 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-E-66-P02-S12
	Effective Date:	06-30-2022
	Document Type:	Standard Operating Procedure
	Page Number:	1 of 3
	Department/Section:	Physical Medicine & Fitness Center
	Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>

### **PURPOSE:**

To describe in detail the steps in the operation of the gym equipment to ensure accuracy and safety while using the machine.

### **SCOPE:**

Applies to all Physical Medicine & Fitness Center Staff of Dr. Pablo O. Torre Memorial Hospital (DPOTMH)

### **RESPONSIBLE PERSON:**

Physical Therapist, Fitness Instructor

### **PROCEDURE:**


- 1 Physiatrist clears the client as candidate for a fitness program.
- 2 PT/FI will assess the client's fitness level and will formulate the exercise program.
- 3 FI/PT checks the client's BP and HR if necessary prior to the start of exercise.
- 4 After warming up, the client may proceed to the machine if it is recommended by the PT/FI or if it is in the client's fitness program.

#### **4.1 For LEG CURL**

- 4.1.1 Use pull pin and adjust pads to lowered position;
- 4.1.2 Put the prescribed weight recommended by the PT/FI.
- 4.1.3 Place feet under the upper roller pads;
- 4.1.4 Slowly flex knees to a curled position and return slowly to starting position;
- 4.1.5 Instruct client to exhale deeply while bending knees to curled position.


#### **4.2 For LEG EXTENSION**

- 4.2.1 Adjust seat pads to upright position;
- 4.2.2 Put the prescribed weight recommended by PT/FI;
- 4.2.3 Sit down and place feet behind the roller pads;



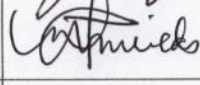


 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-E-66-P02-S12
	Effective Date:	06-30-2022
	Document Type:	Standard Operating Procedure
	Page Number:	2 of 3
	Department/Section:	Physical Medicine & Fitness Center
	Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>


- 4.2.4 Adjust lower roller pads to be positioned above ankles;
- 4.2.5 Fully extend legs without locking knees and slowly return to start position.
- 4.2.6 Instruct client to exhale deeply while extending both knees.

- 5 Instruct the client to complete the repetitions and sets prescribed by the PT/FI on his/her program.
- 6 Remind the client to rest 15-30 seconds between sets and three seconds hold, two seconds rest for each cycle.

 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-E-66-P02-S12
	Effective Date:	06-30-2022
	Document Type:	Standard Operating Procedure
	Page Number:	3 of 3
	Department/Section:	Physical Medicine & Fitness Center
	Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>


**APPROVAL:**

	Name/Title	Signature	Date
Prepared by:	<b>MA. CLAUDETTE L. SOLANCHO, PTRP</b> PM&FC Staff		7/11/22
	<b>SUZETTE M. DOMINGO, PTRP</b> PM&FC Staff		7/11/22
Verified:	<b>MA. TERESA O. ANIERDES, PTRP, MBA-HA</b> PM&FC Supervisor		7/11/22
	<b>JOHN ANDREW B. SANCHEZ, MD, FPARM</b> Physiatrist		7/11/22
Reviewed by:	<b>DENNIS C. ESCALONA, RN, MN, FPSQua</b> Quality Assurance Supervisor		7/11/2022
Recommending Approval:	<b>ROSARIO D. ABARING, RN, MAN, PhD</b> Ancillary Services Division Officer		
	<b>FREDERIC IVAN L. TING, MD</b> OIC-Total Quality Division		
Final approved by:	<b>GENESIS GOLDI D. GOLINGAN</b> President & CEO		

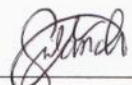
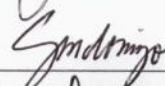
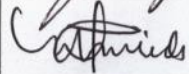


 <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p> <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-E-66-P02-WI12
	Effective Date:	06-30-2022
	Document Type:	Work Instruction
	Page Number:	1 of 2
	Department/Section:	Physical Medicine & Fitness Center
	Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>

KEY TASKS	PERSON RESPONSIBLE
1. Clears the client as candidate for a fitness program.	Physiatrist
2. Assesses the client's fitness level, vital signs and formulates the exercise program.	Physical Therapist
3. Proceeds to the machine after warming up if it is recommended by the PT/FI or if it is in the client's fitness program.	
4. Instruct the client to complete the repetitions and sets prescribed by the PT/FI on his/her program.	
5. Reminds the client to rest 15 - 30 seconds between sets and three seconds hold, two seconds rest for each cycle.	



 <p><b>DR. PABLO O. TORRE MEMORIAL HOSPITAL</b></p> <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-E-66-P02-WI12
	Effective Date:	06-30-2022
	Document Type:	Work Instruction
	Page Number:	2 of 2
	Department/Section:	Physical Medicine & Fitness Center
	Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>

**APPROVAL:**

	Name/Title	Signature	Date
Prepared by:	<b>MA. CLAUDETTE L. SOLANCHO, PTRP</b> PM&FC Staff		7/11/22
	<b>SUZETTE M. DOMINGO, PTRP</b> PM&FC Staff		7-11-22
Verified:	<b>MA. TERESA O. ANIERDES, PTRP, MBA-HA</b> PM&FC Supervisor		7/11/22
	<b>JOHN ANDREW B. SANCHEZ, MD, FPARM</b> Physiatrist		7/11/22
Reviewed by:	<b>DENNIS C. ESCALONA, RN, MN, FPSQua</b> Quality Assurance Supervisor		7/11/2022
Recommending Approval:	<b>ROSARIO D. ABARING, RN, MAN, PhD</b> Ancillary Services Division Officer		
	<b>FREDERIC IVAN L. TING, MD</b> OIC-Total Quality Division		
Final approved by:	<b>GENESIS GOLDI D. GOLINGAN</b> President & CEO		

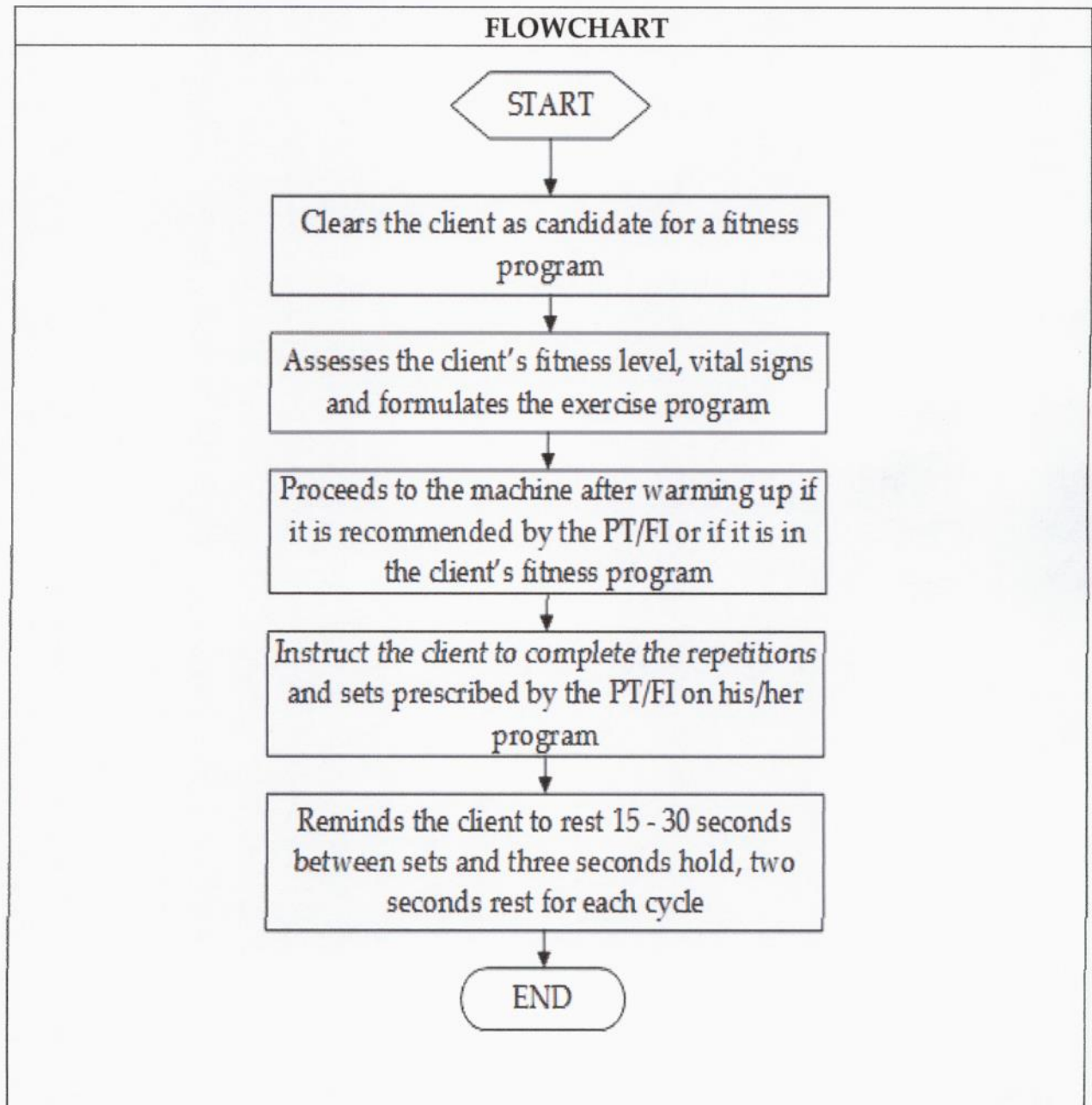



DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

B.S. Aquino Drive,  
Bacolod City,  
Negros Occidental,  
6100


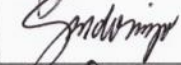

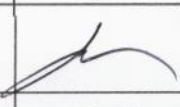

Document Code:	DPOTMH-E-66-P02-FC12
Effective Date:	06-30-2022
Document Type:	Flowchart
Page Number:	1 of 2
Department/Section:	Physical Medicine & Fitness Center
Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>

### FLOWCHART



 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-E-66-P02-FC12
	Effective Date:	06-30-2022
	Document Type:	Flowchart
	Page Number:	2 of 2
	Department/Section:	Physical Medicine & Fitness Center
	Document Title:	<b>GYM EQUIPMENT PROTOCOL: (FIT 3 MULTI-GYM MACHINE-LEG)</b>

**APPROVAL:**

	Name/Title	Signature	Date
Prepared by:	<b>MA. CLAUDETTE L. SOLANCHO, PTRP</b> PM&FC Staff		7/11/22
	<b>SUZETTE M. DOMINGO, PTRP</b> PM&FC Staff		7-11-22
Verified:	<b>MA. TERESA O. ANIERDES, PTRP, MBA-HA</b> PM&FC Supervisor		7/11/22
	<b>JOHN ANDREW B. SANCHEZ, MD, FPARM</b> Physiatrist		7/11/22
Reviewed by:	<b>DENNIS C. ESCALONA, RN, MN, FPSQua</b> Quality Assurance Supervisor		7/11/2022
Recommending Approval:	<b>ROSARIO D. ABARING, RN, MAN, PhD</b> Ancillary Services Division Officer		
	<b>FREDERIC IVAN L. TING, MD</b> OIC-Total Quality Division		
Final approved by:	<b>GENESIS GOLDI D. GOLINGAN</b> President & CEO		