

Standardized Messaging

KASH - Action Plan for improving CARE Collaborative data collection and increasing blood pressure awareness through health literacy in Kentucky 2018-2019

After reviewing suggestions from KASH, the group will be implementing an action plan to improve the tally sheet and create health literacy tools to increase participants' knowledge and ability to identify their blood pressure color zone. The overall goal is to improve blood pressure control and reduce the risks for heart disease and stroke in Kentucky by improving data collection and implementing standardized messaging.

Action	KASH Action	Resources Needed	Completion Date
Data Collection/Tally Sheet Re-design	Complete Survey (Survey on what each question on the tally sheet means)	HDSP will create the survey and send to all KASH members by January 22, 2019	Responses collected and analyzed by February 26, 2019
Action	KASH Action	Resources Needed	Completion Date
Health Literacy Sub-Committee	<ul style="list-style-type: none"> Brainstorm educational materials Create new tools 	A health literacy subcommittee to be created and utilized in this process	December 2019
Action	KASH Action	Resources Needed	Completion Date
Communication/Messaging	Collaborate to accomplish Strategy 2 in KHDSP State Action Map and Plan. Work with AHA and DPH representative on key messages needed.	Infographics/materials in collaboration with AHA	December 2019

KASH Action Plan 2018-2019

Action	KASH Action	Resources Needed	Completion Date
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Focus Topics

- Signs and Symptoms of Heart Attack
- Signs and Symptoms of Stroke
- Weight and Diet
- Sodium
- Alcohol Reduction
- Physical Activity
- Smoking
- A1-C
- Cholesterol Management
- Blood Pressure Monitoring and Hypertension

Signs and Symptoms of Heart Attack



Signs and Symptoms of Stroke

SPOT A STROKE F.A.S.T.

F.A.S.T. is an easy way to remember the sudden signs of a stroke.



FACE DROOPING

Face Drooping
Does one side of the face droop or is it numb? Ask the person to smile.



ARM WEAKNESS

Arm Weakness
Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?



SPEECH DIFFICULTY

Speech Difficulty
Is speech slurred, are they unable to speak, or are they hard to understand? Ask the person to repeat a simple sentence, like "the sky is blue." Is the sentence repeated correctly?



TIME TO CALL 911

Time to call 9-1-1
If the person shows any of these symptoms, even if the symptoms go away, call 9-1-1 and get them to the hospital immediately.

Beyond F.A.S.T. – Other Symptoms you should know

- Sudden numbness or weakness of the leg
- Sudden confusion or trouble understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause



Together to End Stroke™

StrokeAssociation.org/warningsigns

KNOW STROKE

Every 40 seconds, someone in the United States has a stroke. Responding quickly when a stroke occurs can mean the difference between recovery and disability. Learn the signs.

SPOT A STROKE F.A.S.T.

F.A.S.T. is an easy way to remember how to recognize a stroke and remember what to do.

FACE DROOPING
Does one side of the face droop or is it numb?

ARM WEAKNESS
Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?

SPEECH DIFFICULTY
Is speech slurred or difficult to understand?

TIME TO CALL 911
If someone shows any of these symptoms, even if the symptoms go away, call 911 right away.

OTHER SIGNS OF STROKE

-  Sudden numbness or weakness of the face, arm, or leg, especially on one side of the body
-  Sudden confusion, trouble speaking or understanding
-  Sudden trouble seeing in one or both eyes
-  Sudden trouble walking, dizziness, loss of balance or coordination
-  Sudden severe headache with no known cause

CALL 911

Time lost is brain lost. Stroke strikes fast. You should too. Call 911.

STROKE

REDUCE YOUR RISK FACTORS FOR STROKE

There are two types of risk factors for stroke: Those you cannot change and those you can.

Risk factors that can't be changed

- Age
- Gender
- Heredity
- Race
- History of previous heart attack, transient ischemic attack (TIA) or stroke.

Risk factors that you can change

- Manage blood pressure.
- Control cholesterol.
- Reduce blood sugar.
- Get active.
- Eat better.
- Lose weight.
- Stop smoking.

Talk with your doctor about your risk factors and get the facts (and help) you need to move forward. When it comes to your health, you are the cure.

For more information, call 1-888-4-STROKE (1-888-478-7653)

StrokeAssociation.org



American Stroke Association
A division of the American Heart Association

To order or for other resources visit ShopHeart.org
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Signs and Symptoms of Stroke



STROKE CARE NETWORK

B.E. F.A.S.T. for stroke

If you or someone you know are experiencing the symptoms of a stroke that came on suddenly, remember B.E. F.A.S.T. and

Call 911 IMMEDIATELY!

**B**ALANCE:
Trouble walking?
Loss of balance or coordination, dizziness.

**E**YES:
Trouble seeing?
Change in vision in one or both eyes.

**F**ACE:
Smile uneven?
Face looks uneven, droopy or is numb.


**A**RM(S):
Raise both arms. Does one drop?
Weakness or numbness in one arm or leg.

**S**PEECH:
Trouble speaking or confused?
Slurred or difficult speech.


**T**IME:
Time lost = Brain lost. Note the time symptoms start and call 9-1-1 immediately.
Another symptom could be an unfamiliar or sudden severe headache.

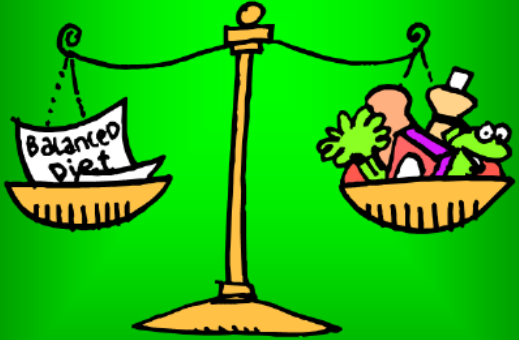
BE FAST was developed by Intermountain Healthcare, as an adaptation of the FAST model implemented by the American Stroke Association. Reproduced with permission from Intermountain Healthcare. Copyright 2011, Intermountain Health Care.

Weight and Diet



Nutrition Basics





Eating Healthy With Diabetes

Diabetes Basics Table of Contents

Diabetes and Food	3
The Basics	4
What is Carbohydrate?	5-8
What is Protein?	9
What is Fat?	10
Reading Food Labels	11
Salt	12
Tips of Meal Planning	13
Meal Pattern	14
Carbohydrate Counting	15-16
What is a Healthy Plate?	17-19
Aim for Healthy Weight	20
Basic Recipe Substitutions	21
Favorite Recipes	22-34
Resources	35



This booklet is designed to give you basic information about nutrition. It is not meant to take the place of diabetes education sessions or meeting with your health care team.

Ask your local health department or health care provider about diabetes education classes, support groups, referral for an appointment with a dietitian and other services offered for people with diabetes.

Visit the Kentucky Diabetes Resource Directory at <https://wcd.chfs.ky.gov/KYDiabetesResources/>

Printed 2018



Healthy For Good™

Life's Simple 7

HOW TO EAT BETTER

1 LEARN WHAT THE AHA RECOMMENDS

Make smart choices to build an overall healthy dietary pattern. These daily amounts are based on AHA's Healthy US-Style Eating Pattern for 2,000 calories per day. There is a right number of calories for you, based on your age, activity level and whether you are trying to lose, gain or maintain your weight. Cup/ounce equivalents may vary for different types of food. Visit heart.org/servings for more information on serving sizes.

	Vegetables fresh, frozen, canned and dried	5 servings or 2.5 cups
	Fruits fresh, frozen, canned and dried	4 servings or 2 cups
	Grains at least half should be whole grains	6 servings or 6 ounces
	Dairy low-fat (1%) and fat-free	3 servings or 3 cups
	Proteins fish, skinless poultry, lean meat, eggs, nuts, seeds, beans and legumes	2 servings or 5.5 ounces
	Oils polyunsaturated and monounsaturated	3 tablespoons

2 READ NUTRITION LABELS

Learning how to read and understand food labels can help you make healthier choices.



Limit sugary drinks, sweets, fatty or processed meats, salty foods, and highly processed foods

Avoid partially hydrogenated oils, tropical oils, and excessive calories

LEARN MORE AT HEART.ORG/MYLIPECHECK AND HEART.ORG/EATSMART

3 TIPS FOR SUCCESS

Goal setting and making small changes can help set you up for success.



WATCH CALORIES
Eat only as many calories as you use up through physical activity. Understand serving sizes and keep portions reasonable.



COOK AT HOME
Take control over the nutritional content of your food by learning healthy preparation methods.



LOOK FOR THE HEART-CHECK
The Heart-Check mark helps you find foods that can be part of a healthy eating plan.



LEARN THE SALTY SIX
Limit the amount of sodium you're eating each day. Learn the Salty Six — common foods loaded with excess sodium.

Cold Cuts & Cured Meats
Pizza
Soup
Breads & Rolls
Sandwiches
Burritos & Tacos

Weight and Diet

IN BRIEF:

Your Guide To Lowering Your Blood Pressure With DASH

What you eat affects your chances of developing high blood pressure (hypertension). Research shows that high blood pressure can be prevented—and lowered—by following the Dietary Approaches to Stop Hypertension (DASH) eating plan, which includes eating less sodium.

High blood pressure is blood pressure higher than 140/90 mmHg*, and prehypertension is blood pressure between 120/80 and 139/89 mmHg. High blood pressure is dangerous because it makes your heart work too hard, hardens the walls of your arteries, and can cause the brain to hemorrhage or the kidneys to function poorly or not at all. If not controlled, high blood pressure can lead to heart and kidney disease, stroke, and blindness.

But high blood pressure can be prevented—and lowered—if you take these steps:

- Follow a healthy eating plan, such as DASH, that includes foods lower in sodium.
- Maintain a healthy weight.
- Be moderately physically active for at least 2 hours and 30 minutes per week.
- If you drink alcoholic beverages, do so in moderation.

If you already have high blood pressure and your doctor has prescribed medicine, take your medicine, as directed, and follow these steps.

The DASH Eating Plan

The DASH eating plan is rich in fruits, vegetables, fat-free or low-fat milk and milk products, whole grains, fish, poultry, beans, seeds, and nuts. It also contains less sodium; sweets, added sugars, and beverages containing sugar; fats; and red meats than the typical American diet. This heart-healthy way of eating is also lower in saturated fat, *trans* fat, and cholesterol and rich in nutrients that are associated with lowering blood pressure—mainly potassium, magnesium, calcium, protein, and fiber.

* Blood pressure is usually measured in millimeters of mercury, or mmHg.



Following the DASH Eating Plan

Use this chart to help you plan your menus—or take it with you when you go to the store.

Food Group	Servings Per Day			Serving Sizes	Examples and Notes	Significance of Each Food Group to the DASH Eating Plan
	1,600 Calories	2,000 Calories	2,600 Calories			
Grains*	6	6-8	10-11	1 slice bread 1 oz dry cereal† ½ cup cooked rice, pasta, or cereal	Whole wheat bread and rolls, whole wheat pasta, English muffin, pita bread, bagel, cereals, grits, oatmeal, brown rice, unsalted pretzels and popcorn	Major sources of energy and fiber
Vegetables	3-4	4-5	5-6	1 cup raw leafy vegetable ½ cup cut-up raw or cooked vegetable ½ cup vegetable juice	Broccoli, carrots, collards, green beans, green peas, kale, lima beans, potatoes, spinach, squash, sweet potatoes, tomatoes	Rich sources of potassium, magnesium, and fiber
Fruits	4	4-5	5-6	1 medium fruit ½ cup dried fruit ½ cup fresh, frozen, or canned fruit ½ cup fruit juice	Apples, apricots, bananas, dates, grapes, oranges, grapefruit, grapefruit juice, mangoes, melons, peaches, pineapples, raisins, strawberries, tangerines	Important sources of potassium, magnesium, and fiber
Fat-free or low-fat milk and milk products	2-3	2-3	3	1 cup milk or yogurt 1½ oz cheese	Fat-free (skim) or low-fat (1%) milk or buttermilk; fat-free, low-fat, or reduced-fat cheese; fat-free or low-fat regular or frozen yogurt	Major sources of calcium and protein
Lean meats, poultry, and fish	3-6	6 or less	6	1 oz cooked meats, poultry, or fish 1 egg‡	Select only lean meats; trim away visible fat; broil, roast, or poach; remove skin from poultry	Rich sources of protein and magnesium
Nuts, seeds, and legumes	3 per week	4-5 per week	1	¼ cup or 1½ oz nuts 2 Tbsp peanut butter 2 Tbsp or ½ oz seeds ½ cup cooked legumes (dry beans and peas)	Almonds, hazelnuts, mixed nuts, peanuts, walnuts, sunflower seeds, peanut butter, kidney beans, lentils, split peas	Rich sources of energy, magnesium, protein, and fiber
Fats and oils§	2	2-3	3	1 tsp soft margarine 1 tsp vegetable oil 1 Tbsp mayonnaise 2 Tbsp salad dressing	Soft margarine, vegetable oil (such as canola, corn, olive, or safflower), low-fat mayonnaise, light salad dressing	The DASH study had 27 percent of calories as fat, including fat in or added to foods
Sweets and added sugars	0	5 or less per week	≤2	1 Tbsp sugar 1 Tbsp jelly or jam ½ cup sorbet, gelatin 1 cup lemonade	Fruit-flavored gelatin, fruit punch, hard candy, jelly, maple syrup, sorbet and ices, sugar	Sweets should be low in fat

* Whole grains are recommended for most grain servings as a good source of fiber and nutrients.

† Serving sizes vary between ½ cup and 1½ cups, depending on cereal type. Check the product's Nutrition Facts label.

‡ Because eggs are high in cholesterol, limit egg yolk intake to no more than four per week; two egg whites have the same protein content as 1 oz of meat.

§ Fat content changes serving amount for fats and oils. For example, 1 Tbsp of regular salad dressing equals one serving; 1 Tbsp of a low-fat dressing equals one-half serving; 1 Tbsp of a fat-free dressing equals zero servings.

Abbreviations: oz = ounce; Tbsp = tablespoon; tsp = teaspoon

3

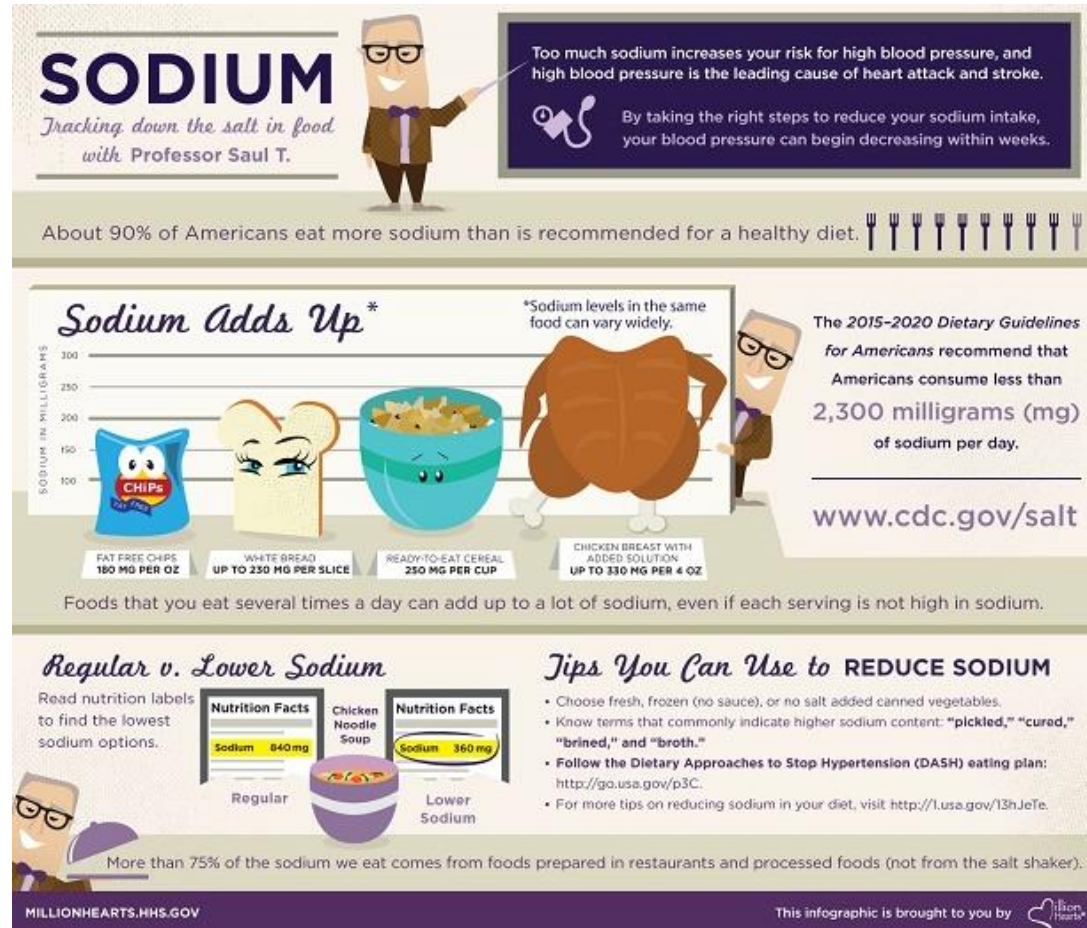
What's on Your Plate and How Much Are You Moving?

Use this form to track your food and physical activity habits before you start on the DASH eating plan or to see how you're doing after a few weeks. To record more than 1 day, just copy the form. Total each day's food groups and compare what you ate with the DASH eating plan at your calorie level.

Date:			Number of Servings by DASH Food Group								
Food	Amount (serving size)	Sodium (mg)	Grains	Vegetables	Fruits	Milk products	Meats, fish, and poultry	Nuts, seeds, and legumes	Fats and oils	Sweets and added sugars	
Example: whole wheat bread, with soft (tub) margarine	2 slices 2 tsp	299 52	2							2	
Breakfast											
Lunch											
Dinner											
Snacks											
Day's Totals											
2,000 calorie-level example: Compare yours with the DASH eating plan at your calorie level.			2,900 or 1,500 mg per day	6-8 per day	4-5 per day	4-5 per day	2-3 per day	6 or less per day	4-5 per week	2-3 per day	
Enter your calorie level and servings per day:											
Physical Activity Log											
Aim for at least 2 hours and 30 minutes of moderate-intensity physical activity per week. When your heart is beating noticeably faster, the activity is probably moderately intense.			30 min 5 min			Moderate walking Cleaning					
Record your minutes per day for each activity:			Time:		Type of activity:						

4

Sodium



Alcohol Reduction



HEART HEALTH & ALCOHOL

If you drink alcohol, do so in moderation.



What is one drink?



Drinking more alcohol increases such dangers as alcoholism, high blood pressure, obesity, stroke, breast cancer, suicide and accidents. Also, it's not possible to predict in which people alcoholism will become a problem. Given these and other risks, the American Heart Association cautions people NOT to start drinking if they do not already drink alcohol. Consult your doctor on the benefits and risks of consuming alcohol in moderation.

<https://www.heart.org/en/healthy-living/healthy-eating/eat-smart/nutrition-basics/alcohol-and-heart-health>

Physical Activity



You know you need physical activity to stay healthy.
But did you know it can help you feel better right away?



Boost your mood



Sharpen your focus



Reduce your stress



Improve your sleep

So get more active — and start feeling better today.

How much activity do I need?

Moderate-Intensity aerobic activity

Anything that gets your heart beating faster counts.



AND



Tight on time this week? Start with just 5 minutes. It all adds up!

Or get the same benefits in half the time. If you step it up to vigorous-intensity aerobic activity, aim for at least 75 minutes a week.

Is it moderate or vigorous? Use the “talk test” to find out.

When you're being active, just try talking:

- If you're breathing hard but can still have a conversation easily, it's **moderate-intensity activity**
- If you can only say a few words before you have to take a breath, it's **vigorous-intensity activity**

What counts?

Whatever gets you moving!



Even things you have to do anyway



Even things that don't feel like exercise

You can get more active.

No matter who you are, where you live, on your own, or together.
You can find a way that works for you.



And over time, physical activity can help you live a longer, healthier life.

- ✓ Lower your risk of diseases like type 2 diabetes and some cancers
- ✓ Control your blood pressure
- ✓ Stay at a healthy weight

So take the first step. Get a little more active each day. **Move your way.**

Find tips to get moving and build a weekly activity plan.
health.gov/MoveYourWay/Activity-Planner



Physical Activity



KNOW

PHYSICAL ACTIVITY

Along with eating an overall heart-healthy diet and keeping a healthy body weight, getting regular physical activity is a key to being Healthy for Good®.

HOW MUCH ACTIVITY DO YOU NEED?

Try for at least 150 minutes a week of moderate intensity aerobic physical activity, or 75 minutes a week of vigorous activity. Twenty to thirty minutes every day is an easy goal to remember. You'll benefit even if you fit in short bouts of activity throughout the day.

MODERATE VS VIGOROUS

Moderate intensity means your heart rate and breathing will speed up, but you'll still be able to talk (but not sing) without getting out of breath. Some examples include: walking at a brisk pace, gardening, doubles tennis, ballroom dancing and easy bicycling.


Vigorous intensity means you won't be able to say more than a few words at a time without getting out of breath. Some examples include: jogging, running, singles tennis, jumping rope and fast cycling.

SIT LESS AND MOVE MORE

Being sedentary (sitting too much) increases your risk of disease. Any amount of activity is better than none.

TAKE THE FIRST STEP

Visit heart.org/movemore for free resources, ideas and tips.



GO

Easy ways to be more active during the day:

- Take the stairs instead of the elevator.
- Walk while you talk on the phone.
- Take a walk after dinner before turning on the TV.

GET STARTED WITH WALKING


Walking is a great way for anyone at any fitness level to get moving. Design a walking program that you can stick with – one that fits your life. If you're inactive, start your walking program slowly.

- **Make it routine:** Try to walk at the same time of day so it becomes part of your lifestyle.
- **Be flexible:** If you miss a workout, don't give up. Build activity into your day another way.
- **Stay motivated:** You're more likely to stick with it if you have a companion.
- **Dress for success:** Wear sneakers or flat shoes that fit well and comfortable clothing.
- **Stick with it:** If you do stop for a while, get started again gradually and work up to your old pace.
- **Pick up the pace:** When you're ready, walk longer, further or an additional day.

Talk to your doctor or healthcare provider before you start a new physical activity if you have heart disease, diabetes, or other active chronic health issues or conditions.

For more information, go to

Heart.org/MoveMore




American Heart Association.

To reorder or for other resources visit ShopHeart.org

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Smoking



American Heart Association.

Youth and Tobacco: A New Crisis

The **tobacco endgame** – the path to ending tobacco use and nicotine addiction in the U.S. – is within sight. This could save millions of lives.

But e-cigarettes and other products like cigarillos, hookah and smokeless tobacco pose a significant threat. They are gaining popularity, especially with kids and young adults.

Addicting a New Generation


Not only are more **kids and young adults** using e-cigarettes, they are **using them more often**.

1 in 5
high school age kids
now report using e-cigs (vaping).
They are the most popular tobacco
product used by adolescents.

Nearly **90 PERCENT**
of smokers **first try a tobacco
product by age 18**. But if someone
has not started using tobacco by
age 26, they are likely to never start.


Many adolescents falsely believe these
new products are safe. Some don't even
realize they contain nicotine. But they can
deliver much higher concentrations of
addictive nicotine than traditional
cigarettes.

There is evidence
that kids and young
adults may transition
from these products
to cigarettes and
other drugs.




Seeing Through the Smoke Screen


Tobacco companies have grown bolder in their efforts to keep people addicted and misinformed:




They fund
lawsuits to prevent
or weaken
tobacco-control
policies.




They spend
millions lobbying
lawmakers to
oppose such
policies.



They target
products and
promotions to youth
and at-risk
populations.



They support
watered-down and
less effective
tobacco-control
measures as a public
relations ploy.



They fund
organizations and
groups that claim
to address the
tobacco epidemic
but instead divert
attention from
proven measures.



Myth: E-cigarettes produce a harmless water vapor.
Reality: E-cigarettes produce an aerosol that has nicotine and toxins known to cause cancer. These toxic chemicals include things like benzene, lead, and nickel, some of the same products found in tobacco products. The chemical diacetyl, found in many e-cigarette flavors, is linked to serious lung disease.

Myth: E-cigarettes are safe.
Reality: E-cigarettes are not a risk-free product. They contain nicotine and low levels of toxins and chemicals. E-cigarettes are especially dangerous for teens, whose brains are still developing. Teens who use e-cigarettes are at risk for nicotine addiction, mood disorders, difficulty paying attention, reduced impulse control, and learning problems.

Myth: E-cigarettes are not addictive.
Reality: Nicotine is a highly addictive drug. Nicotine is the main ingredient in most e-cigarette liquids.

Myth: E-cigarettes can help people quit tobacco.
Reality: E-cigarettes are not approved by the FDA to help people quit tobacco. In fact, e-cigarette use among youth and young adults is strongly linked to the use of other tobacco products, such as traditional cigarettes, cigars, and smokeless tobacco.

Myth: Big Tobacco doesn't make e-cigarettes.
Reality: All major tobacco companies now make e-cigarettes. In fact, the maker of Marlboro cigarettes just bought a 35% share in JUUL Labs.

Need help quitting?
Visit www.quitnowkentucky.org!

Sources:
1. U.S. Department of Health and Human Services. In partnership with the Office of the U.S. Surgeon General and the U.S. Centers for Disease Control and Prevention, Office on Smoking and Health. *Know the Risk: E-cigarettes & Young People*. 2016. <https://www.surgeongeneral.gov/resources/infographics/know-the-risk-e-cigarettes-and-young-people/> [Accessed 1/2/2018].
2. *Wall Street Journal*. *Altria, maker of Marlboro cigarettes, intends \$12.5 billion in Juul deal*. Post: December 20, 2018.



Smoking

Life's Simple **7**

HOW TO STOP SMOKING

1 EDUCATE YOURSELF

The first step to quitting smoking is to understand your risks associated with tobacco use, but there's a lot more to quitting than frightening statistics. Your journey to smoke-free living will have many positive health benefits.^{1,2}

20 minutes after quitting: your blood pressure and heart rate recover from the nicotine-induced spike.	12 hours of smoke-free living: the carbon monoxide levels in your blood return to normal.
2 weeks to three months of smoke-free living: your circulation and lung function begin to improve.	1 month to nine months of smoke-free living: clear and deeper breathing gradually returns.
1 year after quitting, your risk of coronary heart disease is reduced by 50 percent.	5 years after quitting, your risk of stroke is similar to that of a nonsmoker.

2 MAKE A PLAN TO QUIT

You're more likely to quit smoking for good if you prepare by creating a plan that fits your lifestyle.

SET a quit date within the next 7 days.

CHOOSE a method: cold turkey or gradually.

DECIDE if you need help from a healthcare provider or nicotine replacement.

PREPARE for your quit day by planning how to deal with cravings and urges to smoke.

QUIT on your quit day.

3 TIPS FOR SUCCESS

Goal setting and making small changes can help set you up for success.

DEAL WITH URGES

Whether physical or mental, learn your triggers and make a plan to address them. Avoid situations that make you want to smoke until you're confident that you can handle them.

GET ACTIVE

Physical activity can help you manage the stress of not smoking.

HANDLE STRESS

Learn other healthy ways to manage the stress of quitting.

GET SUPPORT

A buddy system or support program can help you work through problems you might have when quitting smoking.

STICK WITH IT

Quitting smoking takes a lot of willpower. Reward yourself when you reach milestones and forgive yourself if you take a step backward. Get back on course as soon as possible to stay on track and kick the habit for good.

1. U.S. Department of Health and Human Services. A Report of the Surgeon General: How Tobacco Causes Disease: What's Known in the United States. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010.

2. U.S. Department of Health and Human Services. The Health Consequences of Smoking: What's Known in the United States. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.

HEALTH SCREENING SERVICES™
Administered by a Licensed Laboratory Services Provider

Tobacco Cessation Services Fact Sheet

The single most important thing that you can do for your health and the health of others is to quit using tobacco.

Who We Are

Quit Now Kentucky (QNK) is a FREE tobacco cessation service to help Kentuckians quit smoking or using tobacco products. It includes telephone coaching, web-based services, and text messaging.

How to Reach Us

Call **1-800-QUIT-NOW**
or
1-800-DEJELO-YA
from **8 AM to 1 AM EST**
or online anytime at
www.QuitNowKentucky.org

What to Expect

- 1 Call QNK or register online and complete the intake survey
- 2 You receive a welcome packet in the mail
- 3 A friendly coach calls you, offers tips, and helps you create a quit plan
- 4 The quit line sends you Nicotine Replacement Therapy (NRT) by mail, if eligible
- 5 You receive 2 more counseling calls and learn strategies to stay quit

Our FREE Services

- Support and advice from an experienced quit coach
- NRT by mail for medically eligible callers—FREE 4 week supply for those who are uninsured or have Medicare
- Self-guided web program, text messaging, and emails to support your quit journey
- Pregnancy/postpartum program
- All services available in English, Spanish, and Arabic—counseling for 192 other languages and for the deaf and hard-of-hearing available free through a translation service

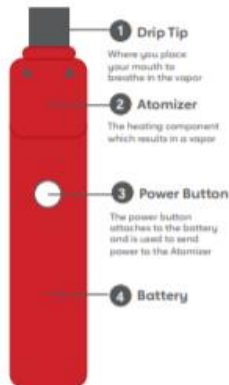
Smoking



Vaping is becoming an increasing epidemic among teens. In 2018, e-cigarette use nearly doubled in high school students.

What is vaping?

Vaping is the act of inhaling and exhaling the aerosol, often referred to as vapor, which is produced by an e-cigarette or similar device. The term is used because e-cigarettes do not produce tobacco smoke, but rather an aerosol, often mistaken for water vapor, that actually consists of fine particles. Many of these particles contain varying amounts of toxic chemicals, which have been linked to heart and respiratory diseases and cancer.

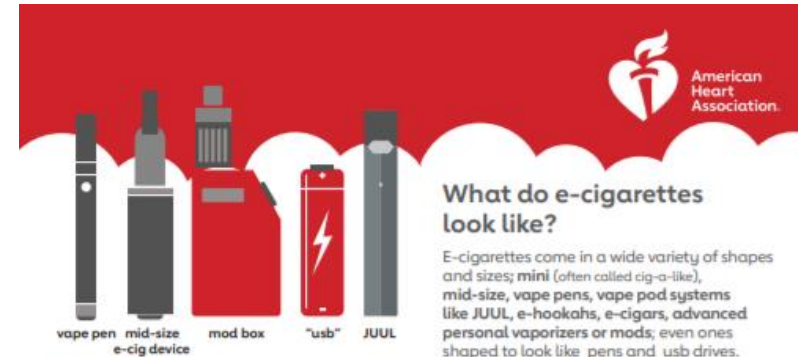


What is an e-cigarette?

Electronic cigarettes (e-cigarettes) are battery-powered devices that can deliver nicotine and flavorings to the user in the form of an aerosol. Most have a battery, a heating element, and a place to hold a liquid or nicotine salts. Flavors that make e-cigarettes so appealing can have toxic effects themselves, although they are GRAS (generally regarded as safe) when ingested in food or drinks.

Why are e-cigarettes unsafe for kids, teens and young adults?

- Nicotine can harm the developing adolescent brain
- e-cigarettes contain nicotine
- Nicotine addiction that occurs with e-cigarette use may lead to transition to use of combustible tobacco products
- Addiction itself, whether to nicotine or other drugs, can drive undesirable behaviors



What Is JUUL?

JUUL is a rapidly growing type of e-cigarette that became available in the US in 2015. It now accounts for about 72 percent of the market share of vaping products in the United States.

- JUUL is particularly appealing to adolescents and young adults because it has a slim design shaped like a USB flash drive (which makes it easier to hide).
- It comes in different colors, and a wide variety of flavors, including many that appeal to kids.
- JUUL does not emit large smoke clouds, making it optimal for discreet use.
- Not only is nicotine high in JUUL pods, it is present in a benzoic acid salt rather than a free base which increases the rate of nicotine delivery and decreases the harsh sensation in the mouth and throat.



The JUUL nicotine refill ("pods") contain as much nicotine as a pack of 20 regular cigarettes. Average pod length varies but can last up to 200 puffs.

Noting this unprecedented spike in e-cigarette use in youth, in December 2018, the US Surgeon General issued an advisory for parents, teachers and health professionals about the negative health consequences of e-cigarettes in kids.

What can parents do?

- Do not use any tobacco products
- Talk with your kids about the dangers of smoking and the importance of avoiding any tobacco use (conventional cigarettes or e-cigarettes)
- Educate your kids that e-cigarettes contain nicotine, a HIGHLY addictive substance
- Advocate for comprehensive tobacco prevention policies (that include e-cigarettes)

A1-C

If You Have Diabetes Know Your A1C Number

Aim for the Green Zone

What is A1C? (A-one-C)

- An A1C is a lab test which measures your average blood sugar level for the last 3 months.
- It is like a "memory" of your blood sugar levels.
- It shows whether your blood sugar stayed close to your targeted range most of the time, or was too high or too low.

Why should I have an A1C test?

- Knowing your number from the A1C test can help you and your health care team:
- Set goals to take control of your diabetes.
- Know how well your blood sugar control efforts are working (medication, food choices and activity).

What is a good A1C goal for me?

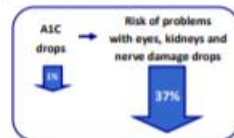
For most people with diabetes, the A1C goal or target is below 7%.



Ask your health care team to help you decide on the goal that is right for you and steps to reach that goal.

Lowering your A1C really matters!

- Every 1% drop in A1C reduces the risk of long term diabetes-related problems by 37%.
- The closer your A1C is to the **GREEN ZONE**, the less risk you have for serious diabetes problems over time.



KNOW and UNDERSTAND YOUR NUMBER!
Ask your diabetes care team about your A1C test today and AIM for less than 7% in the **GREEN ZONE!**

How often do I need an A1C?

Your A1C should be checked at least:

- Every 3 Months:** Every 3 months if your A1C is too high, if your diabetes treatment changes or if you plan to become pregnant.
- Every 6 Months:** Every 6 months if your A1C is at goal or more often if your health care team orders it.

Ways to help lower your A1C:



Attend self-management classes and learn all you can

Make healthy food and portion choices

Increase your physical activity level and check your blood sugar as instructed

Take your diabetes medication as ordered

See your doctor, diabetes educator or other health care team member if you are not able to lower your blood sugar levels with activity, eating choices and your medication.

Kentucky Public Health
Standard goal based on American Diabetes Association Standards of Medical Care for Diabetes 2018


Diabetes Basics



Staying Healthy With Diabetes


Cholesterol Management

HOW TO CONTROL CHOLESTEROL




- ### 1 UNDERSTAND CHOLESTEROL

Cholesterol is a fat-like substance that comes from two sources: **food** and **body**. It is found in foods from animal sources only. It travels in the body by lipoproteins (LDL and HDL).




HDL = good
High-density lipoprotein is known as "good" cholesterol.¹





LDL = bad
Low-density lipoprotein is known as "bad" cholesterol.²



HDL helps keep LDL from sticking to artery walls and reduces plaque build up. This process can lower the risk of heart disease and stroke.

Triglycerides
The most common type of fat in the body.³


Total Cholesterol
HDL + LDL + 1/5th of triglyceride level = **total cholesterol level**.⁴
- ### 2 TRACK LEVELS




A medical provider can measure blood cholesterol.




Track cholesterol levels with a personal at-home chart.
- ### 3 TIPS FOR SUCCESS



EAT BETTER
Eat a diet rich in fruits, vegetables, whole grains, low-fat dairy products, poultry, fish and nuts. Limit sugary foods and drinks, fatty or processed meats, and salt.



GET ACTIVE
Physical activity not only helps control cholesterol but also weight, blood pressure and stress levels.⁵



KNOW YOUR FATS
The fats you eat can affect your cholesterol levels. Replace saturated and trans fats with healthier monounsaturated and polyunsaturated fats.⁶




TAKE MEDICATION AS DIRECTED
The best way to reach treatment goals and enjoy the benefits of better health is to follow a medical provider's advice.⁷



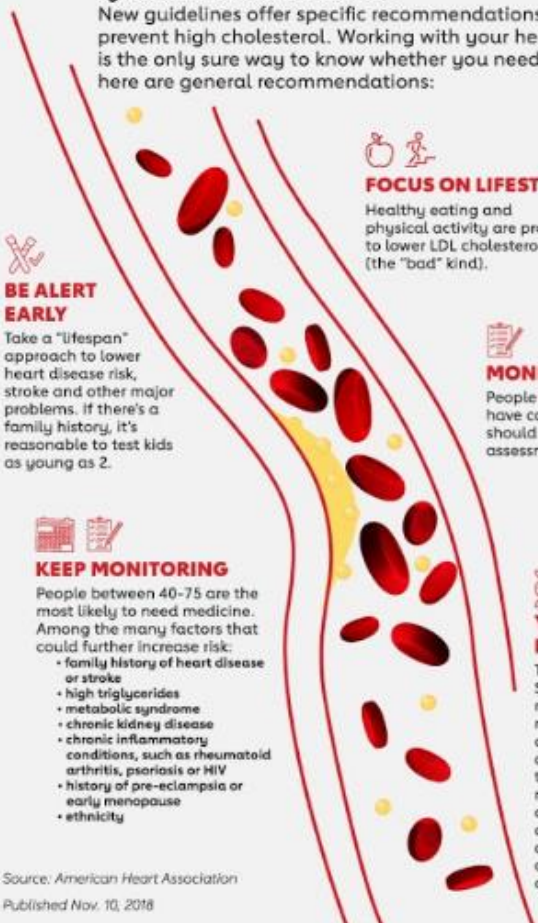
QUIT SMOKING
If an individual smokes, high cholesterol is another good reason to quit. And everyone should avoid exposure to secondhand smoke.


HEALTH SCREENING SERVICES™
Administered by a Licensed Laboratory Services Provider

 American Heart Association


IS YOUR CHOLESTEROL A PROBLEM?

By American Heart Association News
New guidelines offer specific recommendations to treat and prevent high cholesterol. Working with your health care provider is the only sure way to know whether you need treatment, but here are general recommendations:







BE ALERT EARLY
Take a "lifespan" approach to lower heart disease risk, stroke and other major problems. If there's a family history, it's reasonable to test kids as young as 2.




FOCUS ON LIFESTYLE
Healthy eating and physical activity are proven to lower LDL cholesterol (the "bad" kind).



MONITOR
People over 20 who don't have cardiovascular disease should have a risk assessment every 4-6 years.



YOUR GENETICS MATTER
Talk to your doctor. Some populations are more prone to certain medical conditions and could have racial and/or ethnic features that could influence risk. Tools used for risk assessment are not always able to provide accurate information about all populations or individuals.



KEEP MONITORING
People between 40-75 are the most likely to need medicine. Among the many factors that could further increase risk:

- family history of heart disease or stroke
- high triglycerides
- metabolic syndrome
- chronic kidney disease
- chronic inflammatory conditions, such as rheumatoid arthritis, psoriasis or HIV
- history of pre-eclampsia or early menopause
- ethnicity

Source: American Heart Association
Published Nov. 10, 2018

Blood Pressure Monitoring/Hypertension

HOW TO MANAGE BLOOD PRESSURE

Life's Simple 7

1 UNDERSTAND READINGS AND LEVELS

The first step to managing blood pressure is to understand what the levels mean and what is considered normal, elevated, high blood pressure (hypertension), and hypertensive crisis.

Blood pressure is typically recorded as two numbers, written as a ratio like this:

117 76

Systolic^{*}
The top number, the higher of the two numbers, measures the pressure in the arteries when the heart beats (when the heart muscle contracts).

Diastolic^{*}
The bottom number, the lower of the two numbers, measures the pressure in the arteries when the heart is resting between heart beats.

Read as "117 over 76 millimeters of mercury."

THE AHA DEFINES THESE CATEGORIES AS[†]:

Blood Pressure Category	Systolic mm Hg (upper #)		Diastolic mm Hg (lower #)
Normal	Less than 120	and	Less than 80
Elevated Blood Pressure	120–129	and	Less than 80
High Blood Pressure (Hypertension) Stage 1	130–139	or	80–89
High Blood Pressure (Hypertension) Stage 2	140 or higher	or	90 or higher
Hypertensive Crisis (Consult Your Doctor Immediately)	Higher than 180	and/or	Higher than 120

2 LEARN AND TRACK LEVELS

Check,

Change,

Control.

American Heart Association | Check, Change, Control.

Medical providers can take blood pressure readings and provide recommendations. Check, Change, Control helps track and manage progress in reducing blood pressure. Track online with [occtracker.com/aha](#)

3 TIPS FOR SUCCESS

EAT SMART

Follow a healthy eating pattern that emphasizes fruits and vegetables and includes whole grains, low-fat dairy, and healthy proteins and fats. Limit sugary foods and drinks, fatty or processed meats, salty foods, and highly processed foods.[‡]

GET ACTIVE

Physical activity helps control blood pressure, weight and stress levels.[§]

MANAGE WEIGHT

If you're overweight, even a slight weight loss can prevent high blood pressure.*

QUIT SMOKING

Every time you smoke, it can cause a temporary increase in blood pressure.[¶]

LEARN THE SALTY SIX

Limit the amount of sodium you're eating each day. Learn the Salty Six — common foods loaded with excess sodium.

- Cold Cuts & Cured Meats**
- Pizza**
- Soup**
- Breads & Rolls**
- Sandwiches**
- Burritos & Tacos**

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American Heart Association

*Source: American Heart Association. †Source: American Heart Association. ‡Source: American Heart Association. §Source: American Heart Association. ¶Source: American Heart Association.



DO YOU KNOW YOUR BLOOD PRESSURE?

You may have high blood pressure and not even know it. That's why getting regular checkups is important. They're quick, easy and painless. And they can save your life.

TAKE THE PRESSURE OFF

High blood pressure is sneaky. It can damage the arteries and veins that carry blood through your body, and you may not even know it until something bad happens to you - like a heart attack or stroke. When you have your blood pressure checked, you will receive two numbers. Both measure different things. For example:

120 The top number (systolic) is the pressure when your heart beats.

80 The bottom number (diastolic) is the pressure when your heart is at rest.

BLOOD PRESSURE GUIDELINES

Category	Systolic		Diastolic
Normal	< 120	and	< 80
Elevated	120 - 129	and	< 80
Hypertension Stage 1	130 - 139	or	80 - 89
Hypertension Stage 2	140 +	or	90 +
Hypertensive Crisis (consult your doctor immediately)	> 180	and /or	> 120

LEARN MORE

heart.org/HBP

O G

HIGH BLOOD PRESSURE

LOWER YOUR BLOOD PRESSURE

- ① **Check It!**
Get your blood pressure checked regularly at your doctor's office, clinic, or pharmacy. Keep a log of readings.

- ② **Chart It!**
Take the log to your doctor to discuss your options. Set goals for blood pressure, medications, healthy eating, and exercise. Log on to ccctracker.com/aha to track your progress.

- ③ **Change It!**
Take back your health. Even simple changes like eating an apple instead of chips or taking a walk can make a big difference.

It's your life. Live it longer! Start now.

SHAKE THE SALT HABIT.
Too much salt can lead to high blood pressure. Our American Heart Association Sodium-Smart Recipes offers 28-delicious recipes to help you control the amount of sodium in your diet. Look for it on ShopHeart.org.



For more information, go to

heart.org/HBP



American Heart Association.
Check. Change. Control.*

To reorder or for other resources visit ShopHeart.org.
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Blood Pressure Monitoring/Hypertension

7 SIMPLE TIPS TO GET AN ACCURATE BLOOD PRESSURE READING

The common positioning errors can result in inaccurate blood pressure measurement. Figures shown are estimates of how improper positioning can potentially impact blood pressure readings.

Sources:
1. Pickering, et al. Recommendations for Blood Pressure Measurement in Humans and Experimental Animals: Part 1: Blood Pressure Measurement in Humans. *Circulation*. 2005;116: 697-716.
2. Handberg J. The importance of accurate blood pressure measurement. *The Permanente Journal*/Summer 2009/Volume 13 No. 3 51.

This 7 simple tips to get an accurate blood pressure reading was adapted with permission of the American Medical Association and The Johns Hopkins University. The original copyrighted content can be found at <https://www.ama-assn.org/ama-johns-hopkins-blood-pressure-resources>.

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TARGET:BP |

How to measure your blood pressure at home

Follow these steps for an accurate blood pressure reading

- 1 PREPARE**

Avoid caffeine, cigarettes and other stimulants 30 minutes before you measure your blood pressure.

Wait at least 30 minutes after a meal.

If you're on blood pressure medication, measure your BP **before** you take your medication.

Empty your bladder beforehand.

Find a quiet space where you can sit comfortably without distraction.
- 2 POSITION**

POSITION ARM SO CUFF IS AT HEART LEVEL

PUT CUFF ON BARE ARM, ABOVE ELBOW AT MID-ARM

KEEP ARM SUPPORTED, PALM UP, WITH MUSCLES RELAXED

SIT WITH LEGS UNCROSSED

KEEP FEET FLAT ON THE FLOOR

KEEP YOUR BACK SUPPORTED
- 3 MEASURE**

Rest for five minutes while in position before starting.

Take two or three measurements, one minute apart.

Keep your body relaxed and in position during measurements.

Sit quietly with no distractions during measurements—avoid conversations, TV, phones and other devices.

Record your measurements when finished.

TARGET:BP |

This Prepare, position, measure Handout was adapted with permission of the American Medical Association and The Johns Hopkins University. The original copyrighted content can be found at <https://www.ama-assn.org/ama-johns-hopkins-blood-pressure-resources>.

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