









Heart Failure Zone Tool

Everyday:	<ul style="list-style-type: none"> Weigh yourself in the morning before breakfast, write it down and compare it to the last weight. Take your medications as prescribed Check for swelling in your feet, ankles, legs and stomach Eat food low in salt Balance activity and rest periods
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What zone are you in today? **Green**, **Yellow**, or **Red**?

Green Zone This is where you want to be	Your symptoms are under control. You have: <ul style="list-style-type: none"> No shortness of breath No weight gain of 2 pounds or more No feet, ankle, leg or stomach swelling No chest pain 	 
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Yellow Zone: <u>Getting worse</u> <i>Call your doctor</i>	Caution- This zone is a warning Call your doctor's office if you have any of the following: <ul style="list-style-type: none"> You gain 3 pounds in 2 days or 5 pounds or more in 1 week New or increased shortness of breath More swelling of your feet, ankles, legs, stomach, neck or face Dry cough Dizziness Feeling uneasy, tired or you know something is not right It is hard for you to breathe when lying down 	  
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Red Zone: <u>Much worse</u> <i>Call your doctor or 911</i>	Emergency Call your doctor's office or call 911. <ul style="list-style-type: none"> Struggling to breathe or shortness of breath while sitting still Have to sleep sitting up to breathe better Chest pain Confusion or can't think clearly Almost passed out, fainted, or fallen 	  
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If you smoke, the best thing you can do to help your heart and lungs is quit.

Call Tobacco Quit Line for help in Oregon at 877-270-7867, in Washington at 800 QUIT-NOW.

Daily weight record



Month:			Month:		
Day	Weight	HF Zone	Day	Weight	HF Zone
1		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	2		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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30		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	30		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
31		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	31		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

If any of the following occur, call
 Doctor: _____
 at _____

- Weight**
- Goes up 3 pounds in two days
 - Goes up 5 pounds in one week
- Swelling**
- Ankles
 - Feet
 - Hands
 - Face
 - Neck
 - Stomach
- Breathing**
- Wheezing
 - Difficulty breathing
- Other Symptoms:**
- Chest discomfort
 - Dry cough
 - Dizziness

***Refer to your HF Zone Guide**
 Mark the zone you are in each day.
Green: This is the goal zone.
Yellow: This zone is a warning.
Red: This zone is an emergency