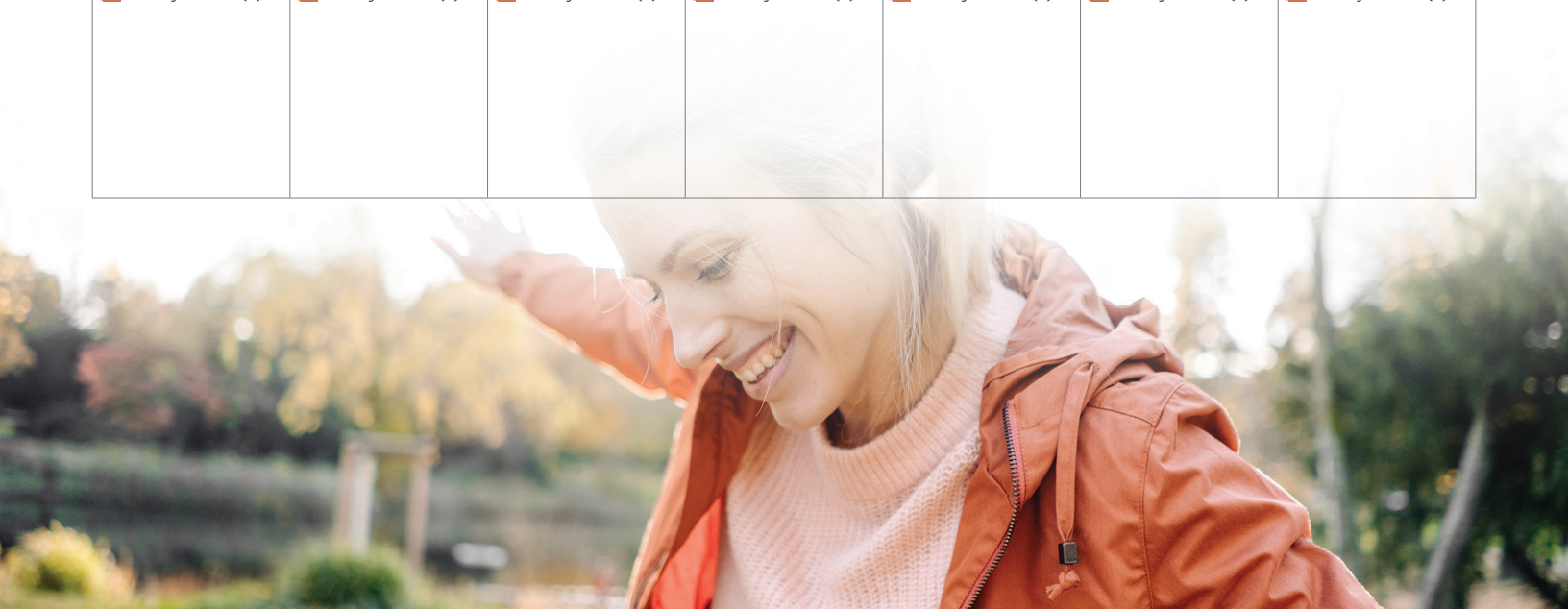


# 4 WEEKS TO BETTER HEALTH: MANAGING HIGH BLOOD PRESSURE

WEEK 1 CHECK & RECORD BLOOD PRESSURE ____ / ____						
<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):
WEEK 2 CHECK & RECORD BLOOD PRESSURE ____ / ____						
<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):
WEEK 3 CHECK & RECORD BLOOD PRESSURE ____ / ____						
<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):
WEEK 4 CHECK & RECORD BLOOD PRESSURE ____ / ____						
<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):	<input type="checkbox"/> Today's Goal(s):



# MANAGING HIGH BLOOD PRESSURE GOALS SHEET

Instructions: Working with your health care practitioner, identify 3 goals for each key category to help manage high blood pressure and then write down the plan on achieving those goals. On the calendar, record what goal was selected for the day and check off when you have worked to complete the goal.

EATING WELL	
Goal:	Plan:
Goal:	Plan:
Goal:	Plan:
BEING ACTIVE	
Goal:	Plan:
Goal:	Plan:
Goal:	Plan:
WEIGHT MANAGEMENT	
Goal:	Plan:
Goal:	Plan:
Goal:	Plan:
IDENTIFYING AND AVOIDING BLOOD PRESSURE TRIGGERS	
Goal:	Plan:
Goal:	Plan:
Goal:	Plan:
STRESS MANAGEMENT	
Goal:	Plan:
Goal:	Plan:
Goal:	Plan:
TAKING AN ACTIVE ROLE IN YOUR HEALTH & HEALTH TEAM	
Goal:	Plan:
Goal:	Plan:
Goal:	Plan: