
HEYSHANTAQ

FREE GUIDE 04 · WOMEN'S CARDIOVASCULAR HEALTH

HER HEART SPEAKS DIFFERENT

The Women's Heart Attack Warning Signs Guide

A life-saving, plain-language guide that helps women recognize heart attack warning signs that are often missed, minimized, or mistaken for stress.

Real conversations. Real decisions. Real shifts. Bring the receipts.

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Hey Shanta Q Free Guide 04

Theme: Humor. Healing. High Impact.

Real-talk medical note: This guide is educational and is not a diagnosis, treatment plan, or substitute for medical care. If you have symptoms that feel severe, sudden, unusual, or frightening, seek urgent care. If you think you may be having a heart attack or stroke, call 911 immediately.

Why this guide exists

Heart disease is a leading cause of death for women in the United States, yet many women still do not see themselves as heart-disease candidates until something serious happens.[1] Women's symptoms can also be missed, delayed, or misattributed to anxiety, stress, reflux, asthma, or non-cardiac issues.[2] [4]

The issue is not that women's hearts whisper. The issue is that too many people were trained to hear heart attacks in a male voice.

Hey Shanta Q truth: If your heart is acting brand new, do not wait for it to explain itself politely. Get help.

Know the warning signs

The FDA Office of Women's Health states that heart attack signs can be different for women than men and may include heavy ache in the chest or back between the shoulder blades, sharp upper-body pain, shortness of breath, cold sweat, unusual or unexplained tiredness, dizziness or light-headedness, and feeling sick to the stomach.[1]

Possible warning sign	What it may feel like	Why women may miss it
Chest discomfort or pressure	Heavy, squeezing, fullness, ache, burning, or pressure	It may not feel like dramatic movie-style chest pain.
Back, jaw, neck, shoulder, or arm pain	Aching, tightness, sharp pain, or pressure	It may be mistaken for posture, stress, or muscle strain.
Shortness of breath	Winded at rest or with small activity	It may be blamed on anxiety, weight, asthma, or being out of shape.
Nausea, vomiting, indigestion	Stomach upset, reflux-like discomfort	It may be mistaken for food, gallbladder, or acid reflux.
Cold sweat	Sweating without heat or exertion	It may be dismissed as hot flashes or panic.
Unusual fatigue	Sudden, crushing, unexplained exhaustion	It may be minimized as caregiving, work, or poor sleep.
Dizziness or light-headedness	Feeling faint, weak, off-balance	It may be blamed on dehydration or anxiety.

When to call 911

Call **911** if you think you may be having a heart attack. Do not drive yourself. Do not wait to see if it passes. Do not try to be “nice” by avoiding a scene.

Call now if...	Say this to the dispatcher
You have chest pressure, shortness of breath, faintness, cold sweat, nausea, jaw/back/arm pain, or sudden unusual fatigue	“I am a woman with possible heart attack symptoms. I need emergency evaluation.”
Symptoms come and go but feel unusual or frightening	“The symptoms are intermittent, but I am concerned they may be heart-related.”
You have risk factors such as high blood pressure, diabetes, cholesterol, smoking, family history, or prior heart problems	“I have cardiovascular risk factors and possible heart symptoms.”

The urgent care or ER script

If you can speak, be direct:

“I am concerned this could be heart-related. I know women’s symptoms can look different. I need to be evaluated for a heart attack or other cardiac cause.”

If symptoms are dismissed as anxiety, stress, reflux, or muscle pain, say:

“That may be possible, but before we settle there, what cardiac testing is being done to rule out a heart cause?”

WomenHeart recommends asking directly whether symptoms could be heart-related and, when appropriate, requesting testing such as an EKG, troponin blood test, or coronary angiogram; if testing is denied, women can ask for the request and response to be documented in the medical record.[2]

What women are saying is missing

Women say they need plain-language education that does not only show the “man clutching his chest” version of a heart attack. They need permission to act on symptoms that feel vague, strange, embarrassing, or easy to explain away. They also need scripts because symptoms may be minimized as stress, panic, or hormones.

Research on missed and delayed diagnosis in women’s cardiovascular care describes patient stories involving years of “normal results,” symptoms being called “all in your head,” and incorrect diagnoses such as asthma or anxiety before heart disease was recognized.[4]

Your heart action card

Fill this in and keep it in your phone or wallet.

Item	Your information
Emergency contact	
Current medications	
Allergies	
Blood pressure history	
Cholesterol history	
Diabetes or prediabetes	
Smoking or vaping history	
Pregnancy complications such as preeclampsia or gestational diabetes	
Family history of early heart disease or stroke	
Known heart conditions	

Closing word

Your heart does not have to perform symptoms in a stereotypical way to deserve urgent attention. If something feels wrong, choose your life over politeness, embarrassment, or fear of being dismissed.

Hey Shanta Q reminder: Call the ambulance. Make the scene. Live to tell the story.

References

1. [FDA Office of Women's Health, Heart Health for Women](#)
2. [WomenHeart, "Ms. Diagnosed": Why Women's Heart Disease Symptoms Are Often Overlooked](#)
3. [American Heart Association News, The slowly evolving truth about heart disease and women](#)
4. [Johnson et al., Addressing the Bias in Cardiovascular Care](#)