Q-Fit General Assessment Physical Activity Readiness Questionnaire (PAR-Q)

Name				Gender: M F
	Last	First	MI	
Address				
-	Number and Street		City, State	Zip
Phone ()	Email:		Date:

For most people, physical activity should not pose any problem or hazard. PAR-Q has been designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them.

Common sense is your best guide in answering these few questions. Please read them carefully and check yes or no for the question if it applies to you.

Yes	No	1. Has your doctor ever said you have heart trouble?
Yes	No	2. Do you frequently have pains in your heart and chest?
Yes	No	3. Do you often feel faint or have spells of severe dizziness?
Yes	No	4. Has a doctor ever said your blood pressure was too high?
Yes	No	5. Has a doctor ever told you that you have a bone or joint problem such as arthritis that
		has been aggravated by exercise, or might be made worse with exercise?
Yes	No	6. Is there a good physical reason not mentioned here why you should not follow an activity program even if you wanted to?
Yes	No	7. Are you over age 65 and not accustomed to vigorous exercise?
Yes	No	8. Are you currently prescribed or taking over the counter medications that will affect your heart rate and/or blood pressure?
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If you answered NO to all questions.....

If you answered PAR-Q accurately, you have reasonable assurance of your present suitability for an exercise program.

If you answered YES to one or more questions......

If you have not recently done so, consult with you personal physician by telephone or in person before increasing your physical activity and/or taking a fitness test.

Supply information for questions that you answered 'yes'.

Question	Incident/Problem	Date Reported