

# Heart Health

## 4 Chambers of Heart Health

Your heart has four chambers: two atria and two ventricles. It takes all four of these chambers working in concert to pump life-giving oxygen through your bloodstream—each chamber must function properly to prevent a catastrophic health emergency.

Similarly, four areas of your lifestyle—nutrition, physical activity, health education and stress management — have a massive impact on your heart's (and body's) overall health. This month's activity will ask you to examine each of these areas and consider how you can live a holistically heart-healthy lifestyle.

### **Nutrition:**

#### Use the Right Fuel

If you fill a traditional car up with diesel, it stops working — if you only eat unhealthy foods, your body breaks down as well. Use the nutrition tips and shopping list in this month's newsletter to guide your food choices in February.

### **Education:**

#### The More You Know...

To effectively fight heart disease, you need to know your numbers, particularly cholesterol, blood pressure and body mass index (BMI).

### Your Activity

Each week, practice following the guidelines for a different food group:

- **Week 1:** Vegetables and fruits
- **Week 2:** Dairy products & fats and oils
- **Week 3:** Breads, cereals and grains
- **Week 4:** Meat, beans, eggs and nuts

### Your Activity

If you haven't visited a doctor in the past year, make an appointment (or confirm you already have one) for a basic check-up. The appointment doesn't need to take place in February; you just need to get it on the books!



## Physical Activity:

### Move Your Way to Better Health

Simply being active for 150 minutes each week\* can greatly improve your health. Even short, 10-minute bouts of moderate to intense activity have a positive impact. Think of a few activities you enjoy—walking, running, biking, swimming, etc.—and stay active each day.

### Your Activity

Find time for 150 active minutes each week.



## Stress Management:

### Make Your Heart Happy

Unpredictable or consistently high stress levels make your heart work harder and often lead to bad habits that cause poor health. Thankfully, stress management is a skill you can practice. An easy, free and effective way to manage stress is to practice deep breathing each day.

### Your Activity

Spend 5-10 minutes each day in a calm, quiet place and practice deep breathing:

1. Sit in a comfortable position with your feet on the floor or lie down; close your eyes.
2. Picture yourself in a peaceful place; whatever feels soothing to you.
3. Inhale and exhale; focus on breathing slowly and deeply.
4. Continue to breathe slowly for 5-10 minutes or more.

*Stay positive! Change is hard for everyone and studies show it takes 60-90 days to build new habits, so it's likely there will be stumbles along the way. Forgive yourself, start over and keep going!*



*\*Always consult your doctor before starting any exercise program.*

*The information in this activity document is provided for general informational purposes only and should not be considered medical advice, diagnosis or treatment recommendations.*

# Activity Tracking

## Nutrition

Each week, practice following the guidelines for a different food group:

- **Week 1:** Vegetables and fruits
- **Week 2:** Dairy products & fats and oils
- **Week 3:** Breads, cereals and grains
- **Week 4:** Meat, beans, eggs and nuts

For each day your Nutrition task is completed, cross off "N" on the calendar.

## Education

Schedule a doctor's appointment.

Write your appointment on the calendar.

## Physical

Find time for 150 active minutes each week.

Keep track of your daily minutes. At the end of each week, total your completed minutes of activity.

## Stress Management

Spend 5-10 minutes each day in a calm, quiet place and practice deep breathing.

For each day you complete 5-10 minutes of quiet time, cross-off "SM" on the calendar.

SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL MINUTES
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# Employer Activity Tracking

Please complete the following information and submit it to your employer to receive credit for this activity:

Name: \_\_\_\_\_

Date: \_\_\_\_\_

## **Nutrition**

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Were you successful in your efforts to follow the dietary guidelines each week?  YES  NO

If no, what was the most difficult part of following the guidelines?  
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## **Education**

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Did you schedule or confirm a doctor's appointment?  YES  NO

## **Physical Activity**

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Did you increase your activity level this month?  YES  NO

What is your favorite activity to "get moving"?  
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## **Stress Management**

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Were you able to focus on your breathing at least once a week this month?  YES  NO

If no, what obstacles prevented you from doing so?  
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