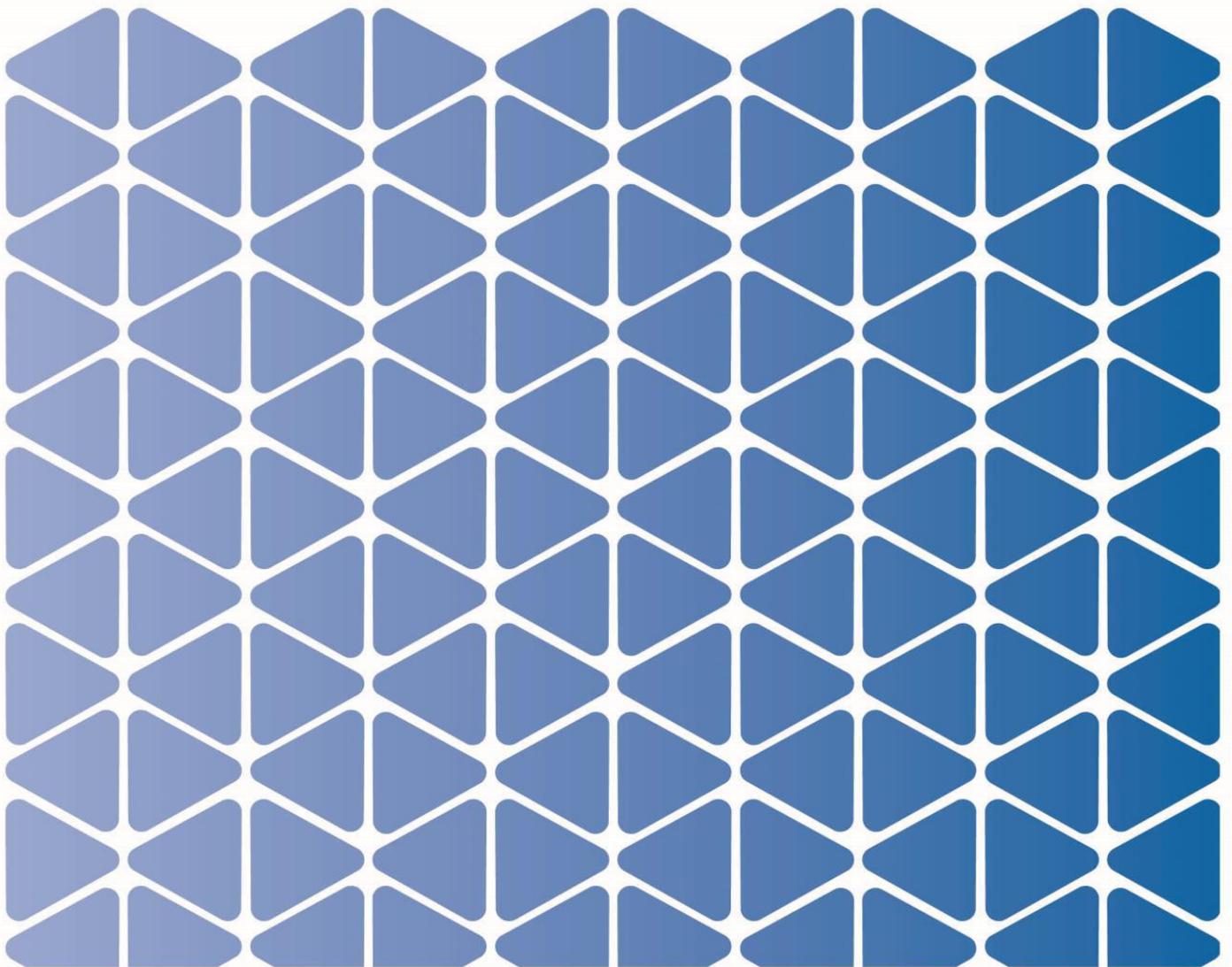




PATIENT INFORMATION

# HOME-BASED EXERCISE PROGRAMME DIARY



# HOME-BASED EXERCISE PROGRAMME

Name.....

Date of birth.....

Hospital number.....

Start date of programme.....

Vascular team member.....



## **12-Week exercise programme to be completed at home**

1. Complete **3 sessions of walking for 40 minutes per week**. You are aiming for a **minimum of 2 hours** of walking every week of the programme.
2. Follow a **'walk-rest-walk'** pattern whereby you walk at a pace which you can comfortably maintain until your leg muscle cramps are sufficient to stop you walking. Take a rest until the pain subsides and continue walking. You should follow this walk-rest-walk pattern until you have reached at least 40 minutes. This 40 minute includes walking time as well as the rest breaks.

You should aim to record:

- **Time walked** before you need your **first rest break** due to leg cramps.
- **Distance walked** by the time you stop for this **first rest break**.
- **Total session time**, this should be at least 40 minutes.
- **Total distance** walked by the end of the session.

3. Record all exercise on your diary sheet, see next page for details.

### **Things to remember**

- You will not cause harm by walking with claudication pain.
- It will take several weeks before your symptoms and walking distance improves.

## Example Diary Sheet

As a minimum, you should be walking at least **three 40-minute sessions** (total 2 hours) per week for the 12-week programme. It is okay to exceed this. It is recommended you walk as much as possible.

How long / far did you manage to walk before you had to take your **first rest break** due to leg muscle cramps?

The **total session** will include your walking time, plus your rest

Examples:

- Majority of the route was uphill
- Stopped due to pain in joints, not because of leg muscle cramps
- Time of day at the start/end of your session

Complete a minimum of 3 sessions per week

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

### Tips on recording distance:

*Please note, you are not required to purchase any equipment for this programme*

- This can be in meters, yards or steps. It should be the same unit used for each walk
- Use a pedometer
- Use a mobile phone pedometer app
- Walk the same route each time and make a note of a landmark (e.g. bench) and whether this was further or shorter than the previous landmark in the comments

**Week 1**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 2**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 3**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 4**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

### Week 5

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

### Week 6

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 7**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 8**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 9**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

**Week 10**

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

## Week 11

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

## Week 12

Date	First break due to muscle pain in leg(s)		Total walked by the end of the session		Comments <i>(optional)</i>
	Time <i>(min:sec)</i>	Distance	Time <i>(min:sec)</i>	Distance	

## Summary of progress

At the end of the programme, please complete the following:

- 1) What was the **furthest distance** you achieved before needing your **first rest break** and **total distance** walked. Please include the week you completed each walk.

Furthest distance before requiring <b>first rest break</b>		Furthest <b>total distance</b> walked during a session	
	Week		Week:

- 2) Do you think the distance you can walk before needing to stop for your **first rest break** has improved since the start of the 12-week exercise programme? *Please tick your answer.*

First break walking distance has <b>decreased</b>	First break walking distance has <b>stayed the same</b>	First break walking distance has <b>improved slightly</b>	First break walking distance has <b>improved significantly</b>

- 3) Do you think your **total walking distance** has improved since the start of the 12-week exercise programme? *Please tick your answer.*

Total walking distance has <b>decreased</b>	Total walking distance has <b>stayed the same</b>	Total walking distance has <b>improved slightly</b>	Total walking distance has <b>improved significantly</b>

- 4) Do you have any general feedback about your progress during the 12-week exercise programme and/or about the Home-Based Exercise Programme? *This question is optional.*

If you require any additional support to read this leaflet (e.g. a large font version) or, have any questions regarding the content please ask a member of staff for advice or contact the vascular laboratory.

**Address:**

Vascular Laboratory,  
Clinical Investigations Unit,  
Worcestershire Royal Hospital,  
Charles Hastings Way,  
Worcester,  
WR5 1DD.

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

### **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

### **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

### **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

### **How to contact PALS:**

Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PALS@nhs.net](mailto:wah-tr.PALS@nhs.net)

### **Opening times:**

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.