

An elderly couple, a woman with short grey hair and a man with a grey beard, are sitting at a table and looking at an open book together. The woman is smiling and looking down at the book, while the man is leaning over her, also smiling and looking at the book. They are in a warm, indoor setting with a vase of yellow flowers in the background.

Your Aortic Stenosis

SYMPTOM TRACKER

Track your heart health and
together with your doctor,
stand up to Aortic Stenosis.

Listen to your heart. Know the signs.

reachfortheheart.com/canada-en

Your **Aortic Stenosis Symptom Tracker** has been developed to help you monitor and record your symptoms.

Understanding how your Aortic Stenosis impacts you and your lifestyle can help your doctor more readily assess the cause, severity and progression of your aortic stenosis.

Know the Signs.

These are the symptoms of Aortic Stenosis: ⁽¹⁾



Chest pain (angina) or tightness



Rapid, fluttering heartbeat



Trouble breathing or shortness of breath



Feeling dizzy or fainting



Swollen ankles or feet

The symptoms of Aortic Stenosis are often dismissed as typical signs of aging and can be difficult to differentiate without close monitoring. ⁽¹⁾ You are at increased risk ⁽¹⁾ with symptomatic severe Aortic Stenosis so it is critical to understand your heart health and to report to your doctor if your condition deteriorates.

⁽¹⁾ Carabello BA. Introduction to aortic stenosis. *Circ Res* 2013;113:179–85.

How to use this guide

1. Write a few sentences about your current health and how you feel your Aortic Stenosis impacts your life.
2. Fill in the date on the first row on the days that you complete the Tracker.
3. Write a few sentences at the end of the day to reflect on any symptoms or activities you felt were more impacted than usual.
4. Try to complete at least 14 days worth of monitoring so that your doctor can have a more complete picture of your symptoms.
5. Keep this Tracker in a place that will remind you to complete it daily (eg. on the fridge, bedside table).
6. Bring this Tracker with you to your next doctor's appointment. You can also use this in combination with the Doctor Discussion Guide, available on reachfortheheart.com/canada-en to help you talk with your doctor about your Aortic Stenosis.

Aortic Stenosis impacts my life by:






Activities I enjoy but no longer do include:






Activities I would like to do again include:



Day 1

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 2

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 3

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 4

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 5

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 6

Date _____






Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				

Other changes today

**Day 7**

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				

Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				

Other changes today

Symptoms that have worsened this week:






Lifestyle factors that have worsened this week:






Other changes that affected me this week:



Day 8

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 9

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 10

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 11

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 12

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				






Other changes today



Day 13

Date _____






Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				






Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				

Other changes today

**Day 14**

Date _____

Symptoms	None	Mild	Mod.	Severe
 Chest pain (angina) or tightness				
 Rapid, fluttering heartbeat (palpitations)				
 Trouble breathing or shortness of breath, especially during activity				
 Feeling dizzy or fainting when you're tired				
 Swollen ankles or feet				

Symptoms	None	Mild	Mod.	Severe
 Difficulty walking short distances				
 Difficulty sleeping or needing to sleep sitting up				
 Reduced physical activity				
 Stress				
 Anxiety				

Other changes today

Symptoms that have worsened this week:

Lifestyle factors that have worsened this week:

Other changes that affected me this week:

Notes

Notes

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