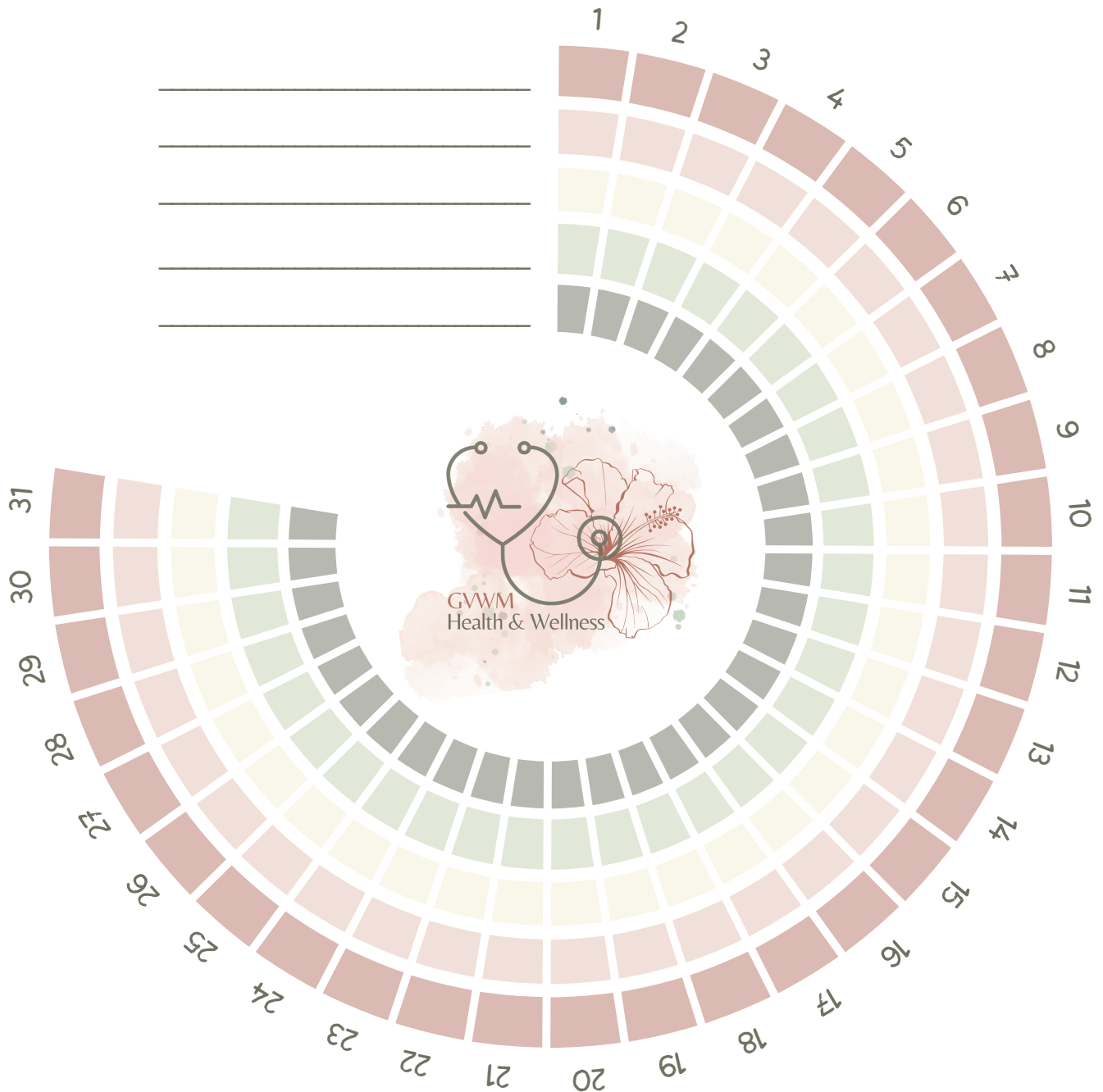


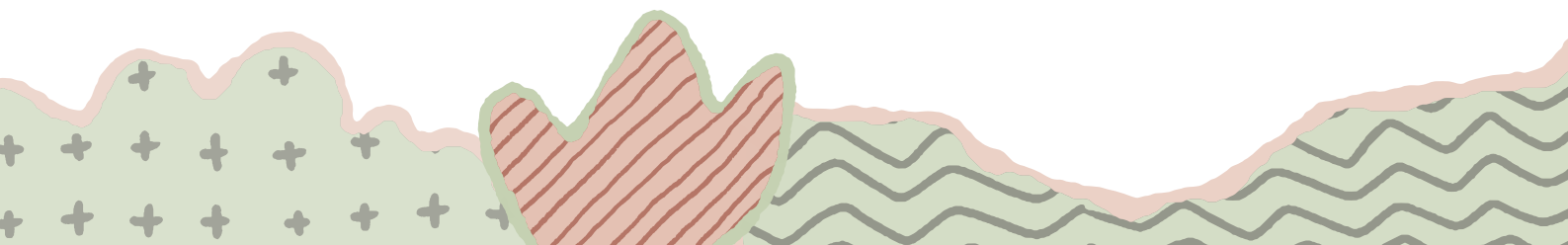
# HABIT TRACKER

Got Questions?

Reach out to [GVWMHealthysisters@gmail.com](mailto:GVWMHealthysisters@gmail.com)



“For the moment all discipline seems painful rather than pleasant, but later it yields the peaceful fruit of righteousness to those who have been trained by it.” Hebrews 12:11 ESV



# HEALTHY SISTERS BLOOD PRESSURE SCREENING

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

BLOOD PRESSURE: \_\_\_\_\_

Blood Pressure Type	Systolic (top Number)	Diastolic (Bottom Number)
Normal	Less than 120	Less Than 80
Elevated	120-129	Less than 80
Hypertension (high blood pressure) Stage 1	130-139	80-90
Hypertension Stage 2	Greater or equal to 140	Greater or equal to 90

## Ways to help decrease your blood pressure :

- Regular exercise - aim for 150 minutes per week
- Eat a well balanced diet: include more fruits and vegetables (eat the rainbow), increase fiber.
- Know what you are eating - read ingredient lists and nutrition labels.
- Limit sugar, other sweeteners & highly processed foods
- Watch portion sizes
- Limit sodium intake - maximum of 2 grams daily
- Maintain a healthy body weight
- Limit alcohol
- Stop Smoking
- Reduce Stress
- Get adequate sleep
- Control other chronic diseases
- Take medications as prescribed





# SMART GOALS

GOAL: .....

S	
M	
A	
R	
T	

Would you like help with your SMART goals? Reach out to  
[GVWMHealthySisters@gmail.com](mailto:GVWMHealthySisters@gmail.com)



# SMART GOALS

Instructions: For each goal, fill in the details according to the SMART criteria. This will help ensure that your goals are clear, focused, and actionable.

S	SPECIFIC	<p>A. What exactly do you want to achieve?</p> <p>B. Who is involved or responsible?</p> <p>C. Where will it take place (if applicable)?</p> <p>D. Why is this goal important?</p>
M	MEASURABLE	<p><b>A. How will you track progress?</b></p> <p>B. What are the key performance indicators (KPIs)?</p> <p>C. How will you know when the goal is accomplished?</p>
A	ACHIEVABLE	<p><b>A. Is the goal realistic given your resources and constraints?</b></p> <p>B. What steps or actions will you take to reach the goal?</p> <p>C. Do you have the necessary skills and support?</p>
R	RELEVANT	<p><b>A. Does the goal align with your business objectives?</b></p> <p>B. Will it contribute to your long-term success and growth?</p> <p>C. Is now the right time to pursue this goal?</p>
T	TIME-BOUND	<p><b>A. When will you start working on the goal?</b></p> <p>B. What is the target completion date?</p> <p>C. Are there any milestones or checkpoints along the way?</p>

“Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honor God with your bodies.” **1 Corinthians 6:19-20**