

STROKE PREVENTION – MY RISK FACTORS

Your risk factors can increase your chances of having another stroke. Some risk factors include your age or family history which you cannot change. You can improve other risk factors with healthy habits or treatments.

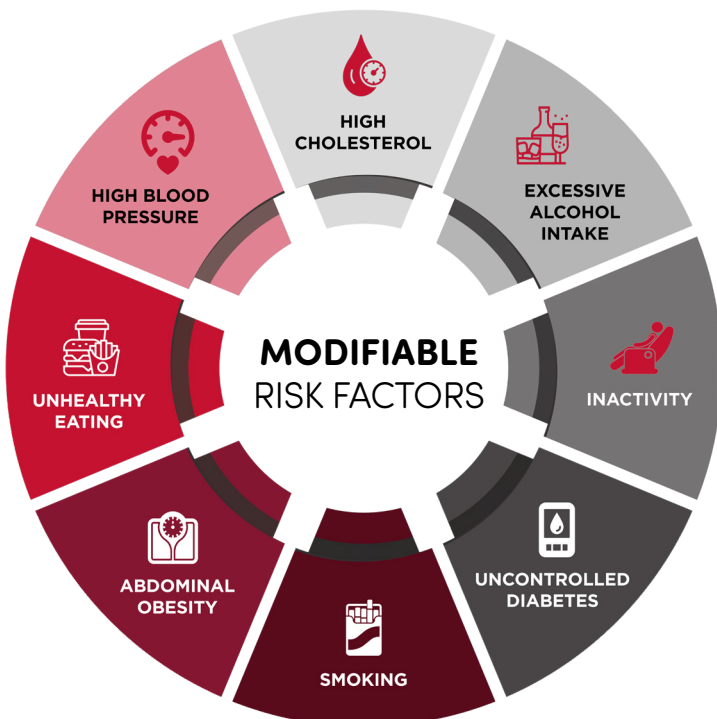
MY STROKE RISK FACTORS (CHECK THOSE THAT APPLY TO YOU)

RISK FACTORS I CAN CHANGE

- | | | |
|--|--|---|
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Uncontrolled diabetes | <input type="checkbox"/> Inactivity |
| <input type="checkbox"/> Smoking/vaping | <input type="checkbox"/> Stress/Mood | <input type="checkbox"/> High cholesterol |
| <input type="checkbox"/> Diet/Unhealthy eating | <input type="checkbox"/> Abdominal obesity | <input type="checkbox"/> Alcohol intake |











RISK FACTORS I CANNOT CHANGE

- | | | |
|--|---|--|
| <input type="checkbox"/> Atrial fibrillation | <input type="checkbox"/> Family history | <input type="checkbox"/> Prior TIA or stroke |
|--|---|--|



MY STROKE RISK FACTORS

Review your risk factors with a health care provider and talk about things you can change.

RISK FACTORS	MY VALUES	TARGET	THINGS I CAN CHANGE
 Blood Pressure	Today's blood pressure:	<div>Systolic (mm Hg)</div> <div>Diastolic (mm Hg)</div> <div>Below 140 Below 130 Below 135</div> <div>Below 90 Below 80 Below 85</div> <div>CLINIC DIABETES AT HOME</div>	
 Cholesterol	Cholesterol: LDL: Triglycerides: Non-HDL: HDL:	Cholesterol: <5.2 LDL: < 1.8 Triglycerides: <1.7 Non-HDL: <2.6 HDL: >1.0 (men) >1.3 (women)	
 Diabetes	HbA1C: Fasting blood sugar:	For most people with diabetes: HbA1C: 7% or less Fasting blood sugar: 4-7 mmol/L Prediabetes = HbA1C: 6-6.4%	
 Diet	Meals/day: Fruits & veggies/day: Proteins:	3 meals per day 7 servings of fruits & vegetables/day Lean proteins High fibre	
 Inactivity	Exercise: Minutes/day: Days/week:	150 minutes moderate to vigorous activity per week in periods of 10 minutes or more	
 Waist Circumference	Waist circumference:	MEN: <102 cm (40") WOMEN: <88 cm (35") Focus on healthy habits and wellbeing	
 Smoking/Vaping	<input type="checkbox"/> Smoking <input type="checkbox"/> Cutting back <input type="checkbox"/> Non-smoker	Smoke and tobacco free	
 Alcohol Intake	Drinks/week:	Less than 2 drinks per week Drinking less is better None is best	
 Stress/Mood	Feeling stressed, sad, depressed or anxious <input type="checkbox"/> Rarely <input type="checkbox"/> Often	Practice good mental health habits Speak with a health provider	
 Atrial Fibrillation	Atrial fibrillation: <input type="checkbox"/> Yes <input type="checkbox"/> No	Medication taken as prescribed Wear a medical alert bracelet or necklace with the name of your anticoagulation medication	

MY HEALTH GOALS



SPECIFIC What EXACTLY do I want to achieve?

MEASURABLE How will I measure progress or success?

ATTAINABLE Is it something that I can reach?

RELEVANT Does it fit with where I am at in my life right now?

TIMELY What is my deadline?

MY MOTIVATION

To get started, ask yourself:

What inspires me to be healthy?

What can have the biggest impact on my health?

I AM MOTIVATED BY:

CHOOSE 1 GOAL YOU CAN WORK ON IN THE NEXT 2 MONTHS

Make it **SMART** and **keep track** of your progress. Consider challenges and solutions.

MY SMART GOAL

MY GOAL: I will _____ for at least ____ each week so I can _____.

TIPS TO MAKE THIS GOAL SMART:

S: I will follow a walk-to-run plan

M: for 20 minutes

A: 3 days a week

R: so I can build up to 30 minutes, 4 days a week

T: in 2 months.

MY PLAN FOR KEEPING ON TRACK

Tracking: I will keep track using my calendar or a running app on my phone.

Challenges: I work from 9–5 pm and it's dark at night when I get home.

Solutions: I can walk-run before work on Tuesdays, Fridays and Saturdays for 20 minutes.

MY SMART GOAL

MY GOAL

S:

M:

A:

R:

T:

MY PLAN FOR KEEPING ON TRACK

Tracking:

Challenges:

Solutions: