

## SFHCHDFG2

Assess individuals' state of physical health and fitness and define the appropriate risk stratification for cardiac rehabilitation



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### Overview

This standard is about assessing individuals' state of physical health and fitness and defining the appropriate risk stratification as part of their cardiac rehabilitation.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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### Performance criteria

*You must be able to:*

- P1 establish the individual's medical history through discussion and consulting any available medical records
- P2 establish the individual's current and previous level of physical activity
- P3 collect information on the individual's modifiable risk factors
- P4 collect physical measurements
- P5 establish any limitations on the individual's level of physical activity (eg joint or muscle weakness)
- P6 collect information on the individual's non-modifiable risk factors
- P7 interpret information obtained from assessment of cardiopulmonary capacity (eg stair test, shuttle test)
- P8 interpret information obtained from appropriate methods of monitoring to ensure safety (e.g. heart rate, blood pressure, ECG recordings)
- P9 define the individual's cardiac risk stratification (i.e. low, medium or high) through interpretation of relevant data and observations
- P10 refer individuals with special physical or cardiological needs to the appropriate specialist for assessment
- P11 record outcomes of the assessment clearly and accurately on appropriate documentation

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### Knowledge and understanding

*You need to know and understand:*

- K1 how to ask questions, listen carefully and summarise back
- K2 how to adapt communication styles in ways which are appropriate to different people (e.g. culture, language or special needs)
- K3 the importance of obtaining full and accurate information about individuals and how to do so
- K4 the principle of confidentiality and what information may be given to whom
- K5 basic cardiovascular anatomy, physiology and biochemistry
- K6 the coronary heart disease process and major diagnoses (e.g. angina, myocardial infarction, heart failure)
- K7 research-based evidence of the impact of environmental, social, lifestyle and behavioural factors on the incidence of CHD
- K8 the potential bio-psycho-social impact of CHD on individuals' and their families
- K9 how to define cardiac risk stratification (ie low, medium or high) and its role in cardiac rehabilitation
- K10 drugs commonly used in the treatment of CHD and their potential side effects
- K11 the implications of modifiable risk factors (e.g. smoking status, diet, sedentary lifestyle)
- K12 how to interpret information obtained from assessment of cardiopulmonary capacity (e.g. stair test, shuttle test)
- K13 how to interpret information obtained from appropriate methods of monitoring to ensure safety (e.g. heart rate, blood pressure, ECG recordings)
- K14 normal and abnormal cardiovascular and pulmonary responses to exercise
- K15 how to refer individuals for specialist assessment

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### Additional Information

#### External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB2 Assessment of health and wellbeing needs and care planning

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**Key words** coronary heart disease

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