

Exercise Instructions

Acute Coronary Syndrome (ACS)

Always follow the advice of your provider (doctor/nurse practitioner/physician assistant). The instructions below are general and should only be done with their approval.

Following an acute coronary syndrome (heart attack, unstable angina) and after an angioplasty and or stent, patients should undergo cardiac rehabilitation. Cardiac rehab is associated with a reduction in recurrent heart attacks, improved fitness, reduction in risk factors, and reduced death, particularly in those who complete the full course that includes exercise and education.

Before beginning an exercise program after a heart attack, a treadmill exercise test is performed to assess for symptoms, heart rate response, appropriate workloads, and possible EKG changes.

- The test can generally be done within one week of a heart attack.
- The test is usually done before starting a cardiac rehabilitation program.

General Guidelines

Warm-up	5 minutes
Aerobic	30-60 minutes continuous exercise (use Rating of Perceived Exertion – see next page)
Weight Training	10-20 minutes
Cool Down	5 minutes
Stretching	Up to 5 minutes of light stretching

Warm Up

Easy/light movement that prepares muscles for aerobic and/or weight training exercise.

Aerobic

- Done most days of the week. Goal is exercise time not intensity.
- Uses large muscle groups working together.
- This should cause an increase in heart rate (HR) and breathing rate, but you should still be able to carry on a conversation.
- Examples: walking, swimming, biking, and using a Nustep®.

Weight Training

- Aim for high repetitions (reps) with light weights 2-3 days per week. Do alternating days, not 2 days in a row.
- Start with 1 set of 10 reps per muscle group (legs, back, chest, shoulders, and arms). Progression includes:
- Increase 2 to 3 sets of 10- 15 reps when able to tolerate.
- Strength training should only be performed after some form of aerobic warm-up.
- Be sure to breathe while performing the movement. No breath holding.

Note: It is not safe to do isometric training (pushing or pulling against a fixed object like a wall or a bar, at this time.

Cool Down

Similar to the warm-up; light movement to help bring your heart rate (HR) back to its resting level.

Stretching

- Decreases muscle soreness and increases flexibility.
- Done after every workout session.
- Hold stretch up to 30 seconds (as tolerated) without moving, and be sure to keep breathing - no breath holding.

PRECAUTIONS

- Your physician should clear you before you start an exercise program.
- Exercise may result in fluid loss (dehydration) so drink fluids to prevent low blood pressure after exercise. Patients on fluid restriction should ask for more specific advice from their physician.

WHEN TO CALL & WHO TO CALL

If you have any of these symptoms before or during exercise, stop exercise immediately and contact your physician:

- Chest pain
- Rapid heart rate
- Shortness of breath
- Lightheadedness, or
- Anything that feels different than usual.

BORG RATING OF PERCEIVED EXERTION (RPE)

Use this scale to find the intensity level of your exercise. A rating of 11-13 is ideal.

6	
7	Very, Very Light
8	
9	Very Light
10	
11	<i>Fairly Light</i>
12	
13	<i>Somewhat Hard</i>
14	
15	Hard
16	
17	Very Hard
18	
19	Very, Very Hard
20	

For questions about exercise, call the exercise consultants at:

Cardiovascular Center

734-936-5627

Cardiovascular Medicine at Domino's Farms

734-998-5666 or 647-7321

Disclaimer: This document contains instructions for occupational and/or physical therapy exercises developed by the University of Michigan Health System (UMHS). Your health care provider has determined that these exercises are beneficial to you based on your condition at this time. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan, including whether it is appropriate to continue doing these exercises should your condition change.

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