# MY WEEKLY EXERCISE LOG



		AEROBIC EXERCISE		STRENGTH TRAINING		STRETCHING & BALANCE	
Day of week / Date	Did You Exercise?	Duration (# of minutes)	RPE (exertion level)	Duration (# of minutes)	RPE (exertion level)	Duration (# of minutes)	RPE (exertion level)
Monday /							
Tuesday /							
Wednesday /							
Thursday/							
Friday /							
Saturday /							
Sunday /							
Goals:		30-35 mins 4x weekly	Mod. / Intense RPE: 6-8	15-20 mins 2x weekly	Moderate RPE: 4-6	10-15 mins 2x weekly	Light RPE: 2-3
Examples:		Aerobics classes, jogging, biking, swimming, cardio equipment		Weight machines, resistance bands, free weights, push-ups		Stretching, Tai Chi, Light Yoga	



ALZHEIMER'S \\ ASSOCIATION

Stretching, Balance, Range of Motion Goal: RPE = 2-3

Strength Training Goal: RPE = 4-6

# Ratings of Perceived Exertion (RPE)

**Aerobic Exercise Goal:** RPE = 6-8

# 1. Okay to go!

• "I feel great, and I'm breathing normally."

# 2. Very, very light intensity

•"I feel good. I don't even feel like I'm exerting myself."

## 3. Very light intensity

• "This is fun. I feel like I could go forever."

### 4. Light intensity

•"I can tell I'm exercising, I feel good."

### 5. Moderate intensity

•"I'm sweating a little. I'm working."

### 6. Moderate to intense

•"I'm exercising harder than I thought I would. I'm getting a workout. I can talk but I prefer not to."

### 7. Intense

•"The workout is hard, but I can take it. I do not want to talk."

# 8. Very intense

•"This is difficult. I'm breathing hard. I'm not sure how long I can go. I am unable to talk comfortably."

### 9. Very, very intense

•"I'm very uncomfortable. I don't think I should do this very long. I should slow down."

### 10. Maximum intensity

•"I'm completely exhausted. I must slow down immediately."