

# Cardiac Rehabilitation Exercise class

**Heart Failure Exercise Programme – seated**

**PLEASE BRING THIS FOLDER WITH YOU  
TO EACH EXERCISE SESSION**

**Name:**

**Start Date:**

**Time:**

**Final Date:**

**Time:**

## **Information for participants**

If you are at all unwell (for instance with a stomach bug, cold or virus) or have been prescribed antibiotics for any condition, please do not attend the exercise session. Please call the department to let us know that you will not be attending.

**Contact us on: 01865 220 251 or 01295 229 426**

If you miss two consecutive sessions and have not contacted us to tell us why, we will assume you no longer wish attend and will allocate your place to someone else.



# DATA PROTECTION

## CARDIAC REHABILITATION EXERCISE SESSIONS

You have now been invited to take part in the hospital-supervised Cardiac Rehabilitation exercise scheme at a local leisure centre. In order for us to look after all the patients at these sessions, we may sometimes ask the gym staff / volunteers to join us to help supervise the class.

If you choose to, and it is appropriate for you, you may be offered the opportunity to join the supervised leisure centre exercise referral scheme once you have completed your eight hospital-supervised exercise sessions.

We will need to share some of your medical history with the gym staff involved so that they can look after you appropriately. The information we will share with them is the minimum they will need to help look after you or prescribe your individual exercise programme. This will be information such as:

- the treatment you have had in hospital and how you responded to this
- the type of medications you are taking
- the results of some of your tests or investigations.

It is important that you fully understand that we need to disclose this type of information to staff and volunteers, both verbally and in writing, and that you consent to this. All staff are not allowed to disclose any of the information that they receive about you to a third party. They must treat the information that they do know about you with respect and in accordance with the Data Protection Act and the Access to Health Records Act.

Please sign to confirm that you confirm that you understand and have had the opportunity to ask any questions.

Signed: .....

Dated: .....

## SAFETY CONSIDERATION FOR GYM-BASED SESSIONS

I have read and understood the information that has been provided regarding the safe use of the exercise equipment. If I have any questions, I will consult a member of staff before starting the exercise.

Signed: .....

Please print name: .....

Dated: .....



Sticker

**CHECK IN DATE:**

RBP (mmHg): Reg / Irreg

RHR (bpm):

BS (mmol/L):

Weight (kg):

SYMPTOMS:

MEDICATION:

COMMENTS:

<b>WARM UP</b>				<b>HR</b>
Sitting Standing Equipment				
<b>MAIN SESSION</b>				<b>HR</b>
<b>Exercise</b>	<b>Weight /Level</b>	<b>Time /REPS</b>	<b>RPE</b>	<b>HR</b>
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand /Leg Extensions				
Steps /Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg): HR (bpm): BS (mmol/L):

COMMENTS:

Sticker

**CHECK IN DATE:**

RBP (mmHg):

Reg / Irreg

RHR (bpm):

BS (mmol/L):

Weight (kg):

SYMPTOMS:

MEDICATION:

COMMENTS:

**WARM UP****HR**Sitting  
Standing  
Equipment**MAIN SESSION****Exercise****Weight / Level****Time / REPS****RPE****HR**

Bicep Curl

Front Raise

Side Raise

Sit to stand / Leg  
Extensions

Steps / Walk

Resistance Bands

**COOL DOWN****HR**Sitting  
Standing

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg):

HR (bpm):

BS (mmol/L):

COMMENTS:

Sticker

**CHECK IN DATE:**

RBP (mmHg): Reg / Irreg

RHR (bpm):

BS (mmol/L):

Weight (kg):

SYMPTOMS:

MEDICATION:

COMMENTS:

<b>WARM UP</b>				<b>HR</b>
Sitting Standing Equipment				
<b>MAIN SESSION</b>				
<b>Exercise</b>	<b>Weight /Level</b>	<b>Time /REPS</b>	<b>RPE</b>	<b>HR</b>
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand /Leg Extensions				
Steps /Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg): HR (bpm): BS (mmol/L):

COMMENTS:



**CHECK IN DATE:**

RBP (mmHg): \_\_\_\_\_ Reg / Irreg

RHR (bpm): \_\_\_\_\_

BS (mmol/L): \_\_\_\_\_

Weight (kg): \_\_\_\_\_

SYMPTOMS: \_\_\_\_\_

MEDICATION: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

<b>WARM UP</b>				<b>HR</b>
Sitting Standing Equipment				
<b>MAIN SESSION</b>				
<b>Exercise</b>	<b>Weight / Level</b>	<b>Time / REPS</b>	<b>RPE</b>	<b>HR</b>
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand / Leg Extensions				
Steps / Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

\_\_\_\_\_

MY COMMENTS:

\_\_\_\_\_

**CHECK OUT:** BP (mmHg): \_\_\_\_\_ HR (bpm): \_\_\_\_\_ BS (mmol/L): \_\_\_\_\_

COMMENTS: \_\_\_\_\_



Sticker

**CHECK IN DATE:**

RBP (mmHg): Reg / Irreg

RHR (bpm):

BS (mmol/L):

Weight (kg):

SYMPTOMS:

MEDICATION:

COMMENTS:

<b>WARM UP</b>				<b>HR</b>
Sitting				
Standing				
Equipment				
<b>MAIN SESSION</b>				
Exercise	Weight /Level	Time /REPS	RPE	<b>HR</b>
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand /Leg Extensions				
Steps /Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting				
Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg): HR (bpm): BS (mmol/L):

COMMENTS:

Sticker

**CHECK IN DATE:**

RBP (mmHg): Reg / Irreg

RHR (bpm):

BS (mmol/L):

Weight (kg):

SYMPTOMS:

MEDICATION:

COMMENTS:

<b>WARM UP</b>				<b>HR</b>
Sitting Standing Equipment				
<b>MAIN SESSION</b>				<b>HR</b>
<b>Exercise</b>	<b>Weight /Level</b>	<b>Time /REPS</b>	<b>RPE</b>	<b>HR</b>
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand /Leg Extensions				
Steps/Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg): HR (bpm): BS (mmol/L):

COMMENTS:

Sticker

**CHECK IN DATE:**

RBP (mmHg): Reg / Irreg  
 RHR (bpm):  
 BS (mmol/L):  
 Weight (kg):

SYMPTOMS:  
 MEDICATION:  
 COMMENTS:

<b>WARM UP</b>				<b>HR</b>
Sitting Standing Equipment				
<b>MAIN SESSION</b>				
Exercise	Weight /Level	Time /REPS	RPE	HR
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand /Leg Extensions				
Steps /Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg): HR (bpm): BS (mmol/L):  
 COMMENTS:

Sticker

**CHECK IN DATE:**

RBP (mmHg): Reg / Irreg

RHR (bpm):

BS (mmol/L):

Weight (kg):

SYMPTOMS:

MEDICATION:

COMMENTS:

<b>WARM UP</b>				<b>HR</b>
Sitting Standing Equipment				
<b>MAIN SESSION</b>				<b>HR</b>
<b>Exercise</b>	<b>Weight / Level</b>	<b>Time / REPS</b>	<b>RPE</b>	<b>HR</b>
Bicep Curl				
Front Raise				
Side Raise				
Sit to stand / Leg Extensions				
Steps / Walk				
Resistance Bands				
<b>COOL DOWN</b>				<b>HR</b>
Sitting Standing				

WEEKLY GOALS AND HOME EXERCISE PLAN:

MY COMMENTS:

**CHECK OUT:** BP (mmHg): HR (bpm): BS (mmol/L):

COMMENTS:

## Cardiac Rehabilitation Programme

Welcome to the exercise part of your Cardiac Rehabilitation. Whatever your current health you can benefit from physical activity. Surveys have shown that 70% of the population in the UK do not do enough regular physical exercise to achieve health benefits and to protect their heart. Being regularly active plays a very important role for your heart condition.

**Physical activity** is any bodily movement with a significant increase in energy expenditure.

**Exercise** is a type of physical activity. It is structured, planned and repetitive movements that are done to maintain or improve one or more of the characteristics of physical fitness. Exercise is something that you are going to do during the Cardiac Rehabilitation programme.

**Physical fitness** encompasses many characteristics such as your stamina, flexibility, and balance. Your physical fitness relates to your ability to perform physical activity.

**Health related fitness** refers to your ability to perform your daily activities. Doing physical activity or exercise on most days of the week can help to increase your ability to perform your daily activities more easily. Health related benefits, especially for someone with heart disease (or someone with a high risk of heart disease), are the following:

- improved cholesterol levels
- lower blood pressure
- improved blood sugar control
- lower anxiety and depression
- improved ability to perform daily activities
- increased confidence and sense of well-being
- improved rate of return to work and leisure activities
- fewer visits to the doctor and hospital
- reduced dependence on cardiac drugs
- improved feelings about being able to cope after a heart attack or surgery
- increased exercise threshold for the onset of chest pain (angina).

Your exercise programme will be designed around you, your needs and your capabilities, and will gradually progress as you gain fitness and confidence. During the sessions you will be taught how to use the various pieces of equipment and how to exercise safely and effectively.

## How often should I be exercising to gain health benefits?

We get most benefit from doing exercise and physical activity on a regular basis. To gain the maximum benefit, you should aim to do 30 minutes of activity every day. Even though you are coming to supervised exercise sessions, it is very important that you exercise at home on other days. Don't forget to always warm up before you exercise and cool down afterwards.

Your weekly plan could include walking, exercises you have done in class, gardening, and housework. You can split up your goal of a 30-minute activity session – for example you could do 10 minutes of housework, 10 minutes of walking and 10 minutes of our exercises.

After completing your initial assessment, and talking with an exercise physiologist you should begin to do your exercises at home.

### **Additional activity recommendations - Exercise diary**

In the back of this folder you will find a physical activity diary. We recommend that you record your exercise and activity for the first month that you attend our classes, and also details of how you feel and whether you experience any problems. Staff will regularly review your diary during the programme. Keeping the activity diary can make

## Sensible precautions

- Exercise only when you feel well. If you are unwell with a virus, cold, tummy bug or if you are taking antibiotics, we recommend that you wait at least two days after the symptoms have disappeared before starting any type of physical activity. If you are unsure if you are well enough to exercise, please call and ask a member of the team before going to the gym.
- Make sure that you have eaten a light meal approximately 1-2 hours before exercising. Do not exercise on either a full or completely empty stomach.
- Do not exercise in the extremes of temperature. Dress warmly when exercising in the cold. If it is warm, slow your pace.
- You must compare how you feel each day with your usual symptoms and capabilities. If you develop any new symptoms or find that your usual symptoms are worse (i.e. more breathlessness, more frequent angina, swollen ankles) you must inform your GP as soon as possible.
- Wear proper clothing. We recommend loose fitting, comfortable clothing that is appropriate for the weather. Do not wear heavy tracksuits in an attempt to lose weight. All you will lose will be water and minerals, which could be harmful. Wear shoes that are comfortable for your activity.
- Take your medication as normal each day when you are exercising. If you have been given a GTN spray or tablets, remember to keep them with you at all times. You should never stop any of your medications without discussing it with your GP.

## Coming to our exercise class

### What to bring with you:

- **this exercise folder**
- **GTN spray / tablets** (if you have been given them)
- **a bottle of water**
- **a small towel** (if you wish)
- **blood glucose monitor** (if you are diabetic)
- **fast acting bronchodilator** (if you are asthmatic).

### What to wear:

- soft-soled shoes or trainers
- sweatshirt or jumper with a T-shirt or shirt underneath
- tracksuit trousers, jogging bottoms or shorts
- for safety reasons please **DO NOT** wear sandals or slip on shoes
- please **DO NOT** wear denim or cords.

## What will happen in the classes?

### The class will follow the same format every time, as described below:

- check-in (blood pressure, weight, glucose check (if required) and heart rate check)
- warm-up (all three parts should take 15 minutes in total)
- main exercise
- cool down (both parts should take at least 10 minutes in total)
- check-out (blood pressure, glucose check (if required) and heart rate check).

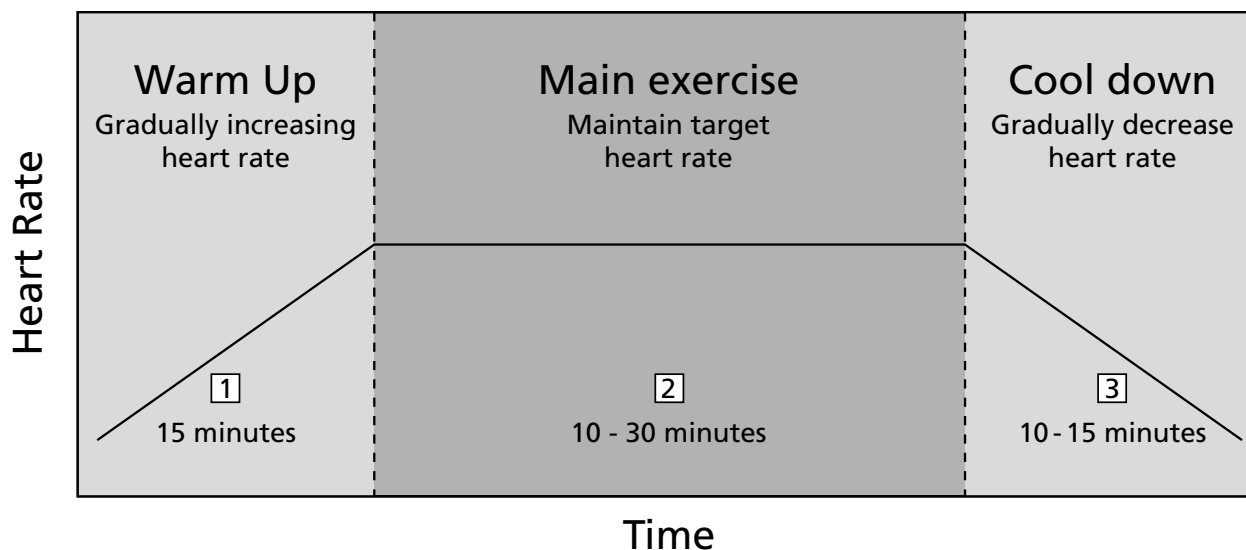
**You MUST inform the cardiac rehabilitation staff when you are checking-in if:**

- You have forgotten to take your medication.
- You have had your medication changed.
- You have been feeling unwell (if you are taking antibiotics, have chest discomfort, excessive shortness of breath, coughs, colds, stomach upsets, discomfort in joints or muscles).

During the sessions you must remember to **keep your feet moving** whenever possible. This rule should apply to all three phases of your exercise session (warm up, main session and cool down), as well as when you are exercising at home. This helps maintain a good blood pressure and helps to prevent you feeling dizzy or lightheaded. It also reduces the amount of work that your heart has to do. If you need to sit down and rest at any stage then do, however, you must still keep your feet moving.

## Warming up and cooling down

Warming up and cooling down are just as important as the main activity itself.



### Warm up exercises

Always warm up with light exercise at the start of the session.

By gradually increasing the workload of the heart, it is able to adapt slowly to being made to work harder. This is much safer than suddenly increasing the workload. It helps reduce the risk of angina and disturbances in your heart rhythm by making sure that the coronary arteries are opened up and that your heart has a good supply of oxygen.

The level of effort you put into these warm up and cool down exercises can be measured using the Breathlessness Scale. This scale is shown later in the booklet.

Progressive warm-up exercises:

- Light pulse raising activity (e.g. seated feet movements, slow walking, low level cycling) 5 minutes
- Stretching activities 5 minutes
- Light pulse raising activity (e.g. add in arm movements to seated or standing movements, low level cycling) 5 minutes

A total of 15 minutes at Breathlessness Scale 1 to 2 (very slight, slight).

### Cool down exercises

The cool down reduces the risk of sudden heart problems and should be taken very seriously. You need to gradually lower your pace during the cool down. The goal is to bring your body back to its resting state.

By gradually returning your body to rest you reduce the risk of disturbances in your heart rhythm, which could happen if you stop exercising suddenly. It also helps reduce the risk of fainting or dizziness which could result from a rapid drop in blood pressure if you suddenly stop exercising.

Cool down exercises:

- Light/Easy Activity (slow walking, seated marching feet) 5 minutes
- Stretching 5 minutes

A total of 10 minutes at Breathlessness Scale 1 to 2

Examples of the warm-up and cool-down exercises are included at the back of this book.



# How hard should I be working?

## Monitoring your exercise level

It is important to make sure that you are not pushing your body too hard, but also that you are working hard enough to achieve the benefits that we have discussed. During the programme we will show you various ways of checking how hard you are working. We also encourage you to use these methods whilst exercising when you are at home.

### 1. Measuring your heart rate (pulse)

Your heart rate is measured by counting how many times your heart beats per minute. During exercise your heart rate will increase (your heart will beat faster) in response to the demand of working muscles for oxygen from your blood.

- Lightly place your index and middle fingers (never use your thumb) on the inside of your wrist. You should feel a slight pulsing as your heart pushes blood around the body.
- Count the number of beats that you feel for a 15 second period. Multiply this by 4. This is your heart rate.

We will give you a recommended heart rate range specifically for you when you start to exercise. This range is related to you, your diagnosis and your medication, so everyone will be different.

Your target heart rate is just a guide.

### 2. Breathlessness score

This is a scale that asks you to rate the level of your breathing. It starts at number 0 where your breathing is causing you no difficulty at all and progresses through to number 10 where your breathing difficulty is at its hardest (maximal).

### How much difficulty is your breathing causing you right now?

(Adapted Borg, G. CR 10 scale 1982, 1998)

#### Modified Borg Breathlessness Scale

0	Nothing at all	(Sitting down, relaxing)
0.5	Very, very slight	(Just noticeable)
1	Very slight	
2	Slight	(Pottering around shops)
3	Moderate	(Walking briskly)
4	Somewhat severe	
5	Severe	
6		
7	Very severe	(Climbing multiple flights of stairs without a break)
8		
9	Very, very severe	(Almost maximal)
10	Maximal	(Exhausted, short of breath, muscles are aching, have to stop!)

We would like you to be working at the level of moderate to somewhat severe (Level 3 to 4).

If you would describe your breathless level as 'severe', then you are working too hard and need to slow down.

### **3. Talk test**

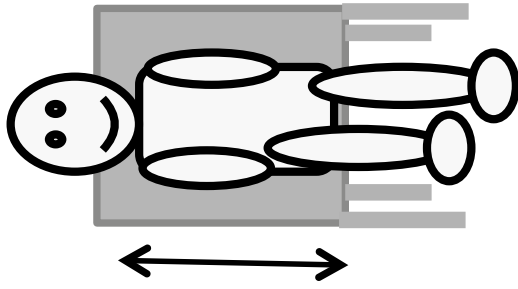
This is another simple way of assessing how hard you are working. You should be able to speak in complete sentences and feel a little out of puff. It is ok to feel a little out of breath while exercising, however if you find yourself gasping and short of breath, then you are working too hard and need to slow down.

# Home exercise circuit

**Warm -up: 15 minutes - Perform seated or standing**

**Light Activity:** Pace at which you feel you can sing!! 1-2 on the Breathlessness Score.

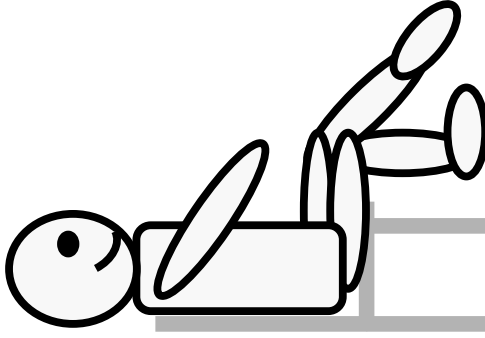
1.



### Sitting marching feet

- + Look left and right  
1 minute.
- + Roll shoulders forward  
1 minute.
- + Roll shoulders backward  
1 minute.
- + Marching, arms at side  
1 minute.

2.



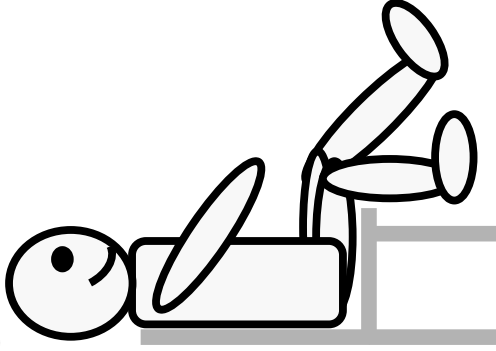
### Toe tap in front

- + Arm curls: 1 arm  
1 minute.
- + Raise 1 arm in front  
1 minute.
- + Running arms  
1 minute.
- + Marching, arms at side  
1 minute.

Remember:

If it gets too difficult, use one arm at a time or slow down.

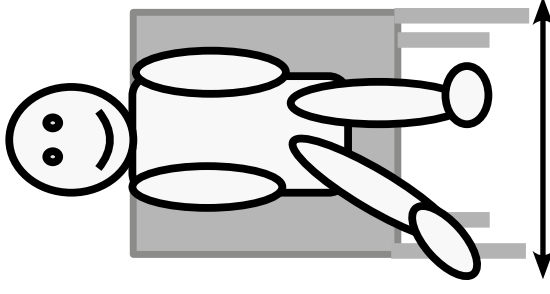
3.



### Heel digs

- + Arm curls:  
2 arms together  
1 minute.
- + Raise 2 arms in front  
1 minute.
- + Slow motion running  
arms  
1 minute.
- + Marching, arms at side  
1 minute.

4.



### Sitting toe tap to the side

- + Raise 1 arm to the side  
1 minute.
- + Breast stroke  
swim arms  
1 minute.
- + Raise arms to the side  
1 minute.

Remember:

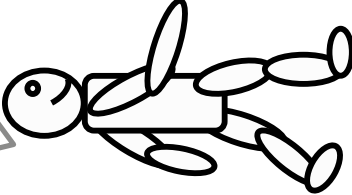
If it gets too difficult, use one arm at a time or slow down.

# Main Exercises: Perform each exercise for the same time as you do in the exercise class

**Moderate Activity: Pace at which you can maintain a conversation.** 3-4 on Breathlessness Score

Listen to your body and take a break if you need to but KEEP YOUR FEET MOVING

Breathing = 3-4 Puffed but can talk

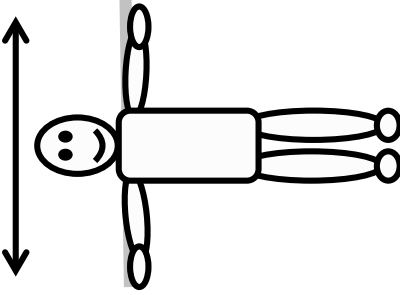


**Walking**

Walk around or on the spot at a comfortable speed at which you can hold a conversation.

**FOR YOU**

Feet moving




**Theraband**

Extend Theraband as shown in exercise class. Keep feet moving.

**FOR YOU**

Breathing = 3-4 Puffed but can talk

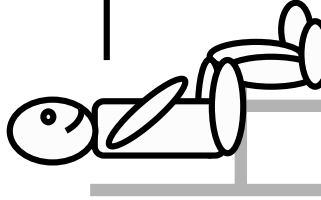


**Step up**

Step up and down on the bottom step of your stairs or step of house.

**FOR YOU**

Take a break if you need to but keep feet moving

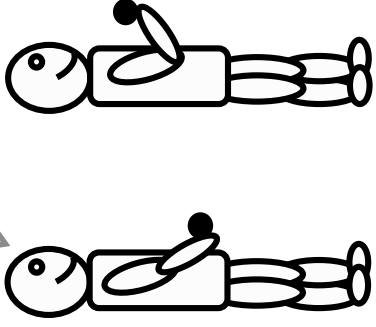


**Sit-stand**

Using a sturdy kitchen chair, sit down and stand up.

**FOR YOU**

Feet moving



**Arm weights**

Using house-hold objects, such as a tin of beans, complete the arm exercises shown in exercise class. Keep feet moving.

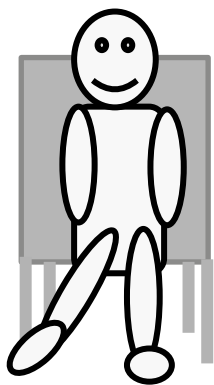
**FOR YOU**

## Cool Down: 10 minutes

**Do sitting down. Remember the goal is to gradually slow down.**

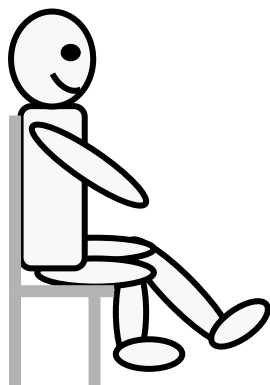
**Light Activity: Pace at which you feel you can sing!**

1-2 on the Breathlessness Score



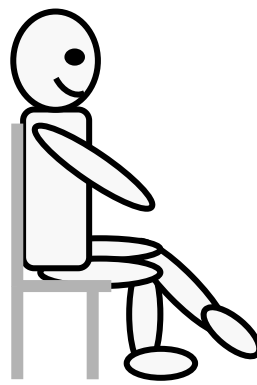
**Sitting toe tap to the side:**

2 minutes.



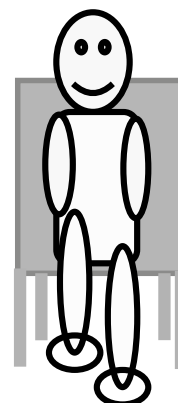
**Heel digs:**

2 minutes.



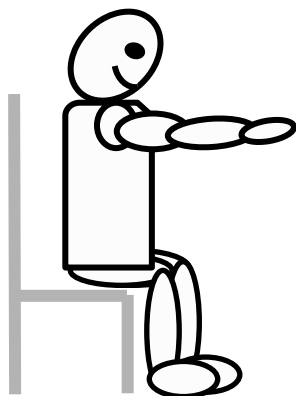
**Slide toe tap in front:**

1 minute.



**Heel raises:**

1 minute.



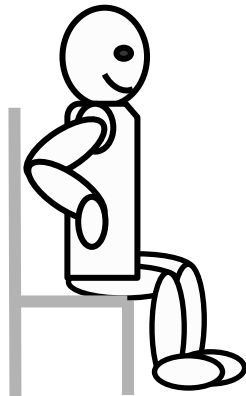
**Upper back stretch:**

30 seconds

- Lock fingers together, stretch arms out in front, reaching as far out as you feel comfortable.

- **Repeat.**

**Continue with heel raises.**



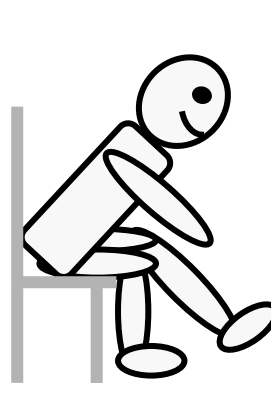
**Chest stretch:**

30 seconds

- Sit forward on chair.
- Place hands on lower back.
- Gently move elbows towards each other.
- Keep back straight.

- **Repeat.**

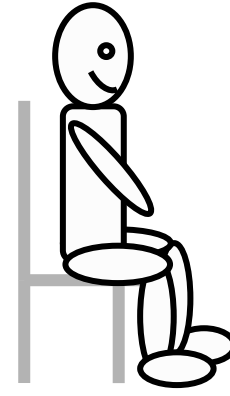
**Continue with heel raises.**



**Leg stretch:**

30 seconds

- Sit forward on chair.
  - Straighten one leg in front.
  - Reach toward outstretched leg.
- **Repeat with other leg.**



**Deep breaths:**

1 minute

- Take 10 deep breaths.
- Raise heels on breath in.
- Lower heels on breath out.

## Safety advice

In order to make sure you are safe during your exercise session, please read through the following information carefully.

- While you are being checked in **it is your responsibility to tell your Cardiac Rehabilitation Nurse** about any illness / symptoms that you have had since you last attended the class.
- Your exercise prescription is written out in your exercise folder for you to refer to. **It is important that you stick to the prescription of exercises which is given to you. If you feel that you are capable of working at a higher level than your recommended programme, do not just increase your programme yourself. Instead, talk to a member of the rehabilitation team and we will tell you if we think it is appropriate and safe for you to do so.**
- If you are in any doubt, ask a member of staff before you start exercising.

**Please read and follow these safety guidelines.**

### 1. What should I do if I experience any pain while exercising?

**STOP** whatever you are doing, no matter where the pain is coming from. You should never experience any pain during or after physical activity.

**IF YOU ARE IN THE MIDDLE OF A REHABILITATION CLASS, TELL ONE OF THE MEMBERS OF STAFF IMMEDIATELY.**

### 2. Are there any other reasons that I should stop exercising?

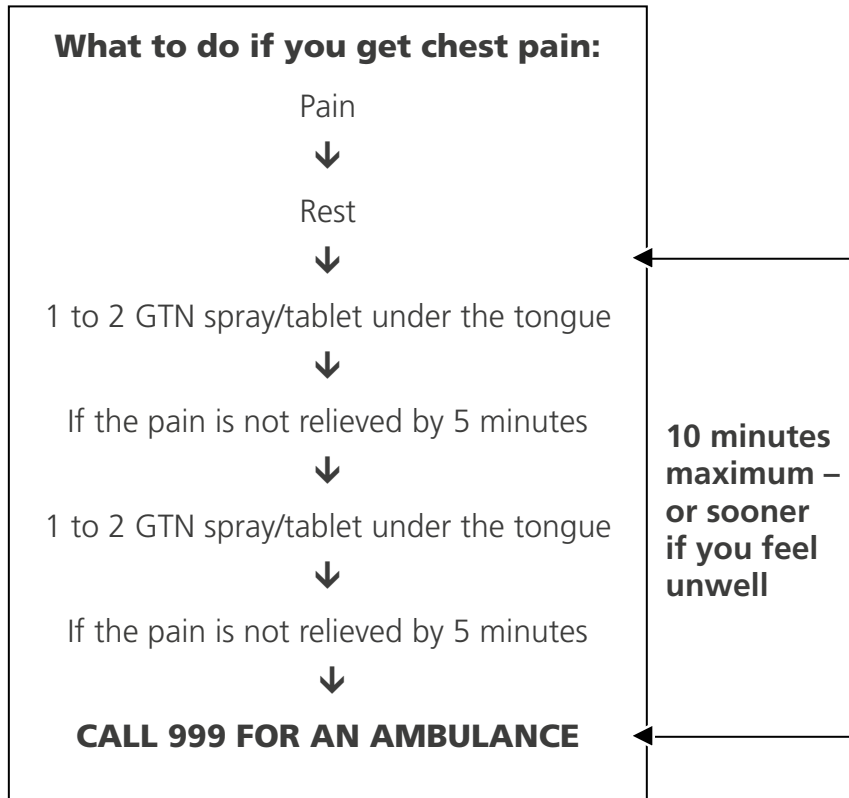
Yes, you should listen to your body and stop exercising immediately if you experience any of the following:

- pains or tightness in your chest
- pain, swelling, stiffness in joints
- palpitations
- **excessive** sweating
- **excessive** shortness of breath
- sickness /nausea
- feeling dizzy or faint.

**Please let one of the cardiac rehabilitation staff know IMMEDIATELY if you are experiencing any of these problems.**

### 3. What should I do if I have angina when I am exercising on my own?

Angina is an uncomfortable feeling in the chest. It usually feels like a heaviness or tightness in the centre of the chest, which may spread to the arms, neck, jaw, face, back or stomach. Use your GTN spray or tablets (if you have been given these) because this will increase the supply of blood to your heart and help to relieve the discomfort.



**If at any point your pain becomes worse, or if you feel unwell (e.g. dizzy, sweaty, short of breath) please call 999 for an ambulance immediately.**

**If your pain is relieved, but if the episodes of angina are more frequent or are taking longer to go away, please arrange to see your GP to be reviewed.**

**If you notice that your angina has started to happen at night or when you are resting, it is important that you see your GP so that he/she is aware of your new symptoms.**

## Guidance on how to use equipment in the gym

### When using the treadmill it is important that you:

- Attach the safety cord to your belt/waistband before starting the machine.
- Make sure that you are clear about the speed that you require **before** starting the treadmill.
- Reset the treadmill completely prior to starting the machine – this can be done by pressing the 'reset' button or the 'stop' button twice.
- Face forward **at all times**. Do not turn around to talk to people.
- Use hand rails for support but do not grip them tightly, lean or push on the hand rails.
- Familiarise yourself with the 'stop' button, and the emergency stop procedure, in case you need to stop the machine quickly.
- When increasing the speed, lightly press and release the button repeatedly, rather than applying pressure for a prolonged time.
- Do not put your exercise books on any part of the treadmill. Check your programme before you start and put your book somewhere where it will not fall onto the equipment.

### When using the recline/upright bikes:

- Upright bikes – make sure that the seat is in the right position and that it is secure **before** you get on to the bike.
- The recline bikes are best adjusted while sitting on the bike, using your body weight to move the seat.
- Your legs should be **almost straight** when you are pedaling whatever type of bike you are using.
- Make sure that you are clear about what level of resistance you require. If in doubt, please check with a member of staff before you start.

### When using the arm bike:

- Your arms should always be slightly bent, even when at the furthest point away from you.
- The seat height should be set so that your arms and shoulders are level. Make sure you are not pedaling above or below shoulder height.
- Make sure your feet are either flat on the floor or use the bars on the wall for support.

### REMEMBER:

- If at any point during your exercise programme you feel uncomfortable / unhappy to continue with the activity, **stop immediately** and tell a member of staff.
- If you are in any doubt about these instructions, please check with a member of staff **before** starting the activity.
- If you experience any pain or discomfort (chest pain/muscular pain) you must tell a member of staff **immediately**.



## References

The information in this booklet is based on evidence. The following references were used:

*American College of Sports Medicine (2006) Guidelines for Exercise Testing and Prescription. 6th Edition. Lippincott, Williams and Wilkins. Baltimore.*

*Borg, G. (1998) Borg's Perceived Exertion and Pain Scales. Human Kinetics. Champaign, Illinois.*

*British Association of Cardiac Rehabilitation (2007). BACR Phase IV Exercise Instructor Manual, 4th Edition. Human Kinetics, Leeds.*

*Department of Health (2000) National Service Framework for Coronary Heart Disease. DOH. Chapter 7.*

*Thow, M. (2006) (Ed) Exercise Leadership in Cardiac Rehabilitation: An evidence based approach. Whurr Publishers Limited. Chichester.*













## Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Cardiac Rehabilitation  
October 2024  
Review: October 2027  
Oxford University Hospitals NHS Foundation Trust  
[www.ouh.nhs.uk/information](http://www.ouh.nhs.uk/information)



*Making a difference across our hospitals*

[charity@ouh.nhs.uk](mailto:charity@ouh.nhs.uk) | 01865 743 444 | [hospitalcharity.co.uk](http://hospitalcharity.co.uk)

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

