

Supplementary Tables

Supplementary Table 1: Guideline Comparisons – Assessment

<i>Clinical Status</i>	Australian^{1,2}	European³	American⁴	Survey results[§]
Review Medical History	✓	✓	✓	
Review Referral/Discharge Reports	✓		✓	75%
Review of Co-morbidities and Smoking Status	✓	✓	✓	
Adherence to Medical Regime	✓	✓	✓	
Assess Cognitive Function			✓	
Assess Psychosocial Health	✓	✓	✓	
Assess Health-Related Quality of Life	✓		✓	
Current Physical Activity Levels	✓	✓	✓	
<i>Physical Assessment</i>				
Cardiac Imaging (Echocardiography)		✓	✓	11%
Muscular Strength Assessment				18%
Peak Aerobic Exercise Capacity		✓	✓	13%
Physical Exam and Review of Systems		✓	✓	51%
Physical Function	✓			91%
Resting Radial Pulse and /or ECG	✓	✓	✓	58%

Supplementary Table 2: Guideline Comparisons – Exercise Prescription

	Australian ^{1,2}	European ³	American ⁴	Survey results [§]
Guidelines Specific to each CV		✓		
Diagnosis				
Aerobic Exercise (AE) Recommended	✓	✓	✓	74%
AE Frequency	Most days	3-7 days/wk	3-5 days/wk	1-2 days /wk ^{5,6}
AE Intensity	Light-moderate	Light-vigorous 50-80% VO _{2max} /HR _{max} 10-14 RPE	Light-vigorous 50-80% VO _{2max}	Moderate (70%)
AE Volume	≥ 30 mins	30-60 min/day ≥ 150 min/wk	20-60 min	46-60 min ^{5,6}
AE Type	Walking	Walking, jogging, cycling, swimming, rowing, stair climbing, elliptical trainers, dancing	Walking, treadmill, cycling, rowing, stair climbing, arm/leg ergometry, or others as appropriate	Cycling, treadmill, walking (>65%)

	Australian ^{1,2}	European ³	American ⁴	Survey results [§]
Resistance Exercise (RE) Recommended	✓	✓	✓	65%
RE Frequency		2 days/ wk	2-3 days/wk	1-2 days /wk ^{5,6}
RE Intensity		Light-moderate 30-60% 1RM RPE 12-15	To moderate fatigue	Moderate (67%)
RE Volume		1 set 8-25 reps	1-3 sets 10-15 reps 8-10 whole body exercises	
RE Type			Bodyweight, resistance bands, free weights, pulleys, machines	Free weights, resistance bands, bodyweight (>65%)

[§], prevalence of responses from this survey; CV, cardiovascular; AE, aerobic exercise; VO_{2max}, maximal oxygen uptake; HR_{max}, maximal heart rate; RE, resistance exercise; 1RM, 1 repetition maximum; RPE, rate of perceived exertion.

Supplementary References (Table 1 and 2):

1. National Heart Foundation of Australia and Australian Cardiac Rehabilitation Association. Recommended Framework for Cardiac Rehabilitation. In: National Heart Foundation of Australia, (ed); 2004.
2. Woodruffe S, Neubeck L, Clark RA, Gray K, Ferry C, Finan J, Sanderson S, Briffa TG. Australian Cardiovascular Health and Rehabilitation Association (ACRA) core components of cardiovascular disease secondary prevention and cardiac rehabilitation 2014. *Heart, Lung and Circulation* 2015;24(5):430-441.
3. Piepoli MF, Corra U, Benzer W, Bjarnason-Wehrens B, Dendale P, Gaita D, McGee H, Mendes M, Niebauer J, Zwisler A-DO. Secondary prevention through cardiac rehabilitation: from knowledge to implementation. A position paper from the Cardiac Rehabilitation Section of the European Association of Cardiovascular Prevention and Rehabilitation. *European Journal of Cardiovascular Prevention & Rehabilitation* 2010;17(1):1-17.
4. Balady GJ, Williams MA, Ades PA, Bittner V, Comoss P, Foody JM, Franklin B, Sanderson B, Southard D. Core components of cardiac rehabilitation/secondary prevention programs: 2007 update: A scientific statement from the american heart association exercise, cardiac rehabilitation, and prevention committee, the council on clinical cardiology; the councils on cardiovascular nursing, epidemiology and prevention, and nutrition, physical activity, and metabolism; and the american association of cardiovascular and pulmonary rehabilitation. *Circulation* 2007;115(20):2675-2682.
5. Abell B, Glasziou P, Briffa T, Hoffmann T. Exercise training characteristics in cardiac rehabilitation programmes: a cross-sectional survey of Australian practice. *Open Heart* 2016;3(1).
6. Hannan AL, Hing W, Climstein M, Coombes JS, Furness J, Jayasinghe R, Byrnes J. Australian cardiac rehabilitation exercise parameter characteristics and perceptions of high-intensity interval training: a cross-sectional survey. *Open access journal of sports medicine* 2018;9:79-89.

Supplementary Table 3: Preparation of statistical categories for analysis

	Original	Revised and collapsed
Remoteness	Remoteness Area (RA) 1	Metropolitan
	RA 2-5	Regional and Remote
Exercise prescription	Always	Always
	Mostly, sometimes, rarely, never	Less frequently-never
Exercise intensity	Vigorous, maximal	Vigorous-maximal
	Very light, light, moderate	Very light-moderate

Supplementary Table 4: Effect of remoteness on service and patient characteristics

Table 4a: Influence of remoteness on the prevalence of patient age ranges

Age range	Remoteness	Prevalence	OR (95% CI)	p-value
50	Metropolitan	1.1%	0.26 (0.03 to 2.55)	0.325
	Regional	4.1%		
50-59	Metropolitan	20.7%	3.59 (1.27 to 10.15)	0.014*
	Regional	6.8%		
60-69	Metropolitan	45.7%	1.46 (0.78 to 2.74)	0.269
	Regional	36.5%		
70+	Metropolitan	27.2%	0.44 (0.23 to 0.84)	0.015*
	Regional	45.9%		

The prevalence column represents the percentage of services within metropolitan (n=92) and regional (n=74) areas that have $\geq 50\%$ of enrolled patients within the specified age range. Odds ratios were calculated with metropolitan services as the reference category.

Table 4b: Influence of remoteness on the prevalence of patient enrolment timepoint

Enrolment timepoint	Remoteness	Prevalence	OR (95% CI)	p-value
Inpatient	Metropolitan	19.6%	17.76 (2.31 to 136.49)	<0.001***
	Regional	1.4%		
< 12 weeks post-event	Metropolitan	57.6%	0.88 (0.47 to 1.63)	0.751
	Regional	60.8%		
12-52 weeks post-event	Metropolitan	12.0%	1.12 (0.43 to 2.95)	1.000
	Regional	10.8%		
1+ years post-event	Metropolitan	9.8%	2.56 (0.67 to 9.85)	0.229
	Regional	4.1%		

The prevalence column represents the percentage of services within metropolitan (n=92) and regional (n=74) areas that have ≥50% of enrolled patients within the specified time range. Odds ratios were calculated with metropolitan services as the reference category.

Table 4c: Influence of remoteness on the prevalence of patient diagnoses.

Diagnosis	Remoteness	Prevalence	OR (95% CI)	p-value
Heart Failure	Metropolitan	6.5%	5.09 (0.60 to 43.28)	0.133
	Regional	1.4%		
Myocardial Infarction	Metropolitan	33.7%	0.94 (0.49 to 1.79)	0.871
	Regional	35.1%		
Revascularisation	Metropolitan	51.1%	0.80 (0.43 to 1.47)	0.532
	Regional	56.8%		
Other CAD	Metropolitan	14.1%	5.92 (1.29 to 27.16)	0.013*
	Regional	2.7%		

The prevalence column represents the percentage of services within metropolitan (n=92) and regional (n=74) areas that have ≥50% of enrolled patients with the specified diagnosis. Odds ratios were calculated with metropolitan services as the reference category. CAD, Coronary Artery Disease.

Table 4d: Influence of remoteness on the prevalence of personnel supervising exercise

Supervisor type	Remoteness	Prevalence	OR (95% CI)	p-value
Nurse supervisor	Metropolitan	68.5%	0.75 (0.38 to 1.49)	0.492
	Regional	74.3%		
Physiotherapist supervisor	Metropolitan	70.7%	1.38 (0.72 to 2.66)	0.405
	Regional	63.5%		
Exercise Physiologist supervisor	Metropolitan	37.0%	1.58 (0.81 to 3.08)	0.187
	Regional	27.0%		

The prevalence column represents the percentage of services within metropolitan (n=92) and regional (n=74) areas that have the specified supervisor. Odds ratios were calculated with metropolitan services as the reference category.

Supplementary Table 5: Factors affecting screening and testing procedures

Table 5a: Influence of guideline use for aerobic exercise intensity prescription on the prevalence of testing and screening procedures

Assessment type	AT guidelines used	Prevalence	OR (95% CI)	p-value
Cardiac Function Testing	Yes	10.8%	1.00 (0.31 to 3.19)	1.000
	No	10.8%		
Aerobic Fitness Testing	Yes	15.5%	3.22 (0.72 to 14.33)	0.176
	No	5.4%		
Physical function	Yes	94.6%	4.83 (1.68 to 13.91)	0.005**
	No	78.4%		
Strength Testing	Yes	19.6%	2.01 (0.66 to 6.13)	0.336
	No	10.8%		
Resting ECG/HR	Yes	61.5%	2.10 (1.01 to 4.35)	0.062
	No	43.2%		
Physical Exam	Yes	54.7%	2.23 (1.06 to 4.72)	0.043*
	No	35.1%		
Review of Physician Results	Yes	78.4%	1.96 (0.90 to 4.28)	0.092
	No	64.9%		

The prevalence column represents the percentage of services using the specified assessment that did (n=148) or did not (n=37) use aerobic training guidelines to guide their aerobic intensity prescription. Odds ratios were calculated with 'Yes' guideline use as the reference category. AT, aerobic training; ECG, electrocardiogram; HR, heart rate.

Table 5b: Influence of reasons for resistance exercise intensity prescription on the prevalence of testing and screening procedures

Assessment type	RT guidelines used	Prevalence	OR (95% CI)	p-value																																							
Cardiac Function Testing	Yes	11.1%	1.13 (0.41 to 3.09)	1.000																																							
	No	10.0%			Aerobic Fitness Testing	Yes	15.9%	2.08 (0.74 to 5.83)	0.177	No	8.3%	Physical function	Yes	96.8%	7.63 (2.34 to 24.81)	<0.001***	No	80.0%	Strength Testing	Yes	21.4%	2.46 (0.95 to 6.31)	0.066	No	10.0%	Resting ECG/HR	Yes	65.1%	2.44 (1.30 to 4.57)	0.007**	No	43.3%	Physical Exam	Yes	55.6%	1.88 (1.00 to 3.50)	0.060	No	40.0%	Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)
Aerobic Fitness Testing	Yes	15.9%	2.08 (0.74 to 5.83)	0.177																																							
	No	8.3%			Physical function	Yes	96.8%	7.63 (2.34 to 24.81)	<0.001***	No	80.0%	Strength Testing	Yes	21.4%	2.46 (0.95 to 6.31)	0.066	No	10.0%	Resting ECG/HR	Yes	65.1%	2.44 (1.30 to 4.57)	0.007**	No	43.3%	Physical Exam	Yes	55.6%	1.88 (1.00 to 3.50)	0.060	No	40.0%	Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)	0.066	No	66.7%				
Physical function	Yes	96.8%	7.63 (2.34 to 24.81)	<0.001***																																							
	No	80.0%			Strength Testing	Yes	21.4%	2.46 (0.95 to 6.31)	0.066	No	10.0%	Resting ECG/HR	Yes	65.1%	2.44 (1.30 to 4.57)	0.007**	No	43.3%	Physical Exam	Yes	55.6%	1.88 (1.00 to 3.50)	0.060	No	40.0%	Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)	0.066	No	66.7%											
Strength Testing	Yes	21.4%	2.46 (0.95 to 6.31)	0.066																																							
	No	10.0%			Resting ECG/HR	Yes	65.1%	2.44 (1.30 to 4.57)	0.007**	No	43.3%	Physical Exam	Yes	55.6%	1.88 (1.00 to 3.50)	0.060	No	40.0%	Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)	0.066	No	66.7%																		
Resting ECG/HR	Yes	65.1%	2.44 (1.30 to 4.57)	0.007**																																							
	No	43.3%			Physical Exam	Yes	55.6%	1.88 (1.00 to 3.50)	0.060	No	40.0%	Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)	0.066	No	66.7%																									
Physical Exam	Yes	55.6%	1.88 (1.00 to 3.50)	0.060																																							
	No	40.0%			Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)	0.066	No	66.7%																																
Review of Physician Results	Yes	80.2%	2.02 (1.01 to 4.04)	0.066																																							
	No	66.7%																																									

The prevalence column represents the percentage of services using the specified assessment that did (n=126) or did not (n=60) use resistance training guidelines to guide their resistance intensity prescription. Odds ratios were calculated with 'Yes' guideline use as the reference category. RT, resistance training; ECG, electrocardiogram; HR, heart rate.

Table 5c: Influence of remoteness on the prevalence of testing and screening procedures

Assessment type	Remoteness	Prevalence	OR (95% CI)	p-value
Cardiac Function Testing	Metropolitan	13.0%	1.70 (0.61 to 4.77)	0.452
	Regional	8.1%		
Aerobic Fitness Testing	Metropolitan	20.7%	3.59 (1.27 to 10.15)	0.014*
	Regional	6.8%		
Physical function	Metropolitan	91.3%	0.93 (0.31 to 2.80)	1.000
	Regional	91.9%		
Strength Testing	Metropolitan	28.3%	5.44 (1.97 to 15.00)	0.001**
	Regional	6.8%		
Resting ECG/HR	Metropolitan	68.5%	2.29 (1.22 to 4.32)	0.011*
	Regional	48.5%		
Physical Exam	Metropolitan	51.1%	0.99 (0.54 to 1.83)	1.000
	Regional	51.4%		
Review of Physician Results	Metropolitan	80.4%	1.63 (0.79 to 3.35)	0.201
	Regional	71.6%		

The prevalence column represents the percentage of services within metropolitan (n=92) and regional (n=74) areas that used the specified assessment. Odds ratios were calculated with metropolitan services as the reference category.

Table 5d: Influence of a registered nurse supervising exercise on the prevalence of testing and screening procedures

Assessment type	Exercise supervisor	Prevalence	OR (95% CI)	p-value
Cardiac Function	Nurse supervisor on staff	8.5%	0.48 (0.19 to 1.24)	0.130
	Testing	Nurse supervisor absent		
Aerobic Fitness	Nurse supervisor on staff	10.0%	0.41 (0.17 to 0.96)	0.058
	Testing	Nurse supervisor absent		
Physical function	Nurse supervisor on staff	93.1%	1.92 (0.68 to 5.45)	0.256
		Nurse supervisor absent		
Strength Testing	Nurse supervisor on staff	16.2%	0.71 (0.32 to 1.56)	0.407
		Nurse supervisor absent		
Resting ECG/HR	Nurse supervisor on staff	56.9%	0.86 (0.45 to 1.62)	0.746
		Nurse supervisor absent		
Physical Exam	Nurse supervisor on staff	55.4%	1.92 (1.01 to 3.63)	0.055
		Nurse supervisor absent		
Review of Physician Results	Nurse supervisor on staff	72.3%	0.50 (0.22 to 1.12)	0.097
		Nurse supervisor absent		

The prevalence column represents the percentage of services using the specified assessment that did (n=130) or did not (n=56) have a nurse supervise the exercise component. Odds ratios were calculated with 'Nurse supervisor on staff' as the reference category. ECG, electrocardiogram; HR, heart rate.

Table 5e: Influence of a physiotherapist supervising exercise on the prevalence of testing and screening procedures

Assessment type	Exercise supervisor	Prevalence	OR (95% CI)	p-value
Cardiac Function Testing	Physio supervisor on staff	9.6%	0.70 (0.27 to 1.82)	0.461
	Physio supervisor absent	13.1%		
Aerobic Fitness Testing	Physio supervisor on staff	7.2%	0.22 (0.09 to 0.53)	0.001**
	Physio supervisor absent	26.2%		
Physical function	Physio supervisor on staff	92.0%	1.26 (0.43 to 3.63)	0.782
	Physio supervisor absent	90.2%		
Strength Testing	Physio supervisor on staff	14.4%	0.52 (0.24 to 1.11)	0.103
	Physio supervisor absent	24.6%		
Resting ECG/HR	Physio supervisor on staff	60.0%	1.27 (0.69 to 2.36)	0.527
	Physio supervisor absent	54.1%		
Physical Exam	Physio supervisor on staff	51.2%	1.08 (0.59 to 2.00)	0.876
	Physio supervisor absent	49.2%		
Review of Physician Results	Physio supervisor on staff	76.0%	1.03 (0.51 to 2.11)	1.000
	Physio supervisor absent	75.4%		

The prevalence column represents the percentage of services using the specified assessment that did (n=125) or did not (n=61) have a physio supervise the exercise component. Odds ratios were calculated with 'Physio supervisor on staff' as the reference category. ECG, electrocardiogram; HR, heart rate.

Table 5f: Influence of an exercise physiologist supervising exercise on the prevalence of testing and screening procedures

Assessment type	Exercise supervisor	Prevalence	OR (95% CI)	p-value
Cardiac Function Testing	EP supervisor on staff	10.7%	0.99(0.36 to 2.74)	1.000
	EP supervisor absent	10.8%		
Aerobic Fitness Testing	EP supervisor on staff	26.8%	4.39 (1.83 to 10.53)	0.001**
	EP supervisor absent	7.7%		
Physical function	EP supervisor on staff	91.1%	0.94 (0.31 to 2.85)	1.000
	EP supervisor absent	91.5%		
Strength Testing	EP supervisor on staff	35.7%	5.00 (2.27 to 11.04)	<0.001***
	EP supervisor absent	10.0%		
Resting ECG/HR	EP supervisor on staff	60.7%	1.17 (0.62 to 2.22)	0.746
	EP supervisor absent	56.9%		
Physical Exam	EP supervisor on staff	55.4%	1.32 (0.70 to 2.47)	0.426
	EP supervisor absent	48.5%		
Review of Physician Results	EP supervisor on staff	78.6%	1.25 (0.59 to 2.64)	0.709
	EP supervisor absent	74.6%		

The prevalence column represents the percentage of services using the specified assessment that did (n=125) or did not (n=61) have an EP supervise the exercise component. Odds ratios were calculated with 'EP supervisor on staff' as the reference category. EP, exercise physiologist; ECG, electrocardiogram; HR, heart rate.

Supplementary Table 6: Factors affecting exercise prescription

Table 6a: Influence of guideline use on exercise prevalence and intensity prescription

Exercise prescription characteristic	Guidelines used	n	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	AT guidelines used	151	61.6%	1.89 (0.91 to 3.90)	0.096
	AT guidelines not used	37	45.9%		
'Always' Aerobic Exercise	AT guidelines used	151	79.5%	2.64 (1.23 to 5.68)	0.018*
	AT guidelines not used	37	59.5%		
AT moderate intensity or lower	AT guidelines used	151	80.0%	1.92 (0.54 to 6.81)	0.419
	AT guidelines not used	37	88.5%		
'Always' both Aerobic and Resistance	RT guidelines used	126	64.3%	1.92 (1.03 to 3.59)	0.055
	RT guidelines not used	60	48.3%		
'Always' Resistance Exercise	RT guidelines used	126	69.8%	1.77 (0.94 to 3.35)	0.099
	RT guidelines not used	60	56.7%		
RT moderate intensity or lower	RT guidelines used	126	82.0%	2.37 (0.77 to 7.28)	0.156
	RT guidelines not used	60	91.5%		

The prevalence column represents the percentage of services using the specified exercise prescription that did or did not use AT or RT guidelines to guide their resistance intensity prescription. Odds ratios were calculated with 'Yes' guideline use as the reference category. AT, aerobic training; RT, resistance training.

Table 6b: Influence of remoteness on exercise prevalence and intensity prescription

Exercise prescription characteristic	Remoteness	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	Metropolitan	65.2%	1.28 (0.68 to 2.41)	0.519
	Regional	59.5%		
'Always' Aerobic Exercise	Metropolitan	79.3%	1.15 (0.58 to 2.40)	0.850
	Regional	77.0%		
'Always' Resistance Exercise	Metropolitan	69.6%	1.17 (0.61 to 2.25)	0.738
	Regional	66.2%		
AT moderate intensity or lower	Metropolitan	73.9%	2.28 (0.98 to 5.33)	0.071
	Regional	86.6%		
RT moderate intensity or lower	Metropolitan	80.0%	2.14 (0.83 to 5.52)	0.122
	Regional	89.6%		

The prevalence column represents the percentage of services within metropolitan (n=92) and regional (n=74) areas that used the specified exercise prescription. Odds ratios were calculated with metropolitan services as the reference category. AT, aerobic training; RT, resistance training.

Table 6c: Influence of nurse supervisor on exercise prevalence and intensity prescription

Exercise prescription characteristic	Exercise supervisor	n	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	Nurse supervisor on staff	138	55.8%	1.03 (0.56 to 1.90)	1.000
	Nurse supervisor absent	60	55.0%		
'Always' Aerobic Exercise	Nurse supervisor on staff	138	73.9%	1.03 (0.52 to 2.05)	1.000
	Nurse supervisor absent	60	73.3%		
'Always' Resistance Exercise	Nurse supervisor on staff	130	66.9%	1.39 (0.74 to 2.62)	0.329
	Nurse supervisor absent	59	59.3%		
AT moderate intensity or lower	Nurse supervisor on staff	122	84.4%	0.53 (0.24 to 1.15)	0.142
	Nurse supervisor absent	54	74.1%		
RT moderate intensity or lower	Nurse supervisor on staff	118	87.3%	0.53 (0.22 to 1.25)	0.166
	Nurse supervisor absent	51	78.4%		

The prevalence column represents the percentage of services using the specified exercise prescription that did or did not have a nurse supervise the exercise component. Odds ratios were calculated with 'Nurse supervisor on staff' as the reference category. AT, aerobic training; RT, resistance training.

Table 6d: Influence of physiotherapist supervisor on exercise prevalence and intensity prescription

Exercise prescription characteristic	Exercise supervisor	n	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	Physio supervisor on staff	135	57.0%	1.21 (0.66 to 2.20)	0.544
	Physio supervisor absent	63	52.4%		
'Always' Aerobic Exercise	Physio supervisor on staff	135	77.8%	1.88 (0.97 to 3.63)	0.082
	Physio supervisor absent	63	65.1%		
'Always' Resistance Exercise	Physio supervisor on staff	128	63.3%	0.84 (0.44 to 1.60)	0.629
	Physio supervisor absent	61	67.2%		
AT moderate intensity or lower	Physio supervisor on staff	122	82.8%	0.73 (0.33 to 1.61)	0.530
	Physio supervisor absent	54	77.8%		
RT moderate intensity or lower	Physio supervisor on staff	115	86.1%	0.71 (0.30 to 1.69)	0.495
	Physio supervisor absent	54	81.5%		

The prevalence column represents the percentage of services using the specified exercise prescription that did or did not have a physio supervise the exercise component. Odds ratios were calculated with 'Physio supervisor on staff' as the reference category. AT, aerobic training; RT, resistance training.

Table 6e: Influence of exercise physiologist supervisor on exercise prevalence and intensity prescription

Exercise prescription characteristic	Exercise supervisor	n	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	EP supervisor on staff	60	61.7%	1.43 (0.77 to 2.66)	0.279
	EP supervisor absent	138	52.9%		
'Always' Aerobic Exercise	EP supervisor on staff	60	76.9%	1.25 (0.62 to 2.53)	0.601
	EP supervisor absent	138	72.5%		
'Always' Resistance Exercise	EP supervisor on staff	56	75.0%	1.99 (0.99 to 3.99)	0.067
	EP supervisor absent	133	60.2%		
AT moderate intensity or lower	EP supervisor on staff	51	72.5%	2.11 (0.96 to 4.63)	0.087
	EP supervisor absent	125	84.8%		
RT moderate intensity or lower	EP supervisor on staff	50	78.0%	1.96 (0.83 to 4.62)	0.160
	EP supervisor absent	119	87.4%		

The prevalence column represents the percentage of services using the specified exercise prescription that did or did not have an EP supervise the exercise component. Odds ratios were calculated with 'EP supervisor on staff' as the reference category. EP, exercise physiologist; AT, aerobic training; RT, resistance training.

Table 6f: Influence of resistance training equipment on exercise prevalence

Exercise prescription characteristic	Equipment availability	n	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	Free weights	177	62.1%	NC	<0.001***
	No free weights	21	0.0%		
'Always' Resistance Exercise	Free weights	177	68.4%	23.77 (3.00 to 188.64)	<0.001***
	No free weights	12	8.3%		
'Always' both Aerobic and Resistance	Machine weights	66	69.7%	2.44 (1.31 to 4.57)	0.006**
	No machine weights	132	48.5%		
'Always' Resistance Exercise	Machine weights	66	75.8%	2.21 (1.14 to 4.32)	0.025*
	No machine weights	123	58.5%		
'Always' both Aerobic and Resistance	Resistance bands	129	63.6%	2.56 (1.40 to 4.65)	0.003**
	No resistance bands	69	40.6%		
'Always' Resistance Exercise	Resistance bands	129	71.3%	2.49 (1.32 to 4.69)	0.006**
	No resistance bands	60	50.0%		
'Always' both Aerobic and Resistance	Bodyweight	127	71.7%	6.92 (3.61 to 13.28)	<0.001***
	No bodyweight	71	26.8%		
'Always' Resistance Exercise	Bodyweight	127	76.4%	4.79 (2.49 to 9.19)	<0.001***
	No bodyweight	62	40.3%		

The prevalence column represents the percentage of services using the specified exercise prescription that did or did not have access to the specified equipment. Odds ratios were calculated with 'Yes' access to equipment as the reference category.

Table 6g: Influence of aerobic training equipment on exercise prevalence

Exercise prescription characteristic	Equipment availability	n	Prevalence	OR (95% CI)	p-value
'Always' both Aerobic and Resistance	Treadmill	155	59.4%	2.03 (1.02 to 4.03)	0.056
	No treadmill	43	41.9%		
'Always' both Aerobic and Resistance	Rowing ergometer	50	68.0%	2.01 (1.02 to 3.96)	0.048*
	No rowing ergometer	148	51.4%		
'Always' both Aerobic and Resistance	Indoor cycle	172	60.5%	5.10 (1.95 to 13.34)	0.001**
	No indoor cycle	26	23.1%		
'Always' Aerobic Exercise	Indoor cycle	172	77.9%	4.11 (1.76 to 9.64)	0.001**
	No indoor cycle	26	46.2%		
'Always' Aerobic Exercise	Walking	133	78.2%	1.96 (1.02 to 3.78)	0.058
	No walking	65	64.6%		

The prevalence column represents the percentage of services using the specified exercise prescription that did or did not have access to the specified equipment. Odds ratios were calculated with 'Yes' access to equipment as the reference category.

Table 6h: Influence of aerobic and resistance training equipment on exercise intensity

Equipment availability	Highest exercise intensity	n	Prevalence	OR (95% CI)	p-value
Treadmill	Vigorous-maximal intensity AT	28	84.8%	1.36 (0.48 to 3.85)	0.631
	Light-moderate intensity AT	115	80.4%		
Walking	Vigorous-maximal intensity AT	27	81.8%	2.07 (0.80 to 5.36)	0.143
	Light-moderate intensity AT	98	68.5%		
Indoor Cycle	Vigorous-maximal intensity AT	32	97.0%	3.47 (0.44 to 27.39)	0.309
	Light-moderate intensity AT	129	90.2%		
Machine weights	Vigorous-maximal intensity RT	17	65.4%	4.25 (1.76 to 10.27)	0.001**
	Light-moderate intensity RT	44	30.8%		
Bodyweight	Vigorous-maximal intensity RT	26	88.5%	4.00 (1.14 to 13.97)	0.021*
	Light-moderate intensity RT	143	65.7%		
Free weights	Vigorous-maximal intensity RT	25	96.2%	0.54 (0.05 to 5.36)	0.491
	Light-moderate intensity RT	140	97.9%		
Resistance Bands	Vigorous-maximal intensity RT	20	76.9%	1.34 (0.50 to 3.58)	0.641
	Light-moderate intensity RT	102	71.3%		

The prevalence column represents the percentage of services using the specified equipment that used either vigorous-maximal or light-moderate as their highest prescribed exercise intensity. Odds ratios were calculated with 'Vigorous-maximal intensity' as the reference category.