REHABILITATION PROGRAM SHEET FOR……

Please record every exercise session including time (min), number of circuits, number of repetitions and weight/intensity (eg treadmill 3 x 3min x 4)

DATE													Goal for the week
													☐
Program check		Pacing ☐		Sleep ☐		Goals ☐		Graded activity ☐		Graded exercise ☐		Medication ☐	
													☐
Program check		Medication ☐		Sleep ☐		Goals ☐		Graded activity ☐		Graded exercise ☐		Pacing ☐	
													☐
Program check		Medication ☐		Sleep ☐		Goals ☐		Graded activity ☐		Graded exercise ☐		Pacing ☐	