

Symptom Record for Heart Failure

You can complete the highlighted fields on this form online and then print the form for easy reference. Only text that is visible on the form is printed; scrolled text will not print. Any text you enter into these fields will be cleared when you close the form; you cannot save it.

Use this form to describe the severity of your heart failure symptoms and whether they get worse. Also, record any new symptoms that develop. Take this form with you when you visit your doctor.

| Symptoms | Describe severity of symptoms and when they started |
|--|--|
| Shortness of breath | |
| Swelling in your legs or ankles | |
| Cough | |
| Energy level | |
| Weight | |
| Urination at night | |
| Stomach trouble/bloating/poor appetite | |