Cardiac diseases have direct and indirect effects on sexuality. Health care providers, especially nurses, have a major responsibility in addressing and discussing sexual concerns and providing sexual counseling needs for patients with cardiac diseases. Discussing sexual issues in Arabic Muslim countries is considered a taboo. Lack of information about sexual life can affect the quality of life for patients with cardiac diseases. In this study, concerns regarding counseling needs and sexual information pertaining to Jordanian patients with cardiac diseases are addressed. Non-experimental, cross-sectional, descriptive designs were employed, accompanied by a self-report questionnaire, as well as a structured interview using the Steinke Sexual Concerns and Sexual Activity questionnaires for cardiac patients. A convenient sample of Jordanian male and female patients with cardiac problems was recruited. Results revealed that only 11% of the participants with cardiac diseases reported receiving information regarding sexual life following cardiac-related events. Most patients (71%, F=81) preferred cardiologists to provide them with sexual information, and almost two-thirds of them (62%, F=75) considered nurses’ gender to be a barrier, preventing them from inquiring about their sexual life. Patients with cardiac diseases had sexual concerns, but none of incredible importance. However, most patients (76%, F=94) reported changes in sexual activities following cardiac-related events. Cardiac patients had sexual concerns and sexual counseling needs that they would not discuss. Health care professionals should arrange sexual counseling plans with the patient; as every patient has individual, specific, and unique sexual counseling needs, dependent upon their lifestyle, health conditions, and their type of cardiac disease.