

## **STROKE RISK ASSESSMENT QUESTIONNAIRE**

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**Please circle the applicable answer:**

1. Are you a female and over the age of 55, OR are you male and over the age of 45?      YES      NO

2. Do you have high blood pressure, or do you take medication for high blood pressure?  
(Ideal Blood Pressure is **120/80**) YES      NO

Your Blood Pressure: \_\_\_\_\_

Date Tested: \_\_\_\_\_

3. Do you smoke or have a long history of smoking?      YES      NO

4. Do you have an irregular heartbeat?      YES      NO      Don't Know

5. Do you have high cholesterol, OR do you take medication for high cholesterol?      YES      NO      Don't Know

6. Cholesterol Levels (if known)    HDL: \_\_\_\_\_    LDL: \_\_\_\_\_    Total: \_\_\_\_\_    Date Tested: \_\_\_\_\_

7. Has your mother, father, siblings, or children had a stroke or heart disease?      YES      NO

8. Do you exercise less than 3 times per week for 20-30 minutes at a time?      YES      NO

9. Do you eat a diet high in saturated and/or animal fat?      YES      NO

10. Are you diabetic?      YES      NO

11. Are you overweight by 20 pounds or more?      YES      NO

Number of YES responses: \_\_\_\_\_      Number of NO responses: \_\_\_\_\_

**The more “yes” responses you have, the higher your risk of stroke.**

**If you have three or more risk factors, please call your physician to discuss the results of this assessment**

**See the back of this form for more information on stroke and stroke prevention**



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**If you suspect that someone is having a stroke, act F.A.S.T.:**

**F**—Face: look for a droop on one side.

**A**—Arms: have the person hold their arms out; is one weaker than the other?

**S**—Speech: is the person's speech slurred, or is the person having trouble finding words?

**T**—Time: **Time Lost is Brain Lost. Call 911 for help**



### **Stroke Prevention Guidelines**

- **Know your blood pressure.** If it is high, work with your doctor to lower it. For people over age 18, a good blood pressure is considered lower than 120/80. A blood pressure reading consistently higher than 120/80 to 139/89 is considered pre-hypertension. High blood pressure is a measurement of 140/90 or higher. Check your blood at least once a year and more often if you have a history of high blood pressure.
- **Find out if you have atrial fibrillation.** If you do, work with your doctor to manage it. Atrial fibrillation is an irregular heartbeat that changes how your heart works and can cause blood to pool in parts of your heart. This blood can form clots and cause a stroke when a clot is released into your circulation.
- **If you smoke, stop.** Smoking doubles the risk of stroke. Within five years of quitting, your stroke risk may be the same as that of someone who never smoked.
- **Know your cholesterol number.** If it is high, work with your doctor to control it. Lowering your cholesterol (a fat like substance in your blood) may reduce your risk for stroke. Often, high cholesterol can be controlled with diet and exercise; some people may need medicine.
- **If you are diabetic,** follow your doctor's advice carefully to get your blood sugar level under control. Having diabetes puts you at an increased risk for stroke.
- **Include exercise in your daily routine.** Adults should perform moderate physical activities for at least 30 minutes for five or more days a week, according to the Centers for Disease Control and Prevention. Check with your doctor before starting a vigorous exercise program.

**—Information from the National Stroke Association**

For more information on stroke risk factors and prevention, visit our website at:  
[www.hopeheart.org](http://www.hopeheart.org)