








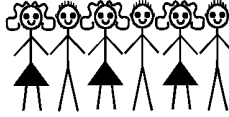


High Blood Pressure Self Management

You, the patient, are the most important person to manage your blood pressure. The closer we get your blood pressure to 130/80 the less chance you'll have of having a heart attack, stroke, or kidney disease. We will offer support to help you manage your high blood pressure. We need your help.

Please choose goals you are willing to work on to better manage your blood pressure	Yes	No
	<p><u>Goal 1:</u> I will take my medications as I am told. I will not miss any doses.</p>	
	<p><u>Goal 2:</u> I will exercise (walk) 30 minutes ____ days per week. If I feel chest pain, shortness of breath or chest tightness, I will go to the emergency room.</p>	
	<p><u>Goal 3:</u> I will not take any cold medications without first asking my doctor or pharmacist.</p>	
	<p><u>Goal 4:</u> I will eat a low salt and low fat diet. I will eat more vegetables and fruit.</p>	
	<p><u>Goal 5:</u> I will try to reach my ideal body weight. I will lose ____ pounds by my next office visit.</p>	
	<p><u>Goal 6:</u> I will drink less alcohol.</p>	
	<p><u>Goal 7:</u> I will stop smoking.</p>	
	<p><u>Goal 8:</u> I will see my eye doctor every year or as I am told.</p>	
	<p><u>Goal 9:</u> I will work hard to keep my blood pressure at 130/80 or as I am told.</p>	
	<p><u>Goal 10:</u> I will talk about my concerns to family, friends, & or pastor (minister). I will find healthy ways to deal with stress.</p>	

