**Students Name** –

**Course Type** - Cardiac Rehab Phase IV

**Course Venue** –

**Course Date** -

**Lecturer’s Name** – John Robinson and Grant Ralston

**Word Count** -

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**Section 1-** Provide a summary of the client’s medical history and current medical status.

**Section 2 –** Provide details of any medication the client may be taking, including the reason for taking the medication, the effect, the potential side effects, and the implications for exercise prescription.

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| --- | --- | --- | --- | --- |
| **Group name of the drug** | **Drug name** | **Desired effect** | **Side effects** | **Implications to exercise** |
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**Section 3 -** Provide statements of the appropriate clinical objectives. Each objective must be accompanied by the underlying reason, or multiple reasons, for selection.

**Section 4 –** Provide a twelve-week training/rehab plan including gym-based interventions and others.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Week Number | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | Methods of monitoring intensity | Additional information |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |
| **Abbreviation:** | | | | | | | | | |

**Section 5 -** Justify each intervention by explaining the specific and/or general responses/adaptations to that exercise

**Section 6 -** Consider all psychological issues you feel are relevant in dealing with your client, in order to effect positive lifestyle change(s) and provide details of which behavioural strategies you feel would be appropriate.

**Section 7 -** A summary of pre-post physiological measurements with a rationale for each measurement and, where appropriate, a rationale for not taking a specific measurement

|  |  |  |  |
| --- | --- | --- | --- |
| **Physical Parameter Assessed** | **Pre exercise intervention measurement [baseline]** | **Post exercise intervention measurement** | **Pre-to-post difference** |
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| **Rationale for inclusion of the physiological tests assessed** | | | |
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|  | | | |
|  | | | |

**Section 8 -** An information sheet suitable for your lay client (one side A4) giving advice on generally positive lifestyle changes regarding his/her specific condition

**Section 9 -** A plan of how you would engage the help of, or offer your services to, the local NHS/PCT to form a multidisciplinary team in cardiac disease management

# **References**

# **Appendix**