



What's Your Risk?

Here is a quick quiz to find out your risk of a heart attack.

- | Yes | No | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Do you smoke? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is your blood pressure 140/90 mmHg or higher, OR have you been told by your doctor that your blood pressure is too high? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has your doctor told you that your total cholesterol level is 200 mg/dL or higher or your HDL (good cholesterol) is less than 40 mg/dL? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has your father or brother had a heart attack before age 55 OR your mother or sister had one before age 65? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have diabetes OR a fasting blood sugar of 126 mg/dL or higher, OR do you need medicine to control your blood sugar? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you over age 55? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have a body mass index (BMI) score of 25 or more? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you get less than a total of 150 minutes of moderate-intensity physical activity each week? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has a doctor told you that you have angina (chest pains), OR have you had a heart attack? |

Are You At Risk?

If you answered “yes” to any of the questions, you are at an increased risk of having a heart attack.

Adapted from *The Heart Truth for Women Speakers Guide*, U.S. Department of Health and Human Services (HHS), National Institutes of Health (NIH), National Heart, Lung and Blood Institute (NHLBI), Revised October 2010.

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