

# PATIENT PROCEDURE FOR THE 6 WEEK HYDROTHERAPY POOL PROGRAMME



## **Please...**

- Shower before coming to the pool.
- Bring your own towel and swimming togs if you have them. If you do not have your own they can be provided.
- Be punctual and stick to the time you have been given. If you are unable to attend or keep that time please let us know.
- Shower after the pool to remove chlorine.

**Do not enter the pool unless a supervisor is present.**

**DO NOT STAY IN THE POOL LONGER THAN 20 MINUTES**

## **IMPORTANT!**

Do not leave valuables in the change room. Take them to the supervisor in the pool area.

*Let staff know if you feel unwell or faint.*

- ~ It is advisable to have a drink after being in the pool. Spend 10 minutes cooling down.
- ~ Do not enter the pool after consuming alcohol
- ~ No Smoking

## **Please do not use the pool if you have any of the following conditions:**

- ~ Infected wounds
- ~ Infected skin
- ~ Open Sores
- ~ Tinea pedis (athletes foot)
- ~ Incontinence of urine or faeces
- ~ Severe peripheral arterial disease
- ~ Chest infection
- ~ Severe epilepsy
- ~ Chlorine sensitivity
- ~ Fever
- ~ Cardiac Instability

**Please notify Physiotherapist if you feel any pain while exercising**

*Please phone if you need to change your appointment or cancel.*

*The pool number is 546-1956 between 9am-11am or phone the physiotherapy department on 546-1801 after 11am.*

*Physio staff will allocate your time to another patient if you fail to keep your appointment.*



Nelson Marlborough  
District Health Board