



A GUIDE FOR HEART FAILURE
Your Road to a Healthy Recovery

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WELCOME TO ELMHURST HOSPITAL

It is normal to feel anxious and nervous being in the hospital. Knowing what to expect will ease your anxiety and help you with your recovery. We are providing you this information to help guide you and your family through your experience at Edward-Elmhurst Health. Our doctors, nurses, Heart Failure Coordinators and other members of the healthcare team strive to provide you with the safest and best medical care possible. Please do not hesitate to ask a member of your healthcare team any questions during your stay.

This education binder will help you organize important information that you receive during your hospital stay. It has information specific to your stay at Edward-Elmhurst Health. Also included in this educational binder is the Krames publication [Living Well With Heart Failure](#). This booklet is an important informational tool regarding your lifestyle and risk factor management. Please read it often and ask any member of your healthcare team any questions you may have.

For any questions regarding your stay, or when you return home, please call the Heart Failure Team located in the Heart Failure Clinic within the Specialty Care Center.

Heart Failure Clinic
331-221-6180

WHAT'S NEW FOR HEART FAILURE?

CardioMEMS HF System

This is a new tool that will help your heart failure team monitor your fluid status. The **CardioMEMS HF System** features a sensor designed to help determine if your heart failure is worsening. Your healthcare provider can use this information to adjust medications, make adjustments to treatment plans and reduce the change of developing new symptoms or going to the hospital.

Medications

Drugs are important in the treatment of heart failure. These medications can help you live longer, have few symptoms, increase activity, reduce swelling and keep you out of the hospital.

- **Entresto** – A new FDA approved medication for treating heart failure with reduced ejection fraction. Entresto is a twice-daily medication which can be taken with or without food.
- **Corlanor** – A medication that can reduce the risk of hospitalization from chronic heart failure when taken with other medicines. Corlanor can help lower your heart rate so your heart does not have to work as hard.

ELMHURST HOSPITAL RESOURCES

Cardiac Rehabilitation	331-221-6061
Class Registration	630-527-6363
Diabetes Center	331-221-6440
EEHealth Class Registration	630-527-6363
Heart Failure Clinic/Team	331-221-6180
Insurance Questions	331-221-6650
Patient Advocate	630-527-7225
Test Scheduling Line	331-221-0005
Advocate/Midwest Heart	630-782-4050
DuPage Medical Group/Cardiology	630-946-2250
Lumen Cardiology	630-869-0888

ADDITIONAL RESOURCES

If you are having difficulty starting or maintaining changes to your lifestyle, or if you need extra help, please contact the following resources:

American Heart Association

800-242-8721

www.americanheart.org

www.deliciousdecisions.org

Elmhurst Cardiac Rehab

331-221-6060

Exercise physiologists will help customize an exercise program

Heart to Heart: Heart Failure Support Group

Elmhurst Hospital – Maple Conference Room

331-221-3090

Overeaters Anonymous (OA)

505-891-2664

www.iao.org

Seattle Sutton

800-442-3438

www.seattlesutton.com

Weight Watchers

www.weightwatchers.com

Main Campus

155 E. Brush Hill Road,
Elmhurst, IL 60126

February, 2016

1 Emergency Department

RETAIL

- 4** Walgreens
- 5** The Wild Rose Floral & Gift Shop
- 6** WILDFLOWER Café
- 7** Starbucks
- 8** Falling Water Boutique

DIAGNOSTICS

- 9** Diagnostics Main
- 10** Diagnostics East

OUTPATIENT

11 Registration

BUS STOP

12 PACE

PARKING

- 2** Valet
- 3** Expectant Mothers

E Entrance



Take a free, five-minute Health Aware test

Our assessments provide a quick analysis of your health and suggested next steps if you are found to be at risk. In just five minutes, you can gauge your risk of developing diseases or disorders that can weaken your health and affect your lifestyle.

1 Learn. Take the free, confidential assessment and learn if you are at risk.

2 Listen. If eligible, accept the free clinical screening where you'll learn what steps to take to improve your health.

3 Live Healthy Driven. Follow the clinical recommendations and visit your doctor for a longer, healthy-driven life.

Take an assessment today at EEHealth.org

HEART AWARE

Even seemingly healthy people can experience heart disease.

STROKE AWARE

Stroke is the leading cause of adult disability, regardless of age.

ANXIETY AWARE

More than 40 million adults in the U.S. are affected by anxiety disorders.

DEPRESSION AWARE

Depression interferes with everyday life, but the condition is treatable.

ADDICTION AWARE

Alcohol & drugs can take over your life, ruin relationships & damage your health.

DIABETES AWARE

Diabetes can lead to serious complications, like kidney failure, and premature death.

SLEEP AWARE

Snoring could be a sign of something serious - and potentially deadly.

BREAST AWARE

Detect breast cancer at its earliest, most treatable stage.

LUNG AWARE

Early detection of disease like COPD, can save lives.

COLON AWARE

Colon cancer can often be cured if found early.

CARDIOLOGIST - Heart Failure Specialists



Maria R Costanzo, MD

Cardiovascular Disease

Advocate Health Midwest Heart Specialists

 Edward Heart Hosp 4th Flr
801 S Washington PO Box 3226
Naperville, IL 60566
Phone: 630 527-2730
Fax: 630 527 2754



Stanislaw J Skaluba, MD

Cardiovascular Disease, Interventional Cardiology

Advocate Health Midwest Heart Specialists

 Edward Heart Hosp 4th Flr
801 S Washington PO Box 3226
Naperville, IL 60566
Phone: 630 527-2730
Fax: 630 527 2754



Ali A Valika, MD

Cardiovascular Disease

Advocate Health Midwest Heart Specialists

 133 E Brush Hill Rd Ste
202
Elmhurst, IL 60126
Phone: 630 782-4050
Fax: 630 782-5021

 3825 Highland Ave
Suite 400
Downers Grove, IL 60515
Phone: 630 719-4799
Fax: 630 963-7420

Hospitalist Program

Rest assured that you are in very good hands while you are receiving care at Elmhurst Hospital. Our hospitalists have partnered with your doctor and are committed to providing you with the highest quality inpatient care.

Once your hospital stay is complete, the hospitalist will refer you back to your primary care physician or a physician from our medical staff should you not already have one.

What is a hospitalist?

Hospitalists are physicians who focus on the general medical care of hospitalized patients. Think of each hospitalist as your “on-site expert” – someone in constant communication with your primary care physician who has access to all of your medical records but is only a few footsteps away.

What are the benefits of a hospitalist?

Hospitalists spend most or all of their day in the hospital and are more readily available to you. By focusing on hospitalized patients, they can dedicate themselves to the unique aspects of your needs during your hospital stay.

Communication is key

Communication – your inpatient care team relies on it to ensure you receive top-notch, coordinated care. Use of an electronic medical record (EMR) allows for two way communication. This enables your inpatient care team to review your health history, medications and any tests that have been performed prior to being hospitalized. An EMR also helps us to communicate with your doctor about your stay.

Hospitalists are doctors that are hospital specialists.

[Meet the providers >](#)

Who are the Hospitalists?



Shah Alam, MD
Board Certified
in Family Medicine



Feras Bankosly, MD
Board Certified
in Internal Medicine



LaMenta Conway, MD
Board Certified
in Pediatrics;
Internal Medicine



Lalitha Dileep, MD
Board Certified
in Internal Medicine



Farah Ghouse, MD
Board Certified
in Internal Medicine



James Ha, MD
Board Certified
in Internal Medicine



Samiya Hashmi, MD
Board Certified
in Internal Medicine



Imtiaz Ismail, MD
Board Eligible
in Internal Medicine



**Christine
Jankowski, MD**
Board Certified
in Internal Medicine;
Critical Care



Margaret Knight, DO
Board Certified
in Internal Medicine



Carlo LaForgia, MD
Board Certified
in Internal Medicine



Azemina Poonja, MD
Board Certified
in Internal Medicine



Barbara Potaczek, MD
Board Certified
in Internal Medicine



Rayyan Siddiqi, MD
Board Certified
in Internal Medicine



Saamer Siddiqi, MD
Board Certified
in Internal Medicine



Linas Smulkstys, MD
Board Certified
in Internal Medicine



Wayne Wong, MD
Board Certified
in Internal Medicine



Ramzi Zureikat, MD, FACP
Hospitalist Director
Board Certified
in Internal Medicine

Advanced
Practice
Clinician



Victoria Smead, APN

INSURANCE INFORMATION

Edward-Elmhurst Health is dedicated to meeting the healthcare needs of our community, and helping as many people as we can to be Healthy Driven. Edward-Elmhurst Health participates in a wide range of health insurance plans and is considered 'in-network' for these insurance plans. In-network means that a larger portion of your medical expense will be covered and will likely reduce your out-of-pocket expense.

INSURANCE PLANS ACCEPTED

The following page is a listing of insurance plans accepted at each of our locations. Since insurance coverage varies, a good habit is to **always**:

1. Contact *your insurance carrier* to verify *your* specific coverage for services
2. Contact *your physician's office* to verify accepted insurance plans

Commercial Plans	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
Aetna	HMO, PPO, POS, NAP	✓	✓	✓ (ABH)**	✓	✓
Aetna Behavioral Health				✓	✓ (LOMG Only)	
Ambetter Secure Care	HMO	✓	✓		✓ (Excludes LOMG)	✓
Ambetter Balance Care	HMO	✓	✓		✓ (Excludes LOMG)	✓
Beacon Health Options (Formerly Value Options)	PPO			✓	✓ (LOMG Only)	
Beech Street	PPO	✓	✓	✓	✓	
Blue Cross Blue Advantage	HMO	✓	✓	✓	✓	✓
Blue Cross HMO Illinois (HMOI)	HMO	✓	✓	✓	✓	✓
Blue Cross POS	POS	✓	✓	✓	✓	✓
Blue Cross PPO	PPO	✓	✓	✓	✓	✓
Blue Choice MCNP	PPO	✓	✓	✓	✓	✓
Blue Choice Options PPO	PPO	✓	✓	✓	✓	✓
Blue Choice Preferred	PPO	✓	✓	✓	✓	✓
Blue Precision	HMO	✓	✓	✓	✓	✓
Caterpillar	PPO	✓		✓	✓ (LOMG CATNET Only)	
CIGNA	HMO, PPO, POS	✓	✓	✓ (CBH)***	✓	✓
CIGNA - C5	HMO, PPO, POS	✓		✓ (CBH)***	✓	
CIGNA Behavioral Health				✓	✓ (LOMG Only)	
CIGNA Connect	HMO			✓	✓ (LOMG Only)	

*Edward Immediate Care facilities are located in Bolingbrook, N. Naperville and Oswego. Elmhurst Immediate Care facilities are located in Addison, Hinsdale, Lombard and Oak Park.

Insurance information is being provided for informational purposes only. Each individual is responsible for confirming which health care providers are in their insurance network. Edward-Elmhurst Health cannot warrant that this information is accurate or up-to-date for every plan and product available which may resemble the products and networks listed here. Rev. 10/15/18

<i>CONTINUED Commercial Plans</i>	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
ComPsych	PPO			✓		
Coventry	HMO, PPO, POS	✓	✓	✓ (ABH)**	✓ (Excludes LOMG)	✓
Coventry (First Health)	PPO	✓	✓	✓ (ABH)**	✓ (Excludes LOMG)	✓
Coventry One	PPO	✓	✓	✓ (ABH)**	✓ (Excludes LOMG)	✓
Coventry (Personal Care)	PPO	✓	✓	✓ (ABH)**	✓ (Excludes LOMG)	✓
Galaxy Health (UHC)	PPO	✓	✓			✓
Great West (CIGNA)	PPO, POS, Open Access	✓	✓	✓	✓	✓
Health Alliance	PPO			✓	✓ (LOMG Only)	
HealthLink	PPO	✓	✓	✓		
Healthsmart	PPO	✓	✓	✓		
HFN	PPO	✓	✓	✓	✓	✓
Humana ChoiceCare	PPO	✓	✓	✓ (See Humana BH)	✓	✓
Humana HMO	HMO	✓	✓	✓ (See Humana BH)	✓	✓
Humana Behavioral Health (Formerly LifeSynch)				✓	✓ (LOMG Only)	
Imagine Health/SmartCare	PPO	✓	✓	✓	✓	✓
Magellan				✓	✓ (LOMG Only)	
MultiPlan	PPO	✓	✓	✓	✓	✓
PHCS	PPO	✓	✓	✓	✓	✓

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Spraying Systems				✓		
Three Rivers	PPO	✓		✓	✓	
TriCare Standard/Reserve Select	PPO	✓	✓	✓ (INPT Only)	✓	✓
Unicare	PPO				✓	
United Behavioral Health (Optum)	PPO			✓		
United HealthCare Choice, Select, Plus	HMO, EPO, POS	✓	✓	✓ (UBH)	✓ (Excludes LOMG)	✓
United HealthCare Core/Navigate	HMO, EPO, POS	✓	✓	✓ (UBH)	✓ (Excludes LOMG)	✓
UHC Nexus ACO -Advocate	HMO, PPO	✓	✓		✓	✓

<i>Medicare Advantage Plans</i>	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
Aetna Medicare Plans	HMO, POS, PPO	✓	✓		✓	✓
Blue Cross Medicare Advantage	HMO	✓	✓	✓		
Blue Cross Medicare Advantage	PPO	✓	✓		✓	✓
Blue Cross ELITE Medicare Advantage	HMO, POS	✓	✓			
Health Alliance	PPO			✓	✓ (LOMG Only)	
Humana Gold Plus	HMO	✓	✓	✓ (See Humana BH)	✓	✓
Humana Choice	PPO	✓	✓	✓ (See Humana BH)	✓	✓

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<i>CONTINUED Medicare Advantage Plans</i>	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
Longevity Health Plan of Illinois, Inc.	ISNP	✓	✓		✓ (Starting 1/1/2019)	✓ (Starting 1/1/2019)
Sunrise Advantage	ISNP	✓	✓		✓	✓
AARP Medicare Complete (plan 1&2) (UHC)	HMO	✓	✓		✓ (Excludes LOMG)	✓
AARP Medicare Advantage Complete (UHC)	PPO	✓	✓		✓	✓
AARP Medicare Complete Access (UHC)	HMO		✓			
UHC Medicare Advantage Group PPO	PPO	✓	✓		✓	✓
Blue Cross Medicare 'Select' (part A only)	Supplement	✓	✓			

<i>ACA Medicaid Plans</i>	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
Blue Cross Community	MMAI	✓	✓	✓		
Blue Cross Community	FHP, ICP	✓	✓		✓ (Excludes LOMG)	✓
Humana	MMAI	✓	✓		✓ (Excludes LOMG)	✓

<i>Government Payer Plans</i>	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
Medicare A (hospital inpatient)		✓	✓	✓		
Medicare B (hospital outpatient & physician)		✓	✓	✓ (Group therapy only)	✓	✓
Illinois Medicaid		✓	✓	✓ (Patients under 21 only)	✓	✓

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Workers Compensation Plans	Products	Edward Hospital & Immediate Care*	Elmhurst Hospital & Immediate Care*	Linden Oaks Hospital	Edward Medical Group, Elmhurst Memorial Medical Group, Linden Oaks Medical Group & Walk-In Clinics	Elmhurst Clinic & Physician Practice Division
HFN		✓	✓		✓	✓
Coventry		✓	✓		✓	✓
Corvel		✓	✓			

** (ABH) Aetna Behavioral Health
 *** (CBH) CIGNA Behavioral Health
 LOMG - Linden Oaks Medical Group

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WHAT TO EXPECT DURING YOUR HOSPITAL STAY

To help increase your comfort and demystify your healthcare experience, we have outlined a typical plan of care for Heart Failure patients. If you, or loved ones, have questions about your treatment or what to expect during your hospital stay, please feel free to talk to your nurse or a member of our staff and ask questions. As your care team personalizes your visit and treatment, your plan of care may vary from the following general descriptions. In the following pages you will find information regarding the typical course of recovery during hospitalization.

WHAT TO EXPECT DURING YOUR HOSPITAL STAY

- ◆ You will wear a continuous portable heart monitor
- ◆ The care team will make hourly rounds to ensure your safety and may check your vital signs every four hours
- ◆ If you have not had a 2D echocardiogram with Doppler done within the past 6 months you may have an echocardiogram done in your room
- ◆ You may be seen by a Registered Dietitian who will discuss with you and your loved ones your diet when you return home
- ◆ You may be seen by Cardiac Rehab who will discuss exercises to help increase your mobility, improve your strength and endurance. They will also provide education on heart failure signs and symptoms.
- ◆ You will be encouraged to become more active and participate in your care
- ◆ You will be sitting up in a chair for all your meals
- ◆ You will be expected to walk in the halls 3 times per day
- ◆ The care team will measure and record your strict intake and output
- ◆ Daily weights will be done daily, first thing in the morning and it will be recorded for your providers
- ◆ You will be on a fluid restriction and sodium restriction diet. There will be signs posted on your door notifying the care team.
- ◆ Labs will be drawn based on what your providers have ordered.
- ◆ An EKG will be performed once and on an “as needed” basis determined by your signs and symptoms

- ◆ You will be visited by a Case Manager/Social Worker who will assess and arrange home health care, if needed
- ◆ Prior to being discharged, a follow-up Heart Failure appointment will be arranged with you
- ◆ The discharge nurse will give you your After Visit Summary (AVS) papers listing all of your medications—including side effects—what to look for and when to call your provider(s). The AVS will also list all of your follow-up appointments
- ◆ If you or your loved ones have any questions or concerns, please contact your Heart Failure Team Monday-Friday. They will be your contact person from the time of admission to the point of discharge, as well as transitioning to home.

Heart Failure Team/Clinic
331-221-6180

GOING HOME

Once you have been cleared by ALL of your physicians, your nurse will begin the discharge process. You will receive an After Visit Summary (AVS) that will detail your current prescribed medications, the heart failure discharge instructions and all of your necessary follow-up appointments. Pay close attention to this document and ask questions if you have them. Refer back to the AVS when you are unsure about your medications or follow-up appointments. Keep in mind that your medications may have changed since your admission to the hospital.

HOME HEALTH

Your physician and hospital healthcare team members may determine that you will benefit from home health care. Edward-Elmhurst Health has a home health agency called **Residential Home Health**. The staff members planning your discharge will assist you with these arrangements. You may be referred to a different home health agency based on your insurance coverage or location. Our Case Management team will help you choose a home health agency that is right for you. Most insurances and Medicare cover the cost of home health services. It is always best to check with your insurance provider to verify the extent of your home healthcare coverage.

DISCHARGE INSTRUCTIONS

Over the next few pages you will find your instructions for **Going Home**. Again, these same instructions will be located on your AVS. Please refer back to this section often when you have a question. The **Heart Failure Guidelines** page should be posted on your refrigerator. The **Daily Weight Log** should be posted next to your scale.

GOING HOME

In this section you will find the tools which will guide you through the first few days after you leave the hospital. Continued use of these tools will help you develop the skills necessary to keep your heart failure under control.

Heart Failure Guidelines – place this worksheet on your refrigerator or somewhere you can refer to it every day to help you decide if your symptoms are under control, and what to do if they are not.

Home Care Instructions Following Heart Failure – the most important things to do **every day** include:

- Weigh yourself
- Take your medicines as prescribed
- Limit your sodium (salt) and fluid intake
- Know when to call your cardiologist, primary doctor, or nurse
- Know when to seek emergency care

Things for you to remember:

1. An appointment has been made for you to see your healthcare provider and/or visit our Heart Failure Clinic within 7 days of hospital discharge. **It is important that you attend this appointment to make sure your symptoms are under control.**
2. Your recommended sodium intake is 1500-2000 mg daily (3/4-1 teaspoon of salt).
3. Limit your fluid intake to no more than 2 liters or 64 ounces per day (8 cups = 1/2 gallon).
4. Some exercise and activity is important to help keep your heart functioning and strong. Unless instructed not to exercise, you may walk at a slow to moderate pace for 10-15 minutes 2-3 days per week to start. Pace your activity to prevent shortness of breath or fatigue. Stop exercise if you develop chest pain, lightheadedness, or significant shortness of breath.

Call your Cardiologist if:

- You gain 2 pounds overnight or 3-5 pounds in 3-4 days
- You have more difficulty breathing
- You are getting more fatigued with normal activity
- You are more short of breath lying down or awoken at night short of breath
- You have swelling of your feet or legs
- You urinate less often during the day and more often at night
- You have cramps in your legs
- You have blurred vision or see yellowish-green halos around objects or lights

Go to the Emergency Room if:

- You have tightness or pain in your chest
- You are extremely short of breath
- You are coughing up pink-frothy mucus
- You are traveling and develop symptoms of worsening heart failure

HEART FAILURE GUIDELINES

SELF-CHECK PLAN FOR HEART FAILURE

WHAT TO DO EVERY DAY

- ✓ Weigh yourself in the morning before breakfast and after urination
 - *Use the same scale and same amount of clothing. Record on Weight Chart*
- ✓ Determine which Heart Failure Zone you are in today:
 - GREEN - GOAL ZONE**
 - YELLOW - CAUTION ZONE**
 - RED - WARNING ZONE**
- ✓ Take your medicine as ordered by your healthcare provider
- ✓ Check for swelling in the feet, ankles, legs and abdomen
- ✓ Eat low salt foods and limit fluids to 8 eight ounce glasses daily (total 64 oz. per day)
- ✓ Balance activity and rest periods
- ✓ Attend all follow up healthcare visits. Bring your weight chart and list of current medications

GREEN – GOAL ZONE

- No new or worsening shortness of breath
- No weight gain of more than 2 pounds in 24 hours
- No new swelling; feet, ankles and legs look normal to you
- No swelling or discomfort in abdomen
- No chest pain or discomfort

What do I do? Excellent! You are in your goal zone. Continue to follow the **“WHAT TO DO EVERY DAY”** schedule.

YELLOW – CAUTION ZONE

- You have a sudden weight gain of 2-3 pounds in one day or a weight gain of 5 pounds or more in a week
- More shortness of breath
- More swelling of your feet, ankles, legs or abdomen
- Feeling more tired, no energy
- Dry hacking/congested cough
- Dizziness
- Feeling uneasy; you know something isn't right
- It is hard to breath when lying down; need to sleep sitting up in a chair

What do I do? This is the warning zone. Contact your healthcare provider today. Have your list of current medications nearby. You may need a change of medications.

RED - WARNING/EMERGENCY ZONE

- Increased discomfort or swelling in the lower body
- Struggling to breathe, unrelieved shortness of breath at rest
- Chest pain
- Dizziness/confusion or cannot think clearly

What do I do? This is the warning/emergency zone. Contact your healthcare provider immediately. You need to be evaluated right away. **YOU MAY NEED TO CALL 911!**

WEIGHT CHART

WHAT TO DO EVERY DAY

- ✓ Weigh yourself in the morning before breakfast and after urination
- Use the same scale and same amount of clothing. Record on Weight Chart
- ✓ Determine which Heart Failure Zone you are in today:
 - GREEN - GOAL ZONE**
 - YELLOW - CAUTION ZONE**
 - RED - WARNING ZONE**
- ✓ Take your medicine as ordered by your healthcare provider
- ✓ Check for swelling in the feet, ankles, legs and abdomen
- ✓ Eat low salt foods and limit fluids to 8 eight ounce glasses daily (total 64 oz. per day)
- ✓ Balance activity and rest periods
- ✓ Attend all follow up healthcare visits. Bring your weight chart and list of current medications

DATE	January	February	March	April	May	June
1						
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▶ BRING THIS CHART WITH YOU TO EVERY APPOINTMENT ◀

WEIGHT CHART

WHAT TO DO EVERY DAY

- ✓ Weigh yourself in the morning before breakfast and after urination
- *Use the same scale and same amount of clothing. Record on Weight Chart*

- ✓ Determine which Heart Failure Zone you are in today:

GREEN - GOAL ZONE

YELLOW - CAUTION ZONE

RED - WARNING ZONE

- ✓ Take your medicine as ordered by your healthcare provider
- ✓ Check for swelling in the feet, ankles, legs and abdomen
- ✓ Eat low salt foods and limit fluids to 8 eight ounce glasses daily (total 64 oz. per day)
- ✓ Balance activity and rest periods
- ✓ Attend all follow up healthcare visits. Bring your weight chart and list of current medications

DATE	July	August	Sept	October	Nov	Dec
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▶ BRING THIS CHART WITH YOU TO EVERY APPOINTMENT ◀



Care to Live Better

residential
home health

Market-Leader of Home Nursing & Therapy Services

Residential Home Health's Clinical Team Includes:

- + Registered Nurses
- + Physical and Occupational Therapists
- + Speech Language Pathologists
- + Telehealth Nurses
- + Medical Social Workers
- + Certified Home Health Aides

Residential's Innovative Clinical Programs

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Joint Replacement Home Therapy Orthopedic therapy program helps patients recover faster after surgery

StepWise Fall awareness and prevention program increases independence and safety by improving mobility, balance, and strength.

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Electronic Medical Records & Physician Portal Residential uses electronic medical records ensuring efficient and immediate communication with the patient's care team. Through the physician portal, physicians can access the patient's electronic medical record and electronically send new referrals, review and approve all orders, and access billing information.

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HemoSense PT/INR Monitor HemoSense PT/INR monitors provide Residential nurses with instant and accurate results to ensure proper dosing of Coumadin and other anticoagulants.

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Medicare covers 100% of services for eligible patients



Call a Home Care Specialist today at
866-902-4000 to find out how Residential Home Health
can provide the *Care to Live Better*.

(866) 902-4000
fax (866) 903-4000
www.residentialhomehealth.com

WEDNESDAY WISHES: Advance Directives

We plan for weddings, childbirth, college and retirement but most of us never take the time to communicate our end-of-life wishes with our families. During a crisis or critical illness the burden of these decisions weighs heavily on our loved ones. Advance Directives are legal documents that speak for you when you cannot speak for yourself. These decisions are best made before being faced with a life-threatening illness or injury.

Wednesday Wishes is a complimentary program offered at Edward-Elmhurst Health's Naperville Campus one Wednesday per month. Meet one-on-one with a member of the Palliative Care Team who will be able to answer questions regarding Advance Directives.

They are also able to:

- Assist you in completing a Power of Attorney for Health Care
- Witness your document
- Make copies for your file

For additional information on Advance Directives please visit:

<http://www.edward.org/advancedirective>

Upcoming **Wednesday Wishes** dates:

- ALWAYS the second Wednesday of each month

Registration is required for these 1 hour sessions.

You may register online at www.healthydriven.com/wellness-events or by calling Edward-Elmhurst Health Class Registration 630-527-6363

**NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS
STATUTORY SHORT FORM POWER OF ATTORNEY FOR HEALTH CARE**

PLEASE READ THIS NOTICE CAREFULLY. The form that you will be signing is a legal document. It is governed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated “agent” broad powers to make health care decisions for you, including the power to require, consent to, or withdraw treatment for any physical or mental condition, and to admit you or discharge you from any hospital, home, or other institution. You may name successor agents under this form, but you may not name co-agents.

This form does not impose a duty upon your agent to make such health care decisions, so it is important that you select an agent who will agree to do this for you and who will make those decisions as you would wish. It is also important to select an agent whom you trust, since you are giving that agent control over your medical decision-making, including end-of-life decisions. Any agent who does act for you has a duty to act in good faith for your benefit and to use due care, competence, and diligence. He or she must also act in accordance with the law and with the statements in this form. Your agent must keep a record of all significant actions taken as your agent.

Unless you specifically limit the period of time that this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your lifetime, even after you become disabled. A court, however, can take away the powers of your agent if it finds that the agent is not acting properly. You may also revoke this Power of Attorney if you wish.

The Powers you give your agent, your right to revoke those powers, and the penalties for violating the law are explained more fully in Sections 4-5, 4-6, and 4-10(c) of the Illinois Power of Attorney Act. This form is a part of that law. The “**NOTE**” paragraphs throughout this form are instructions.

You are not required to sign this Power of Attorney, but it will not take effect without your signature. You should not sign it if you do not understand everything in it, and what your agent will be able to do if you do sign it.

Please put your initials on the following line indicating that you have read this Notice:

(Principal’s initials)

**ILLINOIS STATUTORY SHORT FORM
POWER OF ATTORNEY FOR HEALTH CARE**

1. I, _____,
(insert name and address of principal)

hereby revoke all prior powers of attorney for health care executed by me and appoint:

(insert name and address of agent)

(NOTE: You may not name co-agents using this form.)

as my attorney-in-fact (my “agent”) to act for me and in my name (in any way I could act in person) to make any and all decisions for me concerning my personal care, medical treatment, hospitalization and health care and to require, withhold or withdraw any type of medical treatment or procedure, even though my death may ensue.

- A. My agent shall have the same access to my medical records that I have, including the right to disclose the contents to others.
- B. Effective upon my death, my agent has the full power to make an anatomical gift of the following:

(NOTE: Initial one. In the event none of the options are initialed, then it shall be concluded that you do not wish to grant your agent any such authority.)

_____ Any organs, tissues, or eyes suitable for transplantation or used for research or education.

_____ Specific Organs: _____

_____ I do not grant my agent authority to make any anatomical gifts.

- C. My agent shall also have full power to authorize an autopsy and direct the disposition of my remains. I intend for this power of attorney to be in substantial compliance with Section 10 of the Disposition of Remains Act. All decisions made by my agent with respect to the disposition of my remains, including cremation, shall be binding. I hereby direct any cemetery organization, business operating a crematory or columbarium or both, funeral director or embalmer, or funeral establishment who receives a copy of this document to act under it.

- D. I intend for the person named as my agent to be treated as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health information or other medical records, including records or communications governed by the Mental Health and Developmental Disabilities Confidentiality Act. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and regulations thereunder. I intend for the person named as my agent to serve as my “personal representative” as that term is defined under HIPAA and regulations thereunder.
- (i) The person named as my agent shall have the power to authorize the release of information governed by HIPAA to third parties.
 - (ii) I authorize any physician, health care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy or other covered health care provider, any insurance company and the Medical Informational Bureau, Inc., or any other health care clearinghouse that has provided treatment or services to me, or that has paid for or is seeking payment for me for such services to give, disclose, and release to the person named as my agent, without restriction, all of my individually identifiable health information and medical records, regarding any past, present, or future medical or mental health condition, including all information relating to the diagnosis and treatment of HIV/AIDS, sexually transmitted diseases, drug or alcohol abuse, and mental illness (including records or communications governed by the Mental Health and Developmental Disabilities Confidentiality Act).
 - (iii) The authority given to the person named as my agent shall supersede any prior agreement that I may have with my health care providers to restrict access to, or disclosure of, my individually identifiable health information. The authority given to the person named as my agent has no expiration date and shall expire only in the event that I revoke the authority in writing and deliver it to my health care provider.

(NOTE: The above grant of power is intended to be as broad as possible so that your agent will have the authority to make any decision you could make to obtain or terminate any type of health care, including withdrawal of food and water and other life-sustaining measures, if your agent believes such action would be consistent with your intent and desires. If you wish to limit the scope of your agent’s powers or prescribe special rules or limit the power to make an anatomical gift, authorize autopsy or dispose of remains, you may do so in the following paragraphs.)

2. The powers granted above shall not include the following powers or shall be subject to the following rules or limitations:

(NOTE: Here you may include any specific limitations you deem appropriate, such as: your own definition of when life-sustaining measures should be withheld; a direction to continue food and fluids or life-sustaining treatment in all events; or instructions to refuse any specific types of treatment that are inconsistent with your religious beliefs or unacceptable to you for any other reason, such as blood transfusion, electro-convulsive therapy, amputation, psychosurgery, voluntary admission to a mental institution, etc.)

(NOTE: The subject of life-sustaining treatment is of particular importance. For your convenience in dealing with that subject, some general statements concerning the withholding or removal of life-sustaining treatment are set forth below. If you agree with one of these statements, you may initial that statement; but do not initial more than one. These statements serve as guidance for your agent, who shall give careful consideration to the statement you initial when engaging in health care decision-making on your behalf.)

I **do not** want my life to be prolonged nor do I want life-sustaining treatment to be provided or continued if my agent believes the burdens of the treatment outweigh the expected benefits. I want my agent to consider the relief of suffering, the expense involved and the quality as well as the possible extension of my life in making decisions concerning life-sustaining treatment.

Initialed _____

I **want** my life to be prolonged and I want life-sustaining treatment to be provided or continued, unless I am, in the opinion of my attending physician, in accordance with reasonable medical standards at the time of reference, in a state of “permanent unconsciousness” or suffer from an “incurable or irreversible condition” or “terminal condition”, as those terms are defined in Section 4-4 of the Illinois Power of Attorney Act. If and when I am in any one of these states or conditions, I want life-sustaining treatment to be withheld or discontinued.

Initialed _____

I **want** my life to be prolonged to the greatest extent possible in accordance with reasonable medical standards without regard to my condition, the chances I have for recovery or the cost of the procedures.

Initialed _____

(NOTE: This power of attorney may be amended or revoked by you in the manner provided in Section 4-6 of the Illinois Power of Attorney Act.)

3. This power of attorney shall become effective on: _____

(NOTE: In Line 3 above, insert a future date or event during your lifetime, such as a court determination of your disability or a written determination by your physician that you are incapacitated, when you want this power to first take effect.)

(NOTE: If you do not amend or revoke this power, or if you do not specify a specific ending date in paragraph 4, it will remain in effect until your death; except that your agent will still have the authority to donate your organs, authorize an autopsy, and dispose of your remains after your death, if you grant that authority to your agent.)

4. This power of attorney shall terminate on: _____

(NOTE: In Line 4 above, insert a future date or event, such as a court determination that you are not under a legal disability or a written determination by your physician that you are not incapacitated, if you want this power to terminate prior to your death.)

(NOTE: You cannot use this form to name co-agents. If you wish to name successor agents, insert the names and addresses of the successors in paragraph 5.)

5. If any agent named by me shall die, become incompetent, resign, refuse to accept the office of agent or be unavailable, I name the following (each to act alone and successively, in the order named) as successors to such agent:

(insert name and address of successor agent)

(insert name and address of successor agent)

For purposes of this paragraph 5, a person shall be considered to be incompetent if and while the person is a minor, or an adjudicated incompetent or disabled person, or the person is unable to give prompt and intelligent consideration to health care matters, as certified by a licensed physician.

(NOTE: If you wish to, you may name your agent as guardian of your person if a court decides that one should be appointed. To do this, retain paragraph 6, and the court will appoint your agent if the court finds that this appointment will serve your best interests and welfare. Strike out paragraph 6 if you do not want your agent to act as guardian.)

6. If a guardian of my person is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

7. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my agent.

Dated: _____ Signed: _____
(principal's signature or mark)

The principal has had an opportunity to review the above form and has signed the form or acknowledged his or her signature or mark on the form in my presence. The undersigned witness certifies that the witness is not: (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the principal is a patient or resident; (c) a parent, sibling or descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.

(Witness Signature)

(Print Witness Name)

(Street Address)

(City, State, ZIP)

(NOTE: You may, but are not required to, request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this power of attorney, you must complete the certification opposite the signatures of the agents.)

Specimen signatures of agent (and successors).

I certify that the signatures of my agent (and successors) are correct.

(agent)

(principal)

(successor agent)

(principal)

(successor agent)

(principal)

(NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form is optional.)

(name of preparer)

(address)

(address)

(phone)

CARDIAC REHABILITATION

Cardiac Rehabilitation is an important step toward restoring your heart health. It is designed to help you get better and *stay* better. Recent scientific studies have shown that people who complete a Cardiac Rehabilitation program can increase their life expectancy by up to five years.

The Cardiac Rehab program at Elmhurst Memorial Hospital is led by a team that includes exercise physiologists, registered nurses and respiratory therapists who will assess your individual capabilities and goals and then create a personalized outpatient Cardiac Rehab program for you.

Cardiac Rehab may begin while you are in the hospital and will continue on an outpatient basis with the goal of fitness and wellness becoming a part of your daily life.

As a participant of Cardiac Rehab you will meet other patients that have experienced the same life-changing event. Patients agree that the social aspect of exercising and sharing their common experiences is a vital piece in their recovery.

You will need a referral from your cardiologist to participate in Cardiac Rehab at Elmhurst Memorial Hospital. In the event you live beyond our service area we can provide phone numbers for surrounding and even nationwide cardiac rehab facilities.

Elmhurst Memorial Hospital

Cardiac Rehabilitation

(331)221-6061

EAT TO LIVE

Inside this section you will find information on eating healthy – nutrition that is good for your heart and good for you. A Heart Healthy Meal Plan and a sample heart healthy menu are included. In addition, the nutritional guide includes:

- Heart Failure Nutrition Therapy
 - Cutting Back on Sodium
 - Fluid Restriction
 - Sample Menu
- Sodium Counts
- Heart Healthy Eating: Shopping Tips
- Delicious Meets Nutritious class information

At your request a dietician is available for further diet education.

Heart Failure Nutrition Therapy

This nutrition therapy will help you feel better and support your heart.

This plan focuses on:

- Limiting sodium in your diet. Salt (sodium) makes your body hold water. When your body holds too much water, you can feel shortness of breath and swelling. You can prevent these symptoms by eating less salt.
- Limiting fluid in your diet. For some patients, drinking too much fluid can make heart failure worse. It can cause symptoms such as shortness of breath and swelling. Limiting fluids can help relieve some of your symptoms.
- Managing your weight. Your registered dietitian nutritionist (RDN) can help you choose a healthy weight for your body type.

You can achieve these goals by:

- Reading food labels to keep track of how much sodium is in the foods you eat.
- Limiting foods that are high in sodium.
- Checking your weight to make sure you're not retaining too much fluid.

Reading the Food Label: How Much Sodium Is Too Much?

The nutrition plan for heart failure usually limits the sodium you get from food and drinks to 2,000 milligrams per day. Salt is the main source of sodium. Read the nutrition label to find out how much sodium is in 1 serving of a food.

- Select foods with 140 milligrams of sodium or less per serving.
- Foods with more than 300 milligrams of sodium per serving may not fit into a reduced-sodium meal plan.
- Check serving sizes. If you eat more than 1 serving, you will get more sodium than the amount listed.

Cutting Back on Sodium

- **Avoid processed foods. Eat more fresh foods.**
 - Fresh and frozen fruits and vegetables without added juices or sauces are naturally low in sodium.
 - Fresh meats are lower in sodium than processed meats, such as bacon, sausage, and hot dogs. Read the nutrition label or ask your butcher to help you find a fresh meat that is low in sodium.
- **Eat less salt, at the table and when cooking.**
 - Just 1 teaspoon of table salt has 2,300 milligrams of sodium.
 - Leave the salt out of recipes for pasta, casseroles, and soups.
 - Ask your RDN how to cook your favorite recipes without sodium.
- **Be a smart shopper.**
 - Look for food packages that say “salt-free” or “sodium-free.” These items contain less than 5 milligrams of sodium per serving.
 - “Very-low-sodium” products contain less than 35 milligrams of sodium per serving.
 - “Low-sodium” products contain less than 140 milligrams of sodium per serving.
 - “Unsalted” or “no added salt” products may still be high in sodium. Check the nutrition label.
- **Add flavors to your food without adding sodium.**
 - Try lemon juice, lime juice, fruit juice, or vinegar.
 - Dry or fresh herbs add flavor. Try basil, bay leaf, dill, rosemary, parsley, sage, dry mustard, nutmeg, thyme, and paprika.
 - Pepper, red pepper flakes, and cayenne pepper can add spice to your meals without adding sodium. Hot sauce contains sodium, but if you use just a drop or two, it will not add up to much.
 - Buy a sodium-free seasoning blend or make your own at home.
- **Use caution when you eat outside your home.**
 - Restaurant foods can be very high in sodium.
 - Ask for nutrition information. Many restaurants provide nutrition facts on their menus or websites.
 - Let your server know that you want your food to be cooked without salt. Ask for your salad dressing and sauces to come “on the side.”

Fluid Restriction

Your doctor may ask you to follow a fluid restriction in addition to taking diuretics (water pills). Ask your doctor how much fluid you can have. Foods that are liquid at room temperature are considered a fluid, such as popsicles, soup, ice cream, and Jell-O. Here are some common conversions that will help you measure your fluid intake every day:



Weight Monitoring

Weigh yourself each day. Sudden weight gain is a sign that fluid is building up in your body. Follow these guidelines:

- Weigh yourself every morning. If you gain 3 or more pounds in 1-2 days or 5 or more pounds within 1 week, call your doctor. Your doctor may adjust your medicine to get rid of the extra fluid.
- Talk with your doctor or RDN about what a healthy weight is for you.
- Talk with your doctor to find out what type of physical activity is best for you.

Foods Recommended

Food Group	Recommended Foods
Grains	Bread with less than 80 milligrams sodium per slice (yeast breads usually have less sodium than those made with baking soda) Homemade bread made with reduced-sodium baking soda Many cold cereals, especially shredded wheat and puffed rice Oats, grits, or cream of wheat Dry pastas, noodles, quinoa, and rice
Vegetables	Fresh and frozen vegetables without added sauces, salt, or sodium Homemade soups (salt free or low sodium) Low-sodium or sodium-free canned vegetables and soups
Fruits	Fresh and canned fruits Dried fruits, such as raisins, cranberries, and prunes
Dairy (Milk and Milk Products)	Milk or milk powder Rice milk and soy milk Yogurt, including Greek yogurt Small amounts of natural, block cheese or reduced-sodium cheese (Swiss, ricotta, and fresh mozzarella are lower in sodium than others) Regular or soft cream cheese and low-sodium cottage cheese
Protein Foods (Meat, Poultry, Fish, Beans)	Fresh meats and fish Turkey bacon (except if packaged in a sodium solution) Canned or packed tuna (no more than 4 ounces at 1 serving) Dried beans and peas; edamame (fresh soybeans) Eggs or egg beaters (if less than 200 mg per serving) Unsalted nuts or peanut butter
Desserts and Snacks	Fresh fruit or applesauce Angel food cake Granola bars Unsalted pretzels, popcorn, or nuts Pudding or Jell-O with Cool-Whip topping Homemade rice-crispy treats Vanilla wafers Frozen fruit bars
Fats	Tub or liquid margarine Unsaturated fat oils (canola, olive, corn, sunflower, safflower, peanut)
Condiments	Fresh or dried herbs; low-sodium ketchup; vinegar; lemon or lime juice; pepper; salt-free seasoning mixes and marinades (Mrs. Dash or McCormick's salt-free blend); simple salad dressings (vinegar and oil); salt-free sauces

Foods Not Recommended

Food Group	Foods Not Recommended
Grains	Breads or crackers topped with salt Cereals (hot/cold) with more than 300 milligrams sodium per serving Biscuits, cornbread, and other “quick” breads prepared with baking soda Prepackaged bread crumbs Self-rising flours
Vegetables	Canned vegetables (unless they are salt free or low sodium) Frozen vegetables with seasoning and sauces Sauerkraut and pickled vegetables Canned or dried soups (unless they are salt free or low sodium) French fries and onion rings
Fruits	Dried fruits preserved with sodium-containing additives
Dairy (Milk and Milk Products)	Buttermilk Processed cheeses such as Cheese Whiz, Velveeta, and Queso Cottage cheese (unless a low-sodium variety) Feta cheese; shredded cheese (has more sodium than block cheese); “singles” slices and string cheese
Protein Foods (Meat, Poultry, Fish, Beans)	Cured meats: bacon, ham, sausage, pepperoni, and hot dogs Canned meats: chili, Vienna sausage, sardines, and Spam Smoked fish and meats Frozen meals that have more than 600 milligrams sodium
Fats	Salted butter or margarine
Condiments	Salt, sea salt, kosher salt, onion salt, and garlic salt Seasoning mixes containing salt (Lemon Pepper or Bouillon cubes) Catsup or ketchup, BBQ sauce, Worcestershire and soy sauce Salsa, pickles, olives, relish Salad dressings: ranch, blue cheese, Italian, and French
Alcohol	Check with your doctor.

Heart Failure Sample 1-Day Menu [View Nutrient Info](#)

Breakfast	<p>1 cup regular oatmeal made with water or milk 1 cup reduced-fat (2%) milk 1 medium banana 1 slice whole wheat bread 1 tablespoon salt-free peanut butter</p>
Morning Snack	<p>1/2 cup dried cranberries</p>
Lunch	<p>3 ounces grilled chicken breast 1 cup salad greens Olive oil and vinegar dressing (for greens) 5 unsalted or low-sodium crackers Fruit plate with 1/4 cup strawberries 1/2 sliced orange (for fruit plate) 1 peach half (for fruit plate)</p>
Afternoon Snack	<p>1 ounce low-sodium turkey 1 piece whole wheat bread</p>
Evening Meal	<p>3 ounces herb-baked fish 1 baked potato 2 teaspoons soft margarine (trans fat-free) (for potato) Sliced tomatoes 1/2 cup steamed spinach drizzled with lemon juice 3-inch square of angel food cake Fresh strawberries (2) (for cake)</p>
Evening Snack	<p>2 tablespoons salt-free peanut butter 5 low-sodium crackers</p>

SODIUM COUNTS

LUNCH FOODS

	SODIUM (mg)
Fruit Salad (1 cup)	9
Tomato; whole (1)	10
Cola (12 oz)	12
Coleslaw (1/2 cup)	16
Diet cola (12 oz)	24
French Fries (20 fries), unsalted	30
Chicken noodle soup (low sodium, 1 cup)	36
Vegetable soup (low sodium, 1 cup)	38
Green salad, tossed (1 cup)	53
Potato chips (14 chips)	131
Corn chips (1 oz)	164
Cheese pizza (1 slice)	261
Tuna Salad (1 cup)	434
Hamburger, fast food	500
Hot dog on bun	671
Cheeseburger, fast food	750
Ham & Cheese Sandwich	772
Roast Beef Sandwich	792
Cottage cheese, low-fat (1 cup)	918
Dill pickle (1 medium)	928
Vegetable beef soup (1 cup)	957
Chicken Noodle Soup (1 cup)	1107
Chef's salad, ham & cheese (1 cup)	1134
Potato salad (1 cup)	1323

DESSERT FOODS

	SODIUM (mg)
Fresh pineapple (1 cup)	1
Banana	1
Fresh strawberries (1 cup)	2
Orange sherbet (1/2 cup)	44
Brownie with nuts (1)	50
Pound cake (1 slice)	58
Vanilla ice cream (1/2 cup)	58
Oatmeal-raisin cookies (2)	74
Chocolate chip cookies (2)	76
Angel food cake (1 slice)	142
Devil's food cake with chocolate icing (1)	180
Rice pudding with raisins (1 cup)	188
Cheesecake (1 slice)	189
Hot fudge sundae (2 scoops)	190
Yellow cake with white icing (1 slice)	191
Apple pie (1 slice)	207
Lemon meringue pie (1 slice)	223
Chocolate pudding (1 cup)	335

DINNER FOODS

	SODIUM (mg)
Rice, cooked (1 cup)	4
Potato, peeled & boiled	7
Light beer (12 oz)	12
Broccoli, raw/boiled (1 cup)	16
Green beans, frozen/French (1 cup)	17
Beer (12 oz)	24
Broiled pork chop	49
White wine (4 oz)	72
Broiled sirloin steak (4 oz)	74
Red wine (4 oz)	76
Roast turkey breast, without skin 1C	89
Peas & carrots, frozen/boiled (1cup)	110
Roast chicken breast	138
Broiled codfish (1 fillet)	141
Dinner roll	144
Fried chicken breast	385
Fish sticks (4 oz)	651
Chicken chow mein, homemade (1 cup)	717
Beef burrito, fast food	746
Spaghetti with tomato-meat sauce (1 cup)	1009
Beef or pork chop suey, homemade (1 cup)	1052
Macaroni and cheese, homemade (1cup)	1086
Fettuccine Alfredo, frozen(1 portion)	1195
Chili con carne (1 cup)	1354

CONDIMENTS

	SODIUM (mg)
Butter, unsalted (1 pat)	<1
Brown gravy (1/4 cup)	31
Butter, regular (1 pat)	41
Margarine (1 pat)	47
Pancake syrup (2 tbsp)	70
Cream cheese (1 tbsp)	85
Mayonnaise (1 tbsp)	104
Thousand Island Dressing (1 tbsp)	109
Italian dressing (1 tbsp)	116
Parmesan cheese (1 tbsp)	116
Italian dressing (lo cal, 1 tbsp)	118
Worcestershire sauce (1 tbsp)	147
Thousand Island dressing (lo cal 1 tbsp)	153
Catsup (1 tbsp)	156
Mustard, prepared (1 tbsp)	195
White sauce (1/4 cup)	199
Hollandaise sauce (1/4 cup)	284
Mushroom gravy (1/4 cup)	340
Barbecue sauce (1/4 cup)	508
Soy sauce (1 tbsp)	1029

Adapted from Nutritionist III® software program ©1990 N2 Computing, Inc.

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Heart-Healthy Eating: Shopping Tips

Tips

Shop for foods that do not have a lot of added ingredients, such as salt, fats, or sugar. Learn your goals for fat, calories, and sodium. Then use food labels to help you make choices that keep you on target. For example:

- If you are on an eating plan that limits sodium, choose foods with less than 300 milligrams of sodium per serving.
- Choose foods with very little or no saturated fat or trans fat.

Remember: Not everything that is advertised or labeled as healthy is really good for you!

Fruits and Vegetables

Start with fresh fruits and vegetables. These do not have added fats, sugar, or sodium.

When you buy frozen or canned produce, read labels:

- Look for types that do not have anything added to the fruits or vegetables, such as sauces, gravies, or seasonings.
- Canned vegetables may be high in sodium. However, you can enjoy many lower-sodium or salt-free varieties.

Breads, Cereals, and Grains

Choose breads and cereals that are made from whole grains and are high in fiber:

- Look for products with whole grains (such as whole wheat, rye, or oats) as the first ingredient.
- Breads with at least 2 grams (g) fiber per serving are good choices.
- Select cereals that contain at least 5 g fiber per serving.
- Limit cereals that list added sugars on the label.
- Check the label for the amount of sodium if you are on a reduced-sodium plan.

Milk and Dairy

When choosing milk or dairy products, pick nonfat or low-fat types:

- Choose nonfat (skim), ½% fat, or 1% fat milk.
- Look for tasty cheeses that are low in saturated fat and sodium. Choose them more often than regular cheese.

Meats and Other Protein Foods

You can get protein from poultry, fish, beef, pork, dried beans, soy products, and other vegetable proteins.

- When choosing chicken or other poultry, look for breast or white meat without the skin
- When choosing beef and veal, pick cuts without much marbling (fat). Healthy types include round steak, tenderloin, and sirloin tips.
- Lean center cuts are the best cuts of pork and lamb.
- You can buy any type of fresh fish that you enjoy. Do not always choose the same kind because some types may contain mercury or other contaminants that you don't want to eat in large amounts.
- Canned fish (such as tuna) can be high in sodium. Choose low-sodium brands.
- Add vegetarian entrees and vegetable protein foods, like beans, veggie burgers, or tofu. Look for products that are low in saturated fat and sodium and high in fiber.

Other Foods

- Convenience foods, such as canned soups, pasta sauces, and prepackaged or frozen dinner entrees and side dishes, can be high in sodium and/or fat. Read labels and choose carefully.
- There are many snack foods that you can enjoy:
- Nuts, seeds, and pretzels make good snacks. Avoid those with added salt.
- Keep your sodium and saturated fat limits in mind while you shop.
- Look for snacks that are free of trans fat. If the ingredients include hydrogenated oil, then the food has trans fat
- It's okay to have desserts once in a while if you choose wisely:
- Fresh fruit and nonfat or low-fat frozen yogurt are good choices.
- There are many kinds of reduced-fat and fat-free candies, cakes, cookies, pastries, and frozen desserts. They may fit within your limits for fat and sodium. However, many fat-free or low-fat desserts are high in calories and low in healthy nutrients. Have them only occasionally.

Delicious Meets Nutritious 2019

What is good for your heart can also be great for your taste buds

This two-part series focuses on flavorful food choices you can make while still maintaining a well-balanced diet. Learn smart shopping secrets and the best choices for snacking and restaurant eating. Also included is a recipe demonstration with a registered dietitian. All classes are located in the Edward Heart Hospital conference room.

Week 1

Heart Healthy Meal Planning & Shopping Savvy

- ▶ Learn American Heart Association dietary recommendations and healthy lipid levels
- ▶ Learn tips for reducing fat, cholesterol and sodium in the diet
- ▶ Learn tips for lowering LDL and triglycerides
- ▶ Learn heart healthy foods and healthy portion sizes
- ▶ Review meal planning
- ▶ Review components of a heart healthy meal plan
- ▶ Learn to read food labels and understand food label claims
- ▶ Aisle-by-aisle examples of heart healthy foods to choose at the grocery store

Week 2

Eating on the Run & Heart Smart Cooking

- ▶ Learn healthy alternatives at fast food restaurants
- ▶ Learn healthy vs. high fat foods at restaurants
- ▶ Learn tips on nutritious ethnic food selections
- ▶ Learn healthy substitutions for lower fat and lower sodium cooking
- ▶ Learn heart healthy cooking techniques
- ▶ Learn how to stock your pantry
- ▶ Recipe makeover with preparation of a low fat dish including samples to taste

The two-part series is offered on the following dates:

Tuesday Series 10 – 11:30 a.m.

February 5 and 12
April 2 and 9
June 18 and 25
August 6 and 13
October 1 and 8
December 3 and 10

Thursday Series 7 – 8:30 p.m.

January 3 and 10
March 7 and 14
May 2 and 9
July 11 and 18
September 5 and 12
November 7 and 14

\$40.00 for the two-part series (Classes are free to Heart Hospital patients when scheduled within 30 days of discharge.)

Call (630) 527-6363 to register.

