Chronic heart failure

### Diagnostic process for physical therapy

1. **History-taking**
   - presenting problem / target activity level (PALS)
   - assessment of activity level before current health problem
   - assessment of health status (nature, course, prognosis)
   - assessment of current state
   - other information: personal details (social, environment)
   - motivation
   - need for information

2. **Examination**
   - assessment of impairments, activity limitations and health problems that may influence the choice of exercise activities in the rehabilitation program
   - assessment of functional exercise capacity (SWT)

3. **Analysis**
   - 1. assessment of health status and current functional exercise capacity
   - 2. physical impediments
   - 3. other (internal or external) factors
   - 4. impeding recovery
   - 5. future target situation
   - 6. target situation feasible within the limits of patient’s abilities
   - 7. opportunities to reduce health problem, i.e. improve functions, activities and participation

4. **Designing treatment plan**
   - Rehabilitation goals
   - general goals
   - optimizing exercise capacity
   - balancing exertion with physical abilities
   - reduced dyspnea, fatigue and inactivity
   - improving physical fitness
   - reducing inactivity and risk factors
   - activities to develop
   - physical improvements to be expected
   - patient’s individual goals

5. **Selecting priorities for exercise program**
   - practicing skills and activities
   - training aerobic (general) exercise capacity
   - encouraging physical activity
   - training (local) strength endurance of peripheral muscle groups and / or inspiratory muscles
   - training functions / activities to develop enjoyment of exercise, reduce physical inactivity and reduce risk factors

6. **Selecting training activities**
   - practicing functional skills and activities for ADL, work and / or hobbies / field training / sports and games / fitness / aerobics / swimming / ergometers / exercising in water / relaxation

7. **Selecting exercise variables**
   - aerobic training: intensity / frequency / duration / work/rest intervals / structure of training program
   - strength training: external resistance / speed / number of repetitions and sessions / recovery intervals

8. **Implementation of program**
   - interim and final evaluation, adjusting program if necessary

9. **Relaxation program**
   - reducing tension
   - regulating breathing
   - promoting body awareness

### Relevant information for physical therapist

- medical diagnosis
- relevant diagnostic (e.g. > 3 weeks hemodynamically stable) and prognostic referral information on patient’s physical condition
- all individual rehabilitation goals, especially goals for physical training and possible impediments to physical training, such as anxiety, dysfunctional coping style, decompensation risk and comorbidity
- results of maximum or symptom-limited exercise test with gas analysis
- settings of IED or pacemaker, if present (safe heart rate range for training)
- all medications (type, dosage)
- information relevant to work resumption (mostly for younger patients), prognosis and family information (social support)
- diagnosis for physical therapy

### KNGF Guideline

- The training program is part of the multidisciplinary cardiac rehabilitation. For locations of cardiac rehabilitation see the Preface and the introduction to the Verantwoording & Toelichting (review of the evidence) document.

ICD = implantable cardioverter defibrillator; MDT = multidisciplinary cardiac rehabilitation team; PSC = patient-specific complaints; SWT = shuttle walk test; VO2max = maximum oxygen uptake

Consult the full Guideline on www.kngrichtlijnen.nl

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