

PAR-Q and You

PHYSICAL ACTIVITY READINESS QUESTIONNAIRE

Before you begin an exercise program or substantially increase your level of activity, make sure to answer the following questions. This Physical Activity Readiness Questionnaire (PAR-Q) will help determine your suitability for beginning an exercise routine or program. If you are age 15 to 69, the PAR-Q can help you decide if you should check with your physician before beginning an exercise program. If you are over age 69, speak with your physician before beginning an exercise program. The PAR-Q is representative of the standards of the American College of Sports Medicine.

Physical Activity Readiness Questionnaire (PAR-Q)		YES	NO
1.	Has your health care provider ever said that you have a heart condition or that you should participate in physical activity only as recommended by a health care provider?		
2.	Do you feel pain in your chest during physical activity?		
3.	In the past month, have you had chest pain when you were not doing physical activity?		
4.	Do you lose your balance because of dizziness?		
5.	Do you ever lose consciousness?		
6.	Do you have a bone or joint problem that could be made worse by a change in your physical activity?		
7.	Is your doctor currently prescribing drugs for your blood pressure or a heart condition?		
8.	Do you know of any reason you should not participate in physical activity?		

If you answered YES to one or more questions, if you are over 40 years of age and have been inactive, or if you are concerned about your health, consult a physician before substantially increasing your physical activity. If you answered NO to each question, then it's likely that you can safely begin increasing your physical activity. Delay becoming more physically active if you are not feeling well because of temporary illness such as a cold or a fever. If you are or may be pregnant, speak with your health care provider before you start becoming more physically active.

"I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction."

NAME _____

SIGNATURE _____ DATE _____