with no added salt					
To eat more fruits and vegetables, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4	
Fill half my plate with vegetables and fruits					
Snack on vegetables and fruits, not chips and candy					
Buy pre-washed, pre-cut vegetables for quicker meals and snacks					
Eat more dark green and leafy vegetables, such as spinach, kale, and broccoli					
Eat more bright yellow, orange, and other colorful vegetables, such as sweet potatoes, carrots, squash, sweet red peppers, dried apricots					
Choose whole fruits more often than juices					
To eat more whole grains, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4	
Switch to whole-grain bread, rice, or tortillas					
For breakfast, eat oatmeal or cold cereals with a whole grain listed first					
Make sure at least half my grains are whole grains					
To choose heart-healthy proteins, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4	
Eat fish or shellfish 2 or 3 times a week					
When eating chicken or turkey, choose skinless white meat					
When eating red meat, choose lean cuts, and servings smaller than a deck of cards					
To choose heathy fats and low-fat dairy, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4	
Avoid products with trans fats					
Buy low fat milk, cheese, and yogurt					
Choose olive, canola, or peanut oil					
*Possible problems for meeting my goal:					
*Things that will help me meet my goal:					

Monitor my WEIGHT — See pages 12-13 of BP Basics				
To keep track of my weight I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4
Track my current weight				
Track my target weight				
Weigh myself every day				
Keep track of my weight in a journal				
*Possible problems for meeting my goal:				
*Things that will help me meet my goal:				
Increase my ACTIVITY — See pages 10-11 of BP Basics				
To increase my physical activity, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4
Walk minutes times in my neighborhood or at a mall				
Go to an exercise class at a gym or senior center				
Do light housekeeping or yard work				
Have a physical therapy evaluation if needed				
Take a brisk walk				
Do strength training exercises — with light weights or without weights				
Swim or do water exercise minutes days a week  Other:				
*Possible problems for meeting my goal:				
*Things that will help me meet my goal:				
Manage STRESS or quit SMOKING — See pages 16-1	7 of <i>BP Ba</i>	<u>sics</u>		
To reduce stress, I will: (pick 1 or 2 for each week)	Week 1	Week 2	Week 3	Week 4
Change my expectations				
Learn to say no				
Practice gratitude and joy				
To quit smoking, I will: (pick 1 or 2 for each week)				
Identify a support program or team				
Talk with my doctor about medications that will help me succeed				
Set a quit date				
*Possible problems for meeting my goal:				
*Things that will help me meet my goal:				
Watch for SYMPTOMS				
I will call my healthcare provider when:	Week 1	Week 2	Week 3	Week 4
My blood pressure is above 180/110 AND I have chest pain, shortness of breath, or a severe headache				

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