

# CARDIAC REHABILITATION LOG

Month/Year: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Physician: \_\_\_\_\_

RESTING HR

\_\_\_\_\_ **BPM**

TARGET ZONE (LOW)

\_\_\_\_\_ **BPM**

TARGET ZONE (HIGH)

\_\_\_\_\_ **BPM**

DATE	ACTIVITY	DURATION	PRE-EX HR	PEAK HR	POST-EX HR	RPE (1-10)
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*\*RPE: Rate of Perceived Exertion. Stop exercise immediately if you experience chest pain, dizziness, or shortness of breath.*