

Keeping track of symptoms and how HCM affects your life

You will have regular visits with your cardiologist and hypertrophic cardiomyopathy (HCM) experts to assess how you are doing and if any of your treatments need to be changed.

Use this worksheet in between your appointments to help track how you feel, your symptoms, as well as how HCM limits your ability to do certain activities. Bring this and a copy of your current medication list with you to each visit.




Date: _____

Since my last visit, overall I feel:

- Better
- Worse
- About the same
- Different - in what way(s)? _____

In general, I've had more **good** / **bad** / **worst** days. (Circle one)

Here's how I would explain:

 A good day with HCM	 A bad day with HCM	 My worst day with HCM

Have you had any:

Hospitalizations

- Yes (If yes, when and for what reason: _____)
- No

Falls

- Yes (If yes, when and what happened: _____)
- No

Symptoms

Since my last appointment, I feel or have had:

	Not at all	Some of the time	Often	Most of the time	All of the time	What were you doing at the time?
Chest pain or tightness, especially during exercise						
Chest pain or pressure at rest						
Shortness of breath						
Dizziness						
Fainting						
Near fainting						
Palpitations or fluttering heart						
Swelling in my feet, ankles, legs or stomach						
Feeling very tired						
Other:						

Triggers

Many people with HCM have learned over time what can trigger symptoms or make them generally not feel well. For example, if they eat a heavy meal, don't take their medications, spend too much time in the heat, or push themselves too hard.

Think about and write down possible triggers and what you can do to avoid them.

What makes me feel worse	How to avoid or limit these things/situations

How HCM limits what you do

Since my last visit, I've noticed that HCM limits these activities or aspects of my daily life:

	Not at all	Some of the time	Often	Most of the time	All of the time
Working (fulfilling job responsibilities)					
Being able to exercise					
Walking					
Doing housework					
Taking care of or keeping up with kids/grandkids					
Hobbies, recreational activities					
Being social					
Staying emotionally healthy					
Sleeping					
Family relationships feel strained					
Being intimate					
Travel plans					
Driving a vehicle					
Other:					

Emotional/mental health

On a scale from 0 to 10, how stressed or anxious have I been feeling?

Not at all stressed or anxious

I've never felt more stressed or anxious

0	1	2	3	4	5	6	7	8	9	10
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On a scale from 0 to 10, how sad or depressed have I been feeling?

Not sad at all

The worst sadness I've felt, nothing cheers me up

0	1	2	3	4	5	6	7	8	9	10
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Do you think that you could use more support for your emotional/mental health?

- Yes
- No
- I haven't thought about it

Who or what activities help you cope or help boost your spirits?

Anything else that is bothering you that you want to remember to discuss?
