Phase 1 Program goals:

- To introduce ourselves as part of the Cardiac Rehab Staff and initiate contact/relationship with patient
- Identify and educate patient regarding modification of cardiovascular risk factors, self-assessment and self care in heart health
- Identify the existence of any co-morbidities or complications that may increase patients risk of recurrent cardiac event
- Prevent weakness and complications caused by prolonged bed rest
- Improve endurance, range of motion and flexibility
- Promote independence, self-esteem and responsible decision making for patients
- Educate patients and possible spouses or care givers regarding exercise and symptom recognition

Initial Patient Assessment: (AACVPR guidelines)

- Assess for admitting diagnosis, present illness and clinical status, current signs and symptoms, past medical history, social history, employment status, risk factors, co-morbidities, and alcohol or substance abuse
- Patient interview is essential to supplement medical information regarding personal, family and social history
- Emphasis on patient readiness for activity, readiness to learn and discharge requirements
Assessing patients readiness for daily ambulation and mobilization: (AACVPR guidelines)

- No new or recurrent chest pain during previous 8hr
- Neither CK nor troponin level are rising
- No new signs of decompensated failure (e.g. dyspnea at rest)
- No new significant, abnormal rhythm, or ECG changes occurred during the previous 8hr

**Progression of Activity**

- Appropriate HR increase (≤30 bpm)
- Appropriate SBP response to activity (increasing, 10-40 mm Hg from rest)
- No new rhythm or ST changes
- No new cardiovascular symptoms such as palpitations, dyspnea, excessive fatigue, or chest pain

Before beginning the activity portion of IPCR, a physician, nurse, physical therapist or CR staff member with appropriate skills and competencies should perform a baseline physical assessment, including heart and lung sounds, palpation of peripheral pulses, and self-care skills and ability. Results of the assessment must be documented along with the baseline heart rate, blood pressure, O2 saturation and cardiac rhythm.