

### Physical Activity Readiness Questionnaire (PAR-Q)

For most people, physical activity should not pose any problem or hazard. This questionnaire 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 suitable type of activity.

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|----|--|-----|----|
| 1. | Has your doctor ever said you have heart trouble?  | Yes | No |
| 2. | Do you frequently suffer from chest pains?   | 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, or might be made worse with exercise | Yes | No |
| 6. | Is there any other good physical reason why you should not follow an activity program even if you want to?   | Yes | No |
| 7. | Are you 65 and not accustomed to vigorous exercise   | Yes | No |

If you answer "yes" to any question, vigorous exercise or exercise testing should be postponed. Medical clearance may be necessary.

I have read this questionnaire, I understand it does not provide a medical assessment in lieu of a physical examination by a physician.

Participant's signature \_\_\_\_\_ Date \_\_\_\_\_

Investigator's signature \_\_\_\_\_ Date \_\_\_\_\_

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Adapted from PAR-Q Validation Report, British Columbia Department of Health, June, 1975.

Reference:

Hafen, B. Q. & Hoeger, W. W. K. (1994). Wellness: Guidelines for a Healthy Lifestyle. Morton Publishing Co: Englewood, CO.