

What is Cardiac Rehabilitation?

Cardiac Rehabilitation is an essential part of cardiovascular services offered through Advocate Sherman Hospital. Through the rehabilitation program, you and your family receive physical, emotional and social support in returning to a normal lifestyle.

Cardiac Rehabilitation consists of individually prescribed exercise and educational sessions designed to return you to optimal health. This exercise program is prescribed through your cardiologist.

What do I need to do to start cardiac rehab?

- You will need a written order or referral slip from your cardiologist.
- A low-level stress test is recommended prior to starting your exercise program. This of course is at your cardiologist's discretion. This test allows the staff to design an exercise program specific to your individual needs.

What you need to do:

- Once your cardiologist gives you the O.K. to start an exercise program, call the Cardiopulmonary Rehabilitation Department to schedule your orientation appointment.
- The rehabilitation staff can help you obtain the written order or referral you will need to start the program. The orientation sessions are held Monday through Friday, by appointment only.

Phase I

Phase I begins when you are in the hospital. Preoperative education is conducted with a cardiac rehabilitation staff member. Emphasis is placed on what you can do to prevent and reduce the recurrence of heart disease.

Cardiac education is an ongoing process beginning early in your recovery and continuing through all phases of the program. Care is taken to involve your family in the ongoing education process. Patient education is a combined effort involving the bedside nurse, cardiac rehabilitation nurses, exercise physiologists, discharge planner, dietitians, physical therapy, respiratory therapists, physicians and others who may be involved in your total recovery.

Phase II

Phase II is a continuation of Phase I. This phase is conducted on an outpatient basis and usually begins two to four weeks postoperative. The primary focus of this phase is supervised exercise sessions and risk reduction education. Prompt return to work and recreational activities are emphasized to ensure a better quality of life.

Phase II consists of thirty-six exercise sessions and are held at various times throughout the day. You will be exercising while wearing a monitor that measures heart rate and EKG rhythm. Blood pressures are taken before, during and after each exercise session. A cool down period completes each session, allowing for the cardiovascular system to return to a resting state. During exercise, you are continuously monitored by a cardiac rehabilitation nurse and exercise physiologist. Counseling, patient education and modifications of the patient's lifestyle are a vital part of the rehabilitation program. Education classes are conducted to further educate you and family on preventive lifestyle changes such as risk factors, exercise guidelines, nutrition, stress and medications.

The department is staffed by registered nurses and exercise physiologists trained in cardiac care and exercise fitness. Emergency medical equipment is immediately available should the need arise.

Most insurance plans and Medicare provide coverage for the cost of the program. Please be sure to check with your insurance company prior to starting the exercise program.

Phase III

Phase III is a continuation of rehabilitation for those who have completed phases I and II. This is an ongoing program designed to promote continued cardiac improvement and lifestyle modification. All patients are counseled and evaluated for effectiveness of both the individualized exercise program and the risk reduction program goals. Emphasis is

placed on independent exercise; however, either a cardiac nurse or exercise physiologist is always available for consultation and monitoring. Supervised resistance training is also available.

Phase IV

Phase IV is an exercise program that provides support and guidance of lifestyle and risk factor modification and heart healthy diet education.

Please call 224.783.6260 with questions or to schedule an appointment.



Cardiopulmonary Rehabilitation

Home Exercise Program

What kind of exercise should I do?

- Walking on level surfaces (avoid steep hills)
- Indoor or outdoor (weather permitting)
- Stationary bike may be used if cleared by your physician

How often should I exercise?

- 4-6 times per week

How long should I exercise?

- Start with 5-8 minutes of exercise time
- Increase your walking/biking time by 1-2 minutes each day
- These exercises may be repeated 2-3 times per day if you do not feel fatigued (do not overtire yourself)
- Your long-term goal is 30-45 minutes of continuous aerobic exercise

How hard should I exercise?

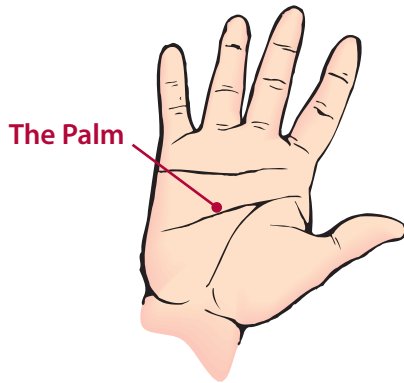
- Your heart rate (pulse) and how you feel (RPE) during exercise should be your guide on how long you should exercise, what intensity your exercise should be and what activities you can do.
- You may monitor the intensity of exercise in two different ways:
 1. Heart rate
 2. Rating of Perceived Exertion (RPE)



Monitoring Your Heart Rate

How to Take Your Heart Rate (Pulse)

Heart rate and pulse are the same thing. Place your hand so that your palm is facing upwards. Take the second and third fingers of the other hand and place them just below your thumb. (See diagram below).



Count for 15 seconds. Multiply this number by 4 and that is your heart rate (pulse).

Practice and record below.

15 second count = _____ x 4 = _____ (pulse)

Remember everyone's heart rate is different. There are some medication's that may slow your heart rate down or some may speed up your heart rate. Take your heart rate (pulse) at rest for a few days in a row so that you know what normal is for you. If your heart rate is *below* 45 beats per minute or *exceeds* 120 beats per minute at rest you need to notify your doctor.

Your heart rate during *exercise* should not exceed more than 30 beats over what your heart rate was at rest during early recovery from a heart problem.

Rate of Perceived Exertion (RPE)

RPE is how hard you feel you are working. This is based on muscle use, breathing and your overall feeling of effort (from the top of your head to the tips of your toes). In most cases a rating of "somewhat hard" is the proper level of exertion (this should be a rating of 11-14 on RPE scale). You should be able to speak and should be only slightly short of breath. If what you are doing gets harder than 14 (somewhat hard), you need to either slow down or take a rest.

Perceived Exertion Scale (RPE)

6	No Exertion
7	Extremely Light
8	
9	Very Light
10	
11	Fairly Light
12	Proper Exertion Level
13	
14	
15	Hard
16	
17	Very Hard
18	
19	Extremely Hard
20	Maximal Exertion

Starting Exercise at Home

Resting Heart Rate

Before exercise, check your resting heart rate (pulse) while standing for walking, while sitting for stationary bike.

Warm-Up

Before exercising, warm-up for 3-5 minutes by slow walking, stretching, or biking with NO resistance. This allows for a slow increase in circulation and muscle flexibility.

Exercise

After your warm-up, adjust your exercise intensity to where you perceive the exercise to be **somewhat hard** (11-14 on the RPE scale).

- **Walking**—This means a brisk pace. If you walk uphill, slow down your speed to maintain a constant level of exertion and heart rate (remember it should NOT be more than 30 beats over resting heart rate).
- **Biking**— Maintain a comfortable speed. Increase the tension to the point where you can consistently pedal 45-55 RPM (revolutions per minute). Again, remember your pulse should NOT exceed 30 beats over resting heart rate.

Exercise Heart Rate

Halfway through your exercise period, stop and check your heart rate. If it exceeds 30 beats over resting, slow down and decrease the intensity of the exercise. Repeat this process at the end of your exercise session. Then do your cool-down. Remember that some heart medications make it harder to increase your heart rate. If this is true for you, use your RPE as your guide.

Cool-Down

At the end of each exercise session, slow down to an easy pace for 3-5 minutes. This will prevent sudden changes in blood pressure that could occur if you stop exercising suddenly.

Recovery Heart Rate

About 5 minutes after you cool-down, check your heart rate. This heart rate should be within 10-15 beats of your resting heart rate.

Normal Sensations You May Experience During Exercise

- Increased heart rate
- Slight sense of muscle fatigue
- Moderate sweating
- Moderate shortness of breath

Abnormal Responses to Exercise

- Heart pain (angina)
- Excessive shortness of breath
- Excessive sweating
- Blurred vision
- Frequent skipped beats
- Dizziness, lightheadedness
- Nausea
- Cramping in your arms or legs

If you notice any of the abnormal responses **STOP** exercising at once and rest. You should notify your physician of any changes in your condition.

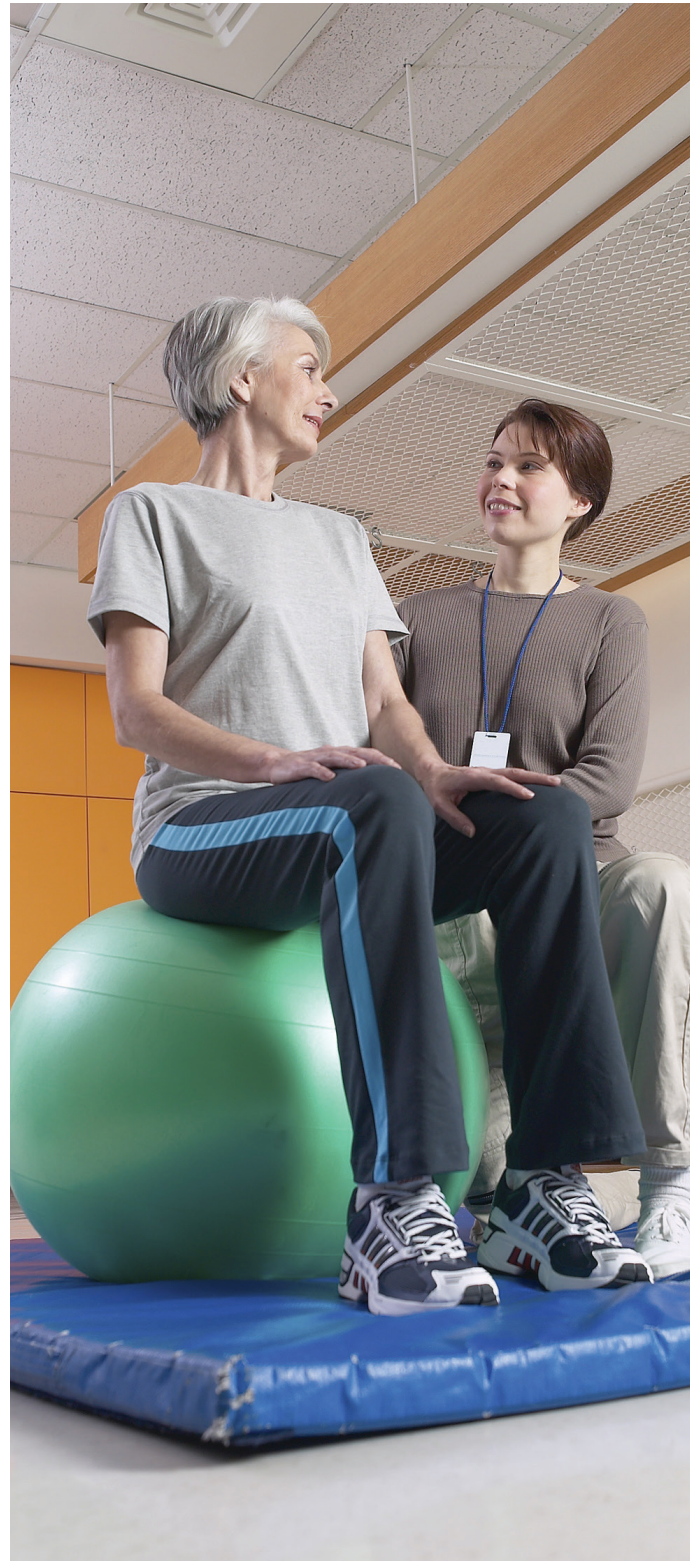
If any of the abnormal responses **DO NOT** go away with rest (after stopping exercise), call your physician. If any of the abnormal responses increase in intensity after stopping exercise, call 911 and go to an emergency room.

Follow-Up

It is important for you to follow-up with a cardiac rehabilitation program. You can receive follow-up exercises through Advocate Sherman Hospital's Cardiopulmonary Rehabilitation Program or a program near your home. Our team will discuss your outpatient exercise program with you before you are discharged.

If you have any problems or questions about your exercise program, please contact us.

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Daily Record

NAME

[illegible]

Additional Information:

- **Weight:** Record your weight first thing in the morning using the same scale.
- Please notify your physician if you have a weight gain of 2 pounds within 24 hours or of 3-5 pounds over one week.
- **IS (Incentive Spirometry):** Record number of times per day and repetition each time.
- **Walk:** Record # of walks per day and length of time for each walk.
- **Temperature:** Record your temperature every day at the same time.
- **Pulse:** Record your heart rate before your walk and during your walk.