

# Stroke Risk Scorecard

For each risk factor, **circle** one response for each row.  
To score, count the number of responses for each column.

Risk Factor			
Blood Pressure	Greater than 140/90 or I don't know	Between 120-139/80-89	Less than 120/80
Cholesterol	Greater than 240 MG/DL or I don't know	Between 200-239 MG/DL	Less than 200 MG/DL
Diabetes	Yes	Borderline	No
Smoking	I smoke	I am trying to quit	I am a non-smoker
Atrial Fibrillation	I have an irregular heartbeat	I don't know	I do not have an irregular heartbeat
Diet *	I am overweight	I am slightly overweight	My weight is in a healthy range
Exercise	I do not exercise	I exercise infrequently (1-2 times/week)	I exercise regularly (3-4 times/week)
Family History	Yes	Not sure	No
<b>Score:</b>			

## Score Results:

### High Risk

If your RED score is 3 or more, please ask your doctor about stroke prevention measures!

### Caution

If your YELLOW score is 4 to 6, you have an increased risk for a stroke.  
Keep working on it!

### Low Risk

If your GREEN score is 6 to 8, congratulations! You're doing very well at controlling your risk for stroke!

For more information please contact:  
Heart Disease & Stroke Prevention Program  
Division of Chronic Disease  
North Dakota Department of Health  
Phone: 701.328.2367 or 800.280.5512 (in ND)  
<http://www.ndhealth.gov/heartstroke>



Adapted from the  
National Stroke  
Association

\* - For more information see ([www.cdc.gov/BMI](http://www.cdc.gov/BMI))