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BMS4005

Personal Training Assessment – Training Programme

1. Client Profile

Mae atodiadau (b) yn dangos mae Helen Davies yn gleient benywaidd sy'n 53 oed gyda ffordd o fyw actif, mae Helen yn gweithio'n llawn amser mewn swydd weinyddol, heb ymrwymadau mawr i gymryd llan amser tu fas o'i hobiau. Mae'r cleient yn cymryd rhan mewn 'circuit training' fel arfer 4 gwaith yr wythnos ac yn rhedeg 10k unwaith ar y penwythnos. Dywedodd hi bod y circuit training hwn yn repetitions uchel yn bennaf ac i ddwysedd methiant, sy'n cynnwys mwy o waith rhan uchaf na rhan isaf y corff. Soniodd y cleient nad yw'n gwneud ymarferion ynysu/isolation e.e. symudiadau araf a rheoledig wrth defnyddio peiriannau pwysau neu ymarferion pwysau rhydd, teimlais y byddent yn elwa o wneud rhai ymarferion cryfder.

Roedd gan y cleient nodau tymor byr, canolig a hir. Ei nodau oedd i cynyddu cryfder rhan isaf o'i gorff am rhedeg, dysgu dulliau cywir i cynhesu cyhyrau cyn sesiwn ac ymlacio ar diwedd sesiwn. Ei nodau tymor byr oedd i cyflymu ei chyflymder cyfartalog a chynnal cyflymder ar gyfer ei hanner marathon a archebwyd ar gyfer diwedd y flwyddyn.

Cyn cyfrannu mewn rhaglen ymarfer corff, dylai cwblhau PAR-Q i sicrhau bod yr unigolyn yn ddiogel i gymryd rhan (Joy, 2011). Mae'r PAR-Q yn offeryn sgrinio cyffredinol sy'n nodi ffactorau sy'n gallu cynyddu'r risg o broblemau iechyd sy'n gysylltiedig ag ymarfer corff, ffactorau posibl yw hanes meddygol neu anafiadau yn y gorffennol (Lippke, Voelcker-Rehage et al. 2014).

Cynhaliwyd asesiad pwysedd gwaed, gall cyfrannu mewn ymarfer corff rhoi unigolyn at risg os mae ganddyh pwysedd gwaed fwy uchel na'r safonau meddygol (Blood Pressure UK, 2021). Yn ôl atodiad (b), cynhaliwyd asesiad pwysedd gwaed, gyda canlyniad o 85/130 (systolic/diastolic).

Arweiniodd hwn at 'Prehypertension', yn ôl atodiad (c). Roedd y cleient yn addas i gymryd rhan gan fod hwn yn ganlyniad cyffredin yn y wledydd incwm uchel (Zhou, Bentham et al. 2017). Mae ymarfer corff yn ddull effeithiol i atal hypertension yn y rhai sydd â graddau ysgafn i gymedrol e.e. 'prehypertension' (Kraemer, Fleck,

Deschenes, 2021). Yn gyffredinol, roedd y cleient yn addas i gyfrannu yn y rhaglen corfforol.

2. Programme Overview

Table 1 – Client’s Weekly Training Schedule

Day	Exercise
Monday	Rest
Tuesday	RT Session on Campus
Wednesday	Kettlebell Core Class (Now a Rest Day)
Thursday	5-7km Run
Friday	HITT Curcuit Training
Saturday	Assault Bike Class
Sunday	10km Run

Table 2 – Weekly Progression of PT Sessions

5-10 Min Warm up					
Exercise	Week 1 Sets/Reps Load/Rest	Week 2 Sets/Reps Load/Rest	Week 3 Sets/Reps Load/Rest	Week 4 Sets/Reps Load/Rest	Week 5 Sets/Reps Load/Rest
Leg Press	3 Sets x 8 Reps 30kg – 90sec Rest	3 Sets x 8 Reps 40kg – 90sec Rest	3 Sets x 8 Reps 50kg – 90sec Rest	3 Sets x 6 Reps 60kg – 90sec Rest	3 Sets x 8 Reps 60kg – 90sec Rest
Weighted Lunge	3 Sets x 8 Reps 8kg – 60sec Rest	3 Sets x 8 Reps 12kg – 60sec Rest	3 Sets x 8 Reps 12kg – 60sec Rest	3 Sets x 8 Reps 12kg – 60sec Rest	3 Sets x 8 Reps 16kg – 60sec Rest
Unilateral RDL	3 Sets x 4 Reps Eccentric Bodyweight– 60sec Rest	3 Sets x 4 Reps Bodyweight Full ROM – 60sec Rest	3 Sets x 4 Reps 4kg – 60sec Rest	3 Sets x 4 Reps 4kg – 60sec Rest	3 Sets x 4 Reps 8kg – 60sec Rest
Treadmill Intervals	6 Sets x 1min on (8km/h) - 1 min off (3km/h)	6 Sets x 1min on (8.5km/h) - 1 min off (3km/h)	6 Sets x 1min on (9km/h) - 1 min off (3km/h)	6 Sets x 1min on (10km/h) - 1 min off (3km/h)	6 Sets x 1min on (10.5km/h) – 1 min off (3km/h)
Plank	2 Sets x 30sec - 30sec Rest	2 Sets x 30sec - 30sec Rest	2 Sets x 35sec - 30sec Rest	2 Sets x 35sec - 30sec Rest	2 Sets x 40sec - 30sec Rest
Ab Wheel Roll Outs	2 Sets x 6 Reps - 30sec Rest	2 Sets x 6 Reps - 30sec Rest	2 Sets x 7 Reps - 30sec Rest	2 Sets x 7 Reps - 30sec Rest	2 Sets x 8 Reps - 30sec Rest
5-10 Min Cool Down					

3. Programme Rationale

3.1 Introduction - Resistance Training is an effective form of developing muscle mass and strength in multiple population groups, (Hargens, Edwards, et al., 2022) (Wong et al., 2010). Increasing muscle mass and strength is associated with improved performance and generally better athletes in sport (Ratamess, 2022). Although it is overlooked, being used by less than two-thirds of runners (Blagrove, 2018), strength training can improve running due to factors such as less physiological strain and improved economy during performance (Vikmoen, Rønnestad et al., 2017), (Best, 2021), (Beattie, *et al.*, 2014).

Lower body strength training alone can improve running economy but not the conditioning or VO2max for running (Støren, Helgerud et al. 2008), therefore treadmill intervals were included for the programme (Kraemer, Fleck, et al., 2016).

These exercises were performed once a week, due to the client's availability and active lifestyle. They currently did resistance training twice a week therefore were already benefiting from RT, but would now benefit more from more frequent participation (ACSM, 2022). However they were not training for lower body strength, these PT sessions would focus on slow and controlled strength training movements that were carefully chosen around her goals (Rønnestad, Mujika, 2014).

The client's availability meant that sessions would take place on Tuesday mornings, allowing 48 hour recovery time before her next session (Sharon A. Plowman, Denise L. Smith, 2017).

The RPE, or Rating of Perceived Exertion method can be an effective indicator to find the right intensity for the client (Bayles, Swank 2018), (Hargens, Edwards, Musto, et al., 2022). This was used throughout the programme, e.g., explaining to the client that 8/10 difficulty was desired during resistance exercises. This took time with client in the beginning, as it's possible that they didn't know what 10/10 felt like in slow, controlled and heavy movements.

The client's availability meant that sessions would take place on Tuesday mornings, allowing 48 hour rest times before her next RT sessions (Plowman, Smith, 2017).

3.2 Warm-Up - To begin sessions, a warm-up was used to prepare the muscles and cardiorespiratory system for the upcoming workout (Hargens, Edwards, et al., 2022). Each session's warm-up was designed using the R.A.M.P. method and principles, this ensured sufficient preparation for the upcoming session (Jeffreys, 2007).

A low intensity RPE of 4/10 for 5 minutes on the elliptical trainer was chosen for the warm up (Ratamess, 2022), it simulates running whilst minimising impact on leg muscles (Bosch *et al.*, 2021). 5 minutes of dynamic stretching followed that included upper body stretches but increased focus on lower body movements to potentiate for the session, potentiating is effective in preparing the body for the upcoming exercises (Baechle and Earle, 2008). This had movements such as bodyweight lunges for the legs, and hurdle walk-overs for the hips (Hedrick, 2000). It was ensured not to hold any stretches for too long as this can decrease muscular performance prior to exercise (Gremion, 2005), (Gelen, 2010).

3.3 Lower Body - For all lower body and core exercises, the intensity used was an RPE of 8/10. This made each repetition slow and controlled, with a greater focus on the eccentric phase of each movement for greater recruitment of motor units during slow movement velocity (Fleck and Kraemer, 2014).

The leg press was chosen because it's a novice-friendly variation of the back squat, a lower body recruiting exercise (Clark, Lambert and Hunter, 2012), beneficial for runners (Yamamoto *et al.*, 2008). It requires less technical experience than the squat which would be ideal for the client (ACSM, 2022). This was performed first because it's important for performance that compound movements, which are inherently heavier are performed before other exercises (Ratamess, 2022).

Weighted lunges were chosen because as a unilateral movement it has relevance to and is used to improve running performance (Jones and Bampouras, 2007). The lunges were performed second because the heaviest movement was the leg press, the lunge can obtain the similar benefits as the 90° squat, whilst being in a functional position for running (Dwelly *et al.*, 2009).

Unilateral RDL's was chosen as unilateral training improves unilateral strength, which is desired for running. (Ratamess, 2022). Hamstring injuries can cause mechanical problems such as incorrect foot strike, overstriding along with increased risk of injury (Sugimoto *et al.*, 2019), RDL's effective hamstring activation will strengthen the muscle to prevent these

issues (McAllister *et al.*, 2014). RDL's were performed third because resistance exercises should be sequenced in relation to relevance of one's goal (Simão *et al.*, 2005). In the client's case, improving lower body strength came first, the unilateral RDL was less of a heavier movement for them.

Rest times of 2 minutes was used between sets for these high muscle recruiting multi-joint exercises, this is recommended for individuals untrained in RT as it can be less stressful on the neuromuscular system (Schoenfeld, *et al.*, 2018).

Although there is a lack of evidence to support an exact amount of sets required for maximal strength gains, 3 sets 1-8 reps is widely used to create these gains (Baeckle and Earle, 2008). During these sets, the client trained with 8 reps total e.g. RDL's 4 each leg for each set as this allowed for strength gains (Baeckle and Earle, 2008), whilst taking into consideration the client's likelihood of injury due to inexperience at further lower reps with heavier loads.

To progress in these exercises, the client increased the weight rather than the reps or sets. Remaining in the strength gaining rep-range was important for the success of the programme's goal.

3.4 Treadmill Intervals - The treadmill intervals would begin with a 5 minute jog, then the intervals followed by a 5 minute walk to cool down and prepare the body, avoiding injury. The speed of active sets e.g. 10km/h was a reflection of the client's RPE feedback of 8/10 effort, this amount was desired as it felt to the client to be high-intensity. Evaluating the appropriate intensity was not straightforward, most guidelines recommend working at percentages of max HR therefore, RPE was used to decide intensity (Kraemer *et al.*, 2016).

She would have running sessions 1-2 times a week, therefore treadmill intervals would be beneficial with her aim of improving general running performance, instead of training one type of running (Faude *et al.*, 2013). They were chosen because there is evidence that including them in programmes can benefit one's VO₂max whether performed submaximal or supramaximal (Paquette *et al.*, 2017). In this case, the client was made to work more intense in comparison to how they usually run, providing benefits without running till sheer exhaustion.

The client is an active runner so they were appropriately classed as intermediate when comparing to recommended standards (Kraemer *et al.*, 2016), '1 min on 1 minute off' was used for the sets as high intensity was desired. Considering they were not beginner level, 5 sets

was the volume used, referring to the template by Kraemer. The client progressed in this exercise by increasing the intensity by .5 of a km/h every session.

3.5 Core Exercises - Core strength training is used to benefit performance and maintenance of good posture during running (Sato, Mokha, 2009), (Stanton et al., 2004). The core exercises were performed at the end as the lower body movements produced sufficient activity in the core muscles, therefore these were additional (Martuscello *et al.*, 2013).

Plank along with ab wheel rollouts were chosen for their effectiveness in developing core strength (Tong, Wu and Nie, 2014), (Willardson, 2014). 2 sets felt appropriate for the client (Willardson, 2014), these sets remained within 6-8 rep range to increase strength (Baechle and Earle, 2008).

For progression in the plank, time was increased, ab wheel rollouts progressed by adding 1 repetition. This progressive overload occurred every 2 workouts to effectively develop core strength (Willardson, 2014).

3.6 Cool Down - Sessions were concluded with a cool-down to transition the body back to resting levels, to prevent complications such as blood pooling, too fast a drop in BP (Hargens, Edwards, et al., 2022). This was 5 minutes on the cross-trainer machine followed by 5 minutes of static stretches, to reduce the potential risks of muscle stiffness (Nakamura *et al.*, 2020).

3 Static Stretches were chosen to stretch the muscles worked and were held for 60 seconds each, due to it being more effective at relaxing and increasing ROM in the targeted muscle than shorter hold of 15 seconds (Armiger, Martyn 2010).

4. Reflections

Did I have to modify exercises? - Roedd angen i mi addasu cyfaint y treadmill intervals, gan fod 10 set yn ymddangos yn ormod i'r cleient ar y cyflymder ar y pryd.

Did I adjust the programme for any reason? - Wnes i cynnwys mwy o amser ymlacio rhwng sets, wrth myfyrio faint sydd angen ar angen ymarferion cryfder i gymharu â hypertrophy.

How did I ensure progressive overload throughout? - Wnes i sicrhau gorlwytho cynyddol gydol trwy'r rhaglen, wrth asesu RPE y cleient trwy'r sesiwn, pob sesiwn (Haddad, Stylianides et al. 2017). Fe wnaethom symud lan yn y rhan fwyaf o symudiadau cyfansawdd trwy gynyddu pwysau, yna cynyddu'r reps mewn ymarferion ynysu fel y planc ac ab-olwyn. Cafwyd dilyniant mewn RDLs unochrog trwy berfformio'r symudiad gydag ROM llawn ac yna ychwanegu dumbbells ysgafn ym mhob llaw.

How well did the client engage with / enjoy different sessions? - Ar diwedd pob sesiwn cymerais adborth o'r cleient gan gofyn os oedd unrhyw gwestiynau yn ymwneud â'r sesiwn, a thrwy arsylwi ei hwyliau yn ystod ymarferion. Gwrandawodd y cleient yn dda, a mynegodd ei mwynhad trwy gydol pob sesiwn. Yn syth roedd y cleient yn teimlo'n cyfforddus yn siarad, erbyn y trydydd sesiwn dangosodd mwy o hyder yn yr ymarferion, gan ystyried bod hi ddim wedi wneud nhw yn y gorffennol roedd hwn yn braf i gweld.

Gweithiodd y cleient yn galetach yn sesiwn 4 a 5, dywedodd nad oedd unrhyw beth wedi newid y tu allan i'r sesiynau. Efallai fod hyn wedi deillio o fwynhad pellach a theimlo'n agosach at ei nodau. Yn y 5ed sesiwn, roedd y cleient yn dangos diddordeb mewn pethau eraill, gan ofyn cwestiynau am symudedd, hyblygrwydd ac ymarferion i berfformio yn eu hamser eu hunain.

Did the programme work out the way I expected or were there unexpected outcomes? - Effeithiwyd gorlwytho cynyddol hyd yn oed gyda'r defnydd o RPE, cymerodd 2 sesiwn i'r cleient wybod ei bwysau gweithio, gan anelu at RPE o 8/10, efallai roedd hwn lawr i fy sgiliau o esbonio'r dull. Ar ôl hyn teimlodd y cleient yr lefel anhawster gywir.

How did my skills develop through the experience? - Dysgais am y bwysigrwydd o siarad, trafod ac egluro yn gryno, i heb dorri ar draws y cleient, nid oedd unrhyw gŵyn gan y cleient, ond teimlais y byddai hyn yn rhoi profiad gwell. Gwnes yn siŵr i beidio â chymhlethu gwybodaeth trwy siarad mewn pwyntiau bwled. Os oedd popeth yn teimlo'n hawdd i'r cleient i ddeall, yna bydd hi'n hyderus ac yn gyfforddus yn y sesiynau.

What would I change in the future? - Yn y ddyfodol, fyddai'n ceisio cael mwy o ymarfer ac ymchwil mewn 'Interval Training' er mwyn dewis y niferion mwyaf addas i llwyddo mewn nôd penodol, e.e. y gyflymder iawn, yr amser adfer cywir, gan bod rhain yn gallu cael effaith ar y ganlyniad. Wrth ymwchilio, dysgais amdano'r interval amser â argymhellir ar gyfer

dygnwch, sef 2 munud neu fwy, ond wnes i 1 munud, fyddai'n cyfeirio at gyngor arbenigol cyn creu rhaglen yn y dyfodol. Byddaf yn ceisio bod yn fwy bywiog yn fy ysgogiad, trwy wella technegau cymhelliant ac ymchwilio dulliau â tystiolaeth sy'n gweithio gorau mewn gwahanol sefyllfaoedd. Fyddai'n pwysleisio'n gynnar i'r cleient bwysigrwydd eu hadborth gonest, ac esbonio y bydd hyn yn helpu i gyflawni eu nodau. Rwy'n siŵr bod rhain yn bethau a fydd yn gwella gyda hyder a phrofiad.

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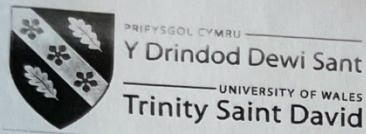
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Please consider the following questions carefully and answer YES or NO.
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| 1. | Has your doctor ever said you have heart trouble? | (tick) | YES | NO |
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| 2. | Have you ever suffered a stroke? | | | / |
| | Comment: | | | / |
| 3. | Do you have pain in your chest or heart region? | | | / |
| | Comment: | | | / |
| 4. | Do you frequently have difficulty breathing? | | | / |
| | Comment: | | | / |
| 5. | Do you often feel faint or have dizzy spells? | | | / |
| | Comment: | | | / |
| 6. | Has your doctor ever said that your blood pressure is too high or too low? | | | / |
| | Comment: | | | / |
| 7. | Do you suffer from asthma or chronic bronchitis? | | | / |
| | Comment: | | | / |
| 8. | Do you suffer from diabetes? | | | / |
| | Comment: | | | / |
| 9. | Do you suffer from epilepsy? | | | / |
| | Comment: | | | / |
| 10. | Have you had recent surgery? | | | / |
| | Comment: | | | / |
| 11. | Do you have a bone or joint problem (e.g. arthritis)? | | | / |
| | Comment: | | | / |
| 12. | Do you have an old or recent injury? | | | / |
| | Comment: | | | / |
| 13. | Do you have any other medical or health condition? | | | / |
| | Comment: | | | / |
| 14. | Do you take any medication? | | | / |
| | Comment: | | | / |

If you answered YES to any of these questions, it is important for you to discuss those questions with your doctor before the fitness assessment. Even if you answered NO to all the questions we recommend that you arrange a general check up with your doctor before commencing your exercise programme.

I, the undersigned, have read and answered the above questions to the best of my knowledge. I have been advised not to proceed with the assessment or embark on a fitness programme until I have discussed any issues with my doctor. I undertake all exercise and fitness testing at the Human performance Laboratory and Fitness Centre freely and voluntarily and understand that the Management and Staff will not be liable for any personal injury arising through participation.

Signature: N. DAVIES

Witness: Date: 14.02.23

Atodiad (b) – Client Consultation Record

Level 2 Gym Instructor Client Consultation Record
 Gym-based programme planning and preparation (D/616/7950)

Learners Name: Cameron James Date: 14-02-2023

Client's Name	Age	Gender (not mandatory)
[REDACTED]	<u>53</u>	<u>Female</u>
Description of Lifestyle, to include: family commitments, occupation, hours of work, hobbies etc.		
Lifestyle - Active, gym classes, 4 sessions a week. Days available - <u>Mon=Best</u> Family Commitments - no urgent matters. Times on days - Occupation - Admin Hobbies on spare days - Work Hours - 37 hrs. A week		
Description of present exercise and physical activity levels (apply FITT where appropriate)		Description of past exercise and physical activity levels (apply FITT where appropriate)
Type - Circuit Training Classes, 5-10K runs on Sunday. Frequency - Mon, Wed, Fri, Sat. Intensity - CT = 10/10 effort run = 7/10 Time - 45 min classes.		Frequency - Intensity - Time - Type - <u>10!</u>
Client's Activity likes and dislikes		
Likes • Circuit style • Improve running endurance • Running ~~endurance~~		Dislikes: Doesn't tend to do isolation work e.g. slow controlled machines or free weights, maybe should to increase strength - Ask Geraint.
Client PARQ completed and informed consent explained? <u>YES/NO</u>		Did the client answer YES to any PARQ questions? YES/NO
Analysis of PARQ responses and actions if applicable		

Atodiad (b) – continued

SMART Goals:
Long Term: (3 months)
Strength improvement -
Build Good eating Habit
Medium Term: (6-8 weeks)
• Use R.A.M.P. principle for warm ups. Don't go maximal on warm ups or cool downs. Use efficient rest days.
Control Nutrition.
Short Term: (Something the client can start immediately)
• Creating awareness of pace, knowing when to pace yourself e.g. for maintaining speed throughout a half marathon.
Other suggested Activities available within the health and fitness facility that may help meet the client's goals and complement the gym programme
✓
Agree Programme Review Dates
Ask Geraint - maybe 4 weeks.

Atodiad (b) – continued

Results from health assessments (conduct the physical measurements/assessments as appropriate to the client goals - minimum of 2 health assessments required)	
Test	Results
Resting Heart Rate	
Blood Pressure	Systolic = 130 Diastolic = 85.
Height and Weight	H = 5'3" W = 9st 4.
BMI	
Waist Circumference	
Waist-to-hip ratio	
Results Analysis: State whether you think the client should be referred to an appropriate professional prior to taking part in physical activity, giving your reasons for referral (you may also use risk analysis tools such as ACSM/Irwin and Morgan)	
no	
Results Analysis: List considerations for the programme based on the above and PARQ.	
N/A.	
Client's readiness to participate (list the client's general feelings towards starting a programme of exercise and any possible obstacles)	
very ready.	
SMART Goals: Indicate below if another party other than the instructor and client is required for goal setting (Please give a reason for their involvement)	

Atodiad (c) – Blood Pressure Standards –

Classification and Management of Blood Pressure for Adults^a

				Initial Drug Therapy	
BP Classification	SBP (mm Hg)	DBP (mm Hg)	Lifestyle Modification	Without Compelling Indication	With Compelling Indications
Normal	<120	And <80	Encourage		
Prehypertension	120–139	Or 80–89	Yes	No antihypertensive drug indicated	Drug(s) for compelling indications ^b
Stage 1 hypertension	140–159	Or 90–99	Yes	Antihypertensive drug(s) indicated	Drug(s) for compelling indications ^b Other antihypertensive drugs, as needed
Stage 2 hypertension	≥160	Or ≥100	Yes	Antihypertensive drug(s) indicated Two-drug combination for most ^c	

The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC7) [Internet]. Bethesda (MD): National High Blood Pressure Education Program; 2004:104. Available at:

<http://www.nhlbi.nih.gov/guidelines/hypertension>

Atodiad (d) – Client Programme Card

Gym programme card

Client Name: Helen Davies

Exercise Goals: Improve Strength, Increasing Running Endurance

Warm up – 10 minutes

Overview of content (including mobility, pulse raising (CV machine))	Equipment and duration	Level/speed	RPE/HR	Adaptation(s) or alternatives
5 Minutes Steady Pace	Cross-Trainer	4	4/10	Treadmill/Watt bike

Activation and Mobilisation Activities: Describe/draw activities in the space below

1. Shoulder Circles – 15 reps both arms – forward and backwards
2. Alternating Forward Lunges with twist – 10 each leg
3. Alternating Side lunges – 10 each side
4. Open + Close Gate (Hip + Groin Mobility) – 3 each leg – both ways
5. Plank Walk-Outs - 5

2. Cardiovascular training - Resistance Training first.

Equipment and approach	Programme timings	Level/speed	RPE/HR	Adaptation(s) or alternatives
Treadmill Intervals	1 minute	8/10	8/10 (10.5km/h)	Cross Trainer
6 Sets Total	Followed by			
	1 minute	4/10	4/10	

Atodiad (d) – continued

1. 1. Resistance training - Resistance Training first

Exercise/machine	Resistance	Reps	Sets	Rest	Adaptation(s) or alternatives
Heavy Leg Press	60kg	8	3	2 mins	Weighted Squat
Weighted Lunges	16kg	8	3	2 mins	Eccentric BW Lunges
Unilateral RDL's	8kg	8	3	2 mins	BW unilateral RDL's
Body weight exercise			Sets/reps/rest		
Plank			2 Sets / 35 secs / 30secs rest		
Ab Wheel			2 Sets / 8 reps / 30 secs rest		

Cool down/flexibility

Cool down (if a re-warm or pulse lowering phase is required, please detail in the space below)	
CV machine	Time and intensity range
Cross Trainer	5 minutes – 3/10 RPE
Stretches Highlighted Below	Hold each stretch for 60 seconds Flexibility Section should last Approx. 5 minutes
Post-workout stretches (circle as applicable)	

PT Notes -

Client Feedback -



