Knowledge Is Power: Know Your Risk for Heart Disease

Objectives

By the end of this session, participants will:

• Understand how you’ll teach the With Every Heartbeat Is Life course
• Understand how the heart works and its importance
• Know lifestyle changes they can make to help reduce their risk of heart disease
• Understand their risks of developing heart disease

Materials and Supplies

To conduct this session, you’ll need:

• With Every Heartbeat Is Life manual and picture cards
• Name tags
• Hearts cut from red felt or red construction paper. Look for felt that has a sticky (adhesive) backing. (Use the shape on page I.17 to cut out the heart.)
• Safety pins (if not using felt with sticky backing)
• Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
• Clear container filled with 4 cups of water

Handouts

Give each participant these handouts during this session:

• Introducing the Harris Family and Friends (page 1.22)
• Are You at Risk for Heart Disease? (page 1.23)
• Harris Family Health History (page 1.24)
• My Family Health History (page 1.25-1.26)
Before This Session
Read the “More Information” chart on pages 1.14-1.16 to be ready to answer questions from participants. This chart lists heart disease risk factors that you can do something about. It also has steps to take to lower those risks.

Session Outline
Introducing the Session
1. Welcome
2. Overview of the With Every Heartbeat Is Life course
3. Guidelines

Conducting the Session
1. Getting To Know Each Other
2. Getting To Know the Secrets of the Heart
   A. How the Heart Works
   B. The Heart’s Structure
3. Facts About Heart Disease
4. Risk Factor Activity
5. Family Health History Activity

Review of Today’s Key Points

Closing
Introducing the Session

1. Welcome

- **Introduce** yourself as participants walk in.
- **Ask** each participant their name. **Write** it on a name tag.
- **Give** each participant a name tag and a felt or paper heart.
- **Ask** participants to wear the name tag on their shirt and to place the felt/paper heart over their own heart.
- **Welcome** participants to the session. **Tell** them you’re very happy to see them.

**SAY** I want to start today’s discussion with a quote from Rev. Jesse Jackson. He said, “If my mind can conceive it, and my heart can believe it, I know I can achieve it.”

**ASK** What does this quote mean to you?

**NOTE** Allow 2 or 3 minutes for participants to respond.

**SAY** These classes will prepare you to make healthy lifestyle changes in order to help you live heart healthy today and into your future—your tomorrow! I congratulate you on taking this step for your health.

2. With Every Heartbeat Is Life Overview

**SAY** Heart disease is the #1 cause of death in this country. The National Heart, Lung, and Blood Institute (NHLBI) created With Every Heartbeat Is Life to help African Americans prevent heart disease. NHLBI is part of the National Institutes of Health, the federal government’s health research agency.
Knowledge is power. Knowing your risk for heart disease can encourage you to do something about it. Learning how to protect your heart empowers you to take better care of yourself and your family.

This heart health education course includes 11 sessions for you to attend, plus an optional tour of a grocery store.

If you’re teaching the course to community health workers, explain that there’s a 12th session that’s only for them.

The sessions cover these topics:

1. Knowledge Is Power: Know Your Risk for Heart Disease
2. React in Time to Heart Attack Signs
3. Get Energized! Say YES to Physical Activity
4. Control Your Blood Pressure
5. Keep Your Cholesterol in Check
6. Embrace Your Health! Aim for a Healthy Weight
7. Protect Your Heart From Diabetes
8. Make Traditional African American Dishes Heart Healthy
9. Eat Heart Healthy—Even When Time or Money Is Tight
10. Take Control of Your Health: Enjoy Living Tobacco Free
11. Review and Graduation

Please come to all of the sessions. I’ll lead them, but I need each of you to participate. This will help you learn the information and enjoy the sessions more. Please feel free to ask questions. Your questions also help others learn.
DO **Give** each participant the “Introducing the Harris Family and Friends” handout (page 1.22). **Ask** for a volunteer to read it out loud.

DO **Show** picture card 1.1.

SAY We’ll be talking about the Harris family to learn how a family can adopt healthy habits together.

### 3. Guidelines

**NOTE** This section will help participants feel like a team. It also will make it easier for you to lead the sessions.

SAY Everyone will feel more at ease if you know what to expect from the course, and we agree as a group on a few basic guidelines.

SAY This course takes effort and time. It’s important for each of you to attend every session and to arrive on time. Sessions are about 2 hours long.

**NOTE** **Ask** the following only if you’re able to make time and location changes:

ASK How often do you want to meet—once a week, twice a week? Is this a good time and place to meet?

**NOTE** **Give** everyone a few minutes to respond and **decide** on a time and location that’s best for most of the group.
Here’s how to get the most out of each session:

1. Ask questions.
2. Share your personal experiences. This will make the course more meaningful to all of us.
3. Stick to the topic we’re discussing. We have a lot of information to cover in a short time.
4. *(Optional)* Contact me at (telephone number or email) if you have questions or concerns about this course. I’m here to help you in any way that I can.

Because you’ll share your experiences and opinions, we need to agree on a few things. Say “yes” if you agree to the following questions.

Do you agree to keep other participants’ comments to yourself?
Do you agree not to judge others?
Do you agree to try to come to all of the sessions?

Do you have other guidelines you’d like to suggest?

Allow a few minutes for participants to respond.
Conducting the Session

1. Getting To Know Each Other

SAY We’ll begin today’s session by introducing ourselves and getting to know each other.

Please introduce yourself and tell one or two things about yourself.
Say why you came to this class and what you hope to learn. I’ll go first.

NOTE Tell the group why you’re interested in heart health. Be honest and talk about your own experience.

SAY Share what you learn in this course about heart health with your family and friends. Encourage them to adopt heart healthy habits with you. Thank you for making this effort.

2. Getting To Know the Secrets of the Heart

SAY Now that we know a little bit about each other, let’s get to know our heart.

A. How the Heart Works

SAY The heart is an amazing part of the body. In a single day, it beats about 100,000 times and pumps about 2,000 gallons of blood throughout your body.
Your blood carries the oxygen and nutrients to your organs so they’ll get what they need to work well.
Your heart is vital to your health and nearly everything that goes on in your body.
Hold up a clear container that has about a quart (4 cups) of water in it. Remind the group that in one minute, your heart pumps about five quarts of blood through your arteries.

Health care providers can learn a little bit about the health of your heart simply by taking your pulse. For example, they learn what your resting heart rate is and whether it’s slow or fast.

To find your pulse, gently place the index and middle fingers of one hand on the inside wrist of your other hand. Slide your two fingers toward the thumb side of your wrist until you feel a heartbeat.

Show participants how to do this.

B. The Heart’s Structure

Show picture card 1.2.

The heart is a muscular, cone-shaped organ about the size of a fist.

Hold up your fist for everyone to see.

Point to each part of the heart on the picture card.

The septum divides the heart into two sides. Each side has an upper chamber, called an atrium, and a lower chamber, called a ventricle.

Blood that has moved through your body and is low in oxygen enters the right atrium. Your heart pumps that blood to the right ventricle, then to your lungs for a refill on oxygen.

That oxygen-rich blood goes into the left atrium, on to the left ventricle, and out to the rest of your body.
DO Show picture card 1.3.

SAY The heart is located in the middle of the chest, near your lungs. Did you place your felt or paper heart in the correct spot?

Your heart and blood vessels make up your blood circulatory system. The circulatory system keeps you alive.

Blood vessels are long, hollow tubes of tissue, much like drinking straws.

SAY You have many different types of blood vessels. But the main three are arteries (shown in red), veins (shown in blue), and capillaries (not shown).

Arteries carry the oxygen-rich blood from your heart to all parts of your body. The farther the arteries are from your heart the smaller they are.

Capillaries connect your smallest arteries to your smallest veins, which carry blood that is low on oxygen back toward your heart.

DO Show picture card 1.4.

NOTE Point to each vein and artery. Describe the two steps while pointing to pictures 1 and 2.

SAY Let’s go over the major veins and arteries.

Blood (with little oxygen) enters the right, top chamber of the heart through the largest veins in your body. These veins are called the superior and inferior vena cava.

Blood then flows down to the right lower chamber, where it’s pumped out to the lungs through the pulmonary arteries. In the lungs, waste (carbon dioxide) is removed from the blood. The blood then gathers more oxygen.

DO Show picture card 1.5.
**NOTE**

**Point** to each vein and artery. **Describe** the two steps while pointing to pictures 3 and 4.

**SAY**

The blood, rich with oxygen, returns to the heart and enters the upper left chamber through the pulmonary veins. The blood then flows down to the lower left chamber and is pumped out of the aorta (which is your body’s largest artery) to the rest of your body. Your left and right coronary arteries carry oxygen-rich blood to all parts of your heart.

**SAY**

We’re going to review the meaning of a few terms that often get confused. **Cardiovascular disease** is the umbrella term for all types of diseases of your heart or blood vessels. One type of cardiovascular disease is **coronary heart disease**. This is when a person has “clogged arteries.” The term **heart disease** by itself is a catch-all phrase for a variety of problems that affect the heart’s structure and how it works. The most common type of heart disease is coronary heart disease, when the arteries are clogged.

**NOTE**

**Visit** The Heart Truth website at [www.hearttruth.gov](http://www.hearttruth.gov) for additional resources to help explain the difference between cardiovascular disease, coronary heart disease, and heart disease.
3. Facts About Heart Disease

NOTE
Before the session, read the “More Information” chart on pages 1.14-1.16.

SAY
Now that we know how important the heart is, let’s talk about heart disease and why it’s so important to protect your heart.

ASK
Do you know someone who has heart disease?

NOTE
Allow about 2 minutes for participants to respond.

DO
Show picture card 1.6.

SAY
Did you know that:

- Heart disease is the #1 cause of death for all men and women in the United States.
- One in four African Americans dies of heart disease.
- Heart disease is particularly deadly for African Americans.
- The death rate from heart disease is 24 percent higher for African American men and 26 percent higher for African American women of all ages than for whites.
- Among African Americans ages 25 to 44, the death rate from heart disease is twice as high for men, and more than twice as high for women, compared with whites in the same age group.
This course will help you understand the facts about heart disease, such as:

- A heart attack or stroke may seem sudden, but the truth is that heart disease happens over many years. Often it begins when you’re very young.
- Stress and anxiety play a role in heart disease. Stress and anxiety can trigger your arteries to tighten, which can raise your blood pressure and your risk of a heart attack.
- Preventing heart disease is important at any age. Just like maintaining your car, to keep it running smoothly, you need to care for your body so you keep it healthy and lower your chances of getting heart disease. This course will show you how.

In every session, you’ll hear about risk factors—traits or habits that make a person more likely to get a disease. Some risk factors, such as your age and family history, are things you can’t change. Although there are some risk factors that you can’t control, there are many that you can.

These include:

- Diabetes
- Heavy drinking
- Having high blood pressure, including preeclampsia, which occurs only during pregnancy. Having preeclampsia doubles your risk of heart disease and is more common among African Americans.
- High cholesterol
- Physical inactivity
- Not getting enough sleep
- Sleep apnea
- Being overweight
- Smoking
- Stress
4. Risk Factor Activity

**DO**  
Give each participant the “Are You at Risk for Heart Disease?” handout (page 1.23). Read out loud each risk factor. Ask participants to check off the ones they have.

**SAY**  
The more risk factors you’ve checked, the greater your risk for heart disease and stroke. Talk to your doctor about your risk.

**SAY**  
This course will explain how these risk factors affect the heart. It also will teach you ways that you and your family can prevent or control them, such as by:

- Getting your blood pressure, cholesterol, and blood sugar levels checked
- Maintaining a healthy weight
- Being more physically active
- Not smoking
- Getting enough sleep
- Getting checked for sleep apnea (when airways are blocked during sleep)
- Taking your medications as prescribed
- Improving your diet
- Learning how to manage stress
- Limiting or avoiding alcohol

**NOTE**  
(Optional) Share information about NHLBI’s The Heart Truth program described in the Appendix (page A.11).
## Heart Disease Risk Factors You Can Do Something About

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Facts You Need To Know</th>
<th>Take These Steps To Prevent Heart Disease</th>
</tr>
</thead>
</table>
| **High blood pressure** | - When your blood pressure stays high for a period of time, it can cause serious health problems.  
- High blood pressure makes your heart work harder than it should.  
- Untreated high blood pressure can lead to stroke (brain attack), heart attack, eye and kidney problems, and death. | - If your doctor gives you blood pressure medicine, take it the way the doctor tells you to.  
- Check your blood pressure once a year, or more often if it's high.  
- Aim for a healthy weight.  
- Be physically active.  
- Choose and prepare foods with less salt and sodium.  
- Eat more fruits and vegetables.  
- Choose low-fat milk products.  
- Follow the DASH Eating Plan.  
- If you drink alcohol, do so in moderation. |

### Cholesterol

- Our bodies need some cholesterol, a waxy substance that's in all the cells of our bodies.
- Low-density lipoprotein (LDL) is the “bad” cholesterol. High levels of it can clog your arteries.
- Another type of cholesterol, high-density lipoprotein (HDL), is the “good” cholesterol. It carries cholesterol away from your arteries.

**Check your cholesterol numbers (mg/dL)**

- A healthy total cholesterol level is less than 200 mg/dL.
- Your LDL should be less than 100 mg/dL.
- Men should have an HDL of 40 mg/dL or higher. Women’s should be 50 mg/dL or higher.

**Ask your doctor for a blood test called a lipid profile**

- This blood test measures all your cholesterol levels (total, LDL, HDL, and triglycerides).
- How often you need the blood test depends on your age and whether anyone in your family has high cholesterol or heart disease.
- Learn what your cholesterol numbers mean. If they’re high, ask your doctor how to lower them.
- Choose foods that are lower in saturated fat.
- To control your triglycerides:
  - Limit sweets, regular soda, juice, and other sugary drinks.
  - Don’t smoke.
  - Limit how much alcohol you drink.

---

*milligrams per deciliter
### Heart Disease Risk Factors You Can Do Something About (continued)

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Facts You Need To Know</th>
<th>Take These Steps To Prevent Heart Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overweight</strong>&lt;br&gt;Being overweight increases your risk of developing heart disease, high blood pressure, diabetes, gallstones, breathing problems, and certain cancers.</td>
<td>Check your body mass index (BMI) and waist measurement:&lt;br&gt;&lt;br&gt;<strong>Category</strong></td>
<td><strong>BMI</strong>&lt;br&gt;Normal 18.5 – 24.9&lt;br&gt;Overweight 25 – 29.9&lt;br&gt;Obese 30 or greater</td>
</tr>
<tr>
<td><strong>Diabetes</strong>&lt;br&gt;Diabetes occurs when your blood sugar, also called blood glucose, is too high.</td>
<td>• Diabetes is a serious disease. About one in four people with diabetes don’t know they have it.&lt;br&gt;• It can lead to heart disease and stroke, blindness, amputations, kidney disease, and other health problems.&lt;br&gt;• About 13 percent of African Americans have been diagnosed with diabetes.&lt;br&gt;• Being overweight is a major risk factor for diabetes.</td>
<td>• Find out if you have diabetes, and if so, how to keep it under control.&lt;br&gt;• Ask your doctor how often you should have your blood sugar checked.&lt;br&gt;• Medicare pays for the test if you have certain risk factors for diabetes.</td>
</tr>
<tr>
<td><strong>Physical Activity</strong>&lt;br&gt;Being physically active is one important step you can take to protect yourself against heart disease and feel better every day!</td>
<td>• You can break your daily 30 minutes of physical activity into smaller chunks, if that’s easier for you.&lt;br&gt;• You know you’re moving enough to help your heart if your heart is beating faster, you’re breathing harder, or you break a sweat.</td>
<td>Stay active. Walk briskly, dance, play soccer, or do other activities that you enjoy.</td>
</tr>
</tbody>
</table>
### Heart Disease Risk Factors You Can Do Something About (continued)

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Facts You Need To Know</th>
<th>Take These Steps To Prevent Heart Disease</th>
</tr>
</thead>
</table>
| **Smoking**  | - Cigarette smoking is addictive.  
- It harms your heart and lungs. It can raise your blood pressure and cholesterol level.  
- It harms the health of those around you. | - Stop smoking now.  
- If you can’t quit the first time, keep trying.  
- If you don’t smoke, don’t start. |
| **Sleep problems** | - When you sleep, your body is busy repairing your heart and blood vessels. Too little sleep increases your risk of heart disease, high blood pressure, diabetes, and stroke.  
- Sleep apnea can increase your risk for a heart condition called atrial fibrillation.  
- One cause of sleep apnea is obesity. | - If you think you have sleep apnea or if you have other sleep problems, talk with your health care provider. It’s important to get treatment. Having a healthy lifestyle will help you sleep better. |
| **Stress**   | Stress and anxiety play a role in heart disease. They can trigger your arteries to tighten, which can raise your blood pressure and your risk of a heart attack.  
Stress may also raise your risk of heart disease if it makes you more likely to overeat or smoke. | - Join a stress management program.  
- Try meditation or relaxation therapy.  
- Be physically active.  
- Talk with your family, friends, a qualified mental health care provider, clergy, or doctor. |
5. Family Health History Activity

**SAY** Your family's health history can give you information about your own health. Let's begin by looking at an example of a family health history.

**DO** Give each participant the “Harris Family Health History” handout (page 1.24).

**SAY** Earlier, we met the members of the Harris family. Their family history shows health problems that family members have in common.

**DO** Show picture card 1.1 of the Harris family while you review the handout.

**Ask** a volunteer to read out loud the health conditions of the Harris family members.

**Ask** What can we learn about the Harris family by looking at their health history?

Is there anything the family needs to be concerned about? If so, what?

**Note** Allow 2 or 3 minutes for participants to respond.

**Do** Add these answers if they aren’t mentioned:

- The Harris family has a history of high blood pressure.
- Darnell should see a health care provider to get screened for heart disease.
- Two family members smoke and need to take steps now to quit.
Knowing your own family health history will help you take action to control your risk for heart disease and stroke. If you don’t know many (or any) of your blood relatives or they have died, you can still learn about your risk factors for heart disease.

**DO**  
Give each participant the “My Family Health History” handout (page 1.25-1.26).

**SAY**  
Please take this handout home with you. Fill it out as best you can. Ask your family members about other members who aren’t available to talk to, and about those who have died.

**NOTE**  
As you explain how to fill out the family health history, **point** to the area of the handout that you’re talking about.

**SAY**  
Let’s talk about how to fill out the “My Family Health History” handout.

- Fill in each family member’s name, age, and health conditions—such as high blood pressure, high cholesterol, diabetes, heart attack, or stroke.
- For family members who have died, write down their cause of death and age when they died.
- Be sure to complete the health information for yourself as well.

**ASK**  
How will you find out about the health history of your family?

**NOTE**  
Allow 2 or 3 minutes for participants to respond.
**Session 1**  
**Knowledge Is Power: Know Your Risk for Heart Disease**

**DO**  
**Add** these answers if they’re not mentioned:

- Ask your relatives whether they have any of the heart disease risk factors we’ve talked about. Ask family members what they know about relatives who have died, including their health and cause of death.
- If you have adult children, ask them about their heart health. If you have younger children, talk to their health care provider on their next visit.

**SAY**  
Some family members may feel embarrassed or uncomfortable sharing information about their health. Here are some tips to get the conversation going:

- Show them the handout and ask them to help you fill it out.
- Talk about your own risk factors, and ask family members if they have the same or others.
- Tell them about this course and what you’re learning.

**SAY**  
In later sessions, I’ll ask for volunteers to share what they learned by completing their family history.

**DO**  
(Optional)

**Give** a prize to participants who have completed the family health history.
Review of Today’s Key Points

ASK

What are the risk factors for heart disease that we can prevent or control?

NOTE

Allow 2 or 3 minutes for participants to respond.

DO

Add these answers if they aren’t mentioned:

• Overweight
• Physical inactivity
• High blood pressure
• High cholesterol
• Diabetes
• Smoking
• Unhealthy diet
• Stress
• Sleep apnea
• Not getting enough sleep

SAY

You can’t control your family history, but knowing your family’s risk factors can help you protect your and your family’s heart health.

It can be hard to change old, unhealthy habits and learn new healthy ones. As President Obama said, “Change will not come if we wait for some other person or if we wait for some other time. We are the ones we’ve been waiting for.”

This course will teach you what you need to know to make healthy changes. Seeing you improve your health may inspire others to do the same.
Closing

**ASK**
Do you have any questions?

**NOTE**
Give participants a moment to respond.

**ASK** *(Optional)*
How many of you want to go on a grocery store tour? During week 8 or 9, a registered dietitian can lead us through a grocery store and help us learn how to shop for our hearts.

**NOTE**
If enough participants are interested, call the grocery store in your area and set up a time for a tour.

**SAY**
Thank you for coming. What did you think of today’s session?

**NOTE**
Allow a moment for participants to respond.

**SAY**
In the next session, we’re going to discuss the warning signs of a heart attack.

**NOTE**
Think about today’s session. What worked and what didn’t? Has the session helped you learn about your risk for heart disease?
The Harris family and friends together beat heart disease and live heart healthy. This family knows the toll that heart disease can have on families. They support and encourage each other to overcome challenges and learn new ways to be healthy.

- Ms. Diane Harris (Grandma Harris) is determined to be there for her family. Her resolve and spirit to improve her family’s heart health is a beacon of light that the family follows.
- The Harris family and friends show you how you can achieve a heart healthy lifestyle, too. Let’s learn from their examples!
- By choosing a heart healthy lifestyle, you can embrace the best that life has to offer—for yourself, your family, and future generations.
Are You at Risk for Heart Disease?

Name:

Risk factors are traits or habits that make a person more likely to get heart disease. Read this list of risk factors for heart disease. Check the ones you have.

**Heart disease risk factors you can do something about:**

- Overweight
- High blood pressure
- High cholesterol
- Diabetes
- Physical inactivity
- Unhealthy diet
- Smoking

**Heart disease risk factors you can’t control:**

- Age (45 years or older for men and 55 or older for women)
- Family history:
  - Father or brother with heart disease before age 55
  - Mother or sister with heart disease before age 65

The more risk factors you have checked, the greater your risk for heart disease. Talk to your doctor about your risk.
# Harris Family Health History

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Relationship</th>
<th>Health Conditions</th>
<th>Cause of Death (if applicable):</th>
<th>Age at Death</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ms. Diane</td>
<td>63</td>
<td>Mother</td>
<td>Diabetes, high blood pressure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bill</td>
<td>Deceased</td>
<td>Father</td>
<td>High blood pressure, smoked</td>
<td>Heart attack</td>
<td>55</td>
</tr>
<tr>
<td>Harold</td>
<td>65</td>
<td>Uncle</td>
<td>Diabetes, high blood pressure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faith</td>
<td>56</td>
<td>Aunt</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kayla</td>
<td>37</td>
<td>Self</td>
<td>Prediabetes, high blood pressure, overweight</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Darnell</td>
<td>27</td>
<td>Brother</td>
<td>High blood pressure, smoked</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pam</td>
<td>40</td>
<td>Sister</td>
<td>Overweight, high blood pressure, heart attack</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ronnie</td>
<td>57</td>
<td>Uncle</td>
<td>High blood pressure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Miles</td>
<td>8</td>
<td>Son</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Imani</td>
<td>10</td>
<td>Daughter</td>
<td>Overweight</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elijah</td>
<td>13</td>
<td>Son</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jamar</td>
<td>10</td>
<td>Nephew</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

*With Every Heartbeat Is Life: A Community Health Worker’s Manual on Heart Disease for African Americans*
# My Family Health History

Fill in the following information for each family member:

- Name
- Age
- Relationship to you
- Health conditions (such as heart attack, high blood pressure, diabetes, etc.)
- Cause of death and age (if deceased)

| Name: ___________________________ | Name: ___________________________ | Name: ___________________________ |
| Age: ___________________________ | Age: ___________________________ | Age: ___________________________ |
| Relationship: __________________ | Relationship: __________________ | Relationship: __________________ |
| Cause of Death (if applicable): __________________ | Cause of Death (if applicable): __________________ | Cause of Death (if applicable): __________________ |
| Age at Death: __________________ | Age at Death: __________________ | Age at Death: __________________ |
# My Family Health History (Continued)

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Age: ___________________________</th>
<th>Relationship: ___________________</th>
<th>Health Conditions: __________________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cause of Death (if applicable): ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at Death: ____________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

With Every Heartbeat Is Life: A Community Health Worker’s Manual on Heart Disease for African Americans