| Patient Name: | | | | |
|---------------|---|---|--|--|
| Date of Rirth | / | / | | |

Self-Care for Heart Failure: My Daily Log

| Date | Weight (lbs.) | Blood Pressure | Heart Rate (beats/min) | Daily Activity | Daily Medicine Taken | Change in Signs & Symptoms of Heart Failure | Comments |
|-----------------|------------------|-------------------|------------------------------|----------------|----------------------------|--|--------------------------------------|
| Sample Entry | 160 | 130/80 | 82 | Walked 30 min. | yes | More swelling in legs | Will put my legs up more often today |
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