

# OUTPATIENT CARDIAC REHAB EXERCISE LOG

Target Heart Rate: \_\_\_\_\_ BPM

Patient Name:

Week Of:

Medical Provider:

DATE	ACTIVITY TYPE	DURATION (MINS)	HEART RATE		BLOOD PRESSURE		RPE (6-20)	SYMPTOMS / NOTES
			PRE	PEAK	PRE	POST		

**RPE Reference (Borg Scale):** 6-8: Very Light 9-11: Fairly Light 12-14: Somewhat Hard (Target Zone) 15-17: Hard 18-20: Very Hard

**Instructions:** Record vital signs before and immediately after exercise. Stop activity if you experience chest pain, dizziness, or unusual shortness of breath.