

Heart Care Connect

A Digital Collaboration between IIHMR Bangalore and Heart Health India Foundation

Awareness

Emergency

Coaching



Patient Support and Community
Management System



Dil Se Dil Ki Baat

OUR VISION



Empowering individuals to live a safe and heart-healthy life.

OUR MISSION



To transform heart health by educating and empowering individuals, providing support to those in need, researching and advocating for patient-centric ecosystem.







http://hearthealthindia.org

Patient Registration Form

First Name
15 Character
Middle Name
15 Character
Last Name
15 Character
Age
Gender
Male Female Other
Contact No
Email ID(Optional)
30 Character
City & State
City & State
30 Character
Are you enroling for self or a relative?
Colf Dolativo
Self Relative
Have you/ your relative ever been diagnosed with a heart condition?
Yes No
Have you/ your relative undergone any heart-related procedure or surgery in the past?
Yes No
Are you/ your relative currently experiencing any symptoms that might require immediate medical attention (e.g., chest pain, shortness of breath)?
☐ Yes ☑ No
Are you/ your relative currently undergoing any rehabilitation or post-surgery care for your/relative's heart?
☐ Yes ☑ No
Are you/ your relative looking for general heart health awareness and preventive tips?
Yes No

SUBMIT