

# Supervised Exercise Information

**The aim of the supervised exercise session is to promote optimal function by improving strength, stability and mobility.**

## What the exercise session involves:

- A member of the physiotherapy team will induct you to an individualised programme of exercises. As you improve, the exercises will be progressed as required to help you reach your goals.
- Within the gym space there will be up to 12 other people exercising and this session is supervised by up to 2 members of staff.
- Whilst attending physiotherapy, if your health or prescribed medication changes you must inform the supervising staff immediately. Please remember to bring any inhalers/ GTN spray with you.
- If at any time you are having difficulty with a particular exercise or have any problems with your rehabilitation, please speak to the supervising staff so that alternative exercises or treatments can be discussed.
- During your exercise sessions, **please only perform the exercises that you have been inducted on and instructed to use.** You will gain further benefit from your rehabilitation if you also practice regularly at home.
- You should make yourself aware of any rules and instructions, including warning notices and follow them. Exercise carries its own risks; you should not carry out any exercises which you have been told are not suitable for you.
- On completion of your allocated sessions your goals will be reviewed and the most appropriate action for future management will be agreed.
- You should wear appropriate footwear i.e. soft sole/trainers and loose fitting comfortable clothing that will allow you to exercise freely.
- If you fail to attend any session without prior contact we will assume you no longer require your sessions and you may be discharged back to your GP/Consultant.
- If you notify us in advance that you are unable to attend any session, this may be counted as one of your allocated number of sessions. Please liaise with a member of staff if this occurs. Additional sessions can only be granted if class capacity allows.

- The supervised exercise session you are participating in is: .....

and will take place at: .....

Start date: .....

Time: .....

Contact number: .....

Patient Name and NHS Number: .....

I have read and agree to the above ..... (Patient Signature)

..... (Date)

**If you have any comments about this leaflet or the service you have received you can contact :**

MSK Out-patient Physiotherapy Department  
Huddersfield Royal Infirmary

Telephone: 01484 905380

[www.cht.nhs.uk](http://www.cht.nhs.uk)

**If you would like this information in another format or language contact the above.**

Potřebujete-li tyto informace v jiném formátu nebo jazyce,  
obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych  
informacji w innym formacie lub wersji językowej,  
prosimy skontaktować się z nami, korzystając z ww.  
danych kontaktowych

ਬ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਚੂਰ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ,  
ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو  
برائے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم  
المذكور أعلاه"