KLINIKA SPORTOVNÍ MEDICÍNY

Sportovní medicína, a. s.
Zdeňka Chalabaly 3041/2
700 30 Ostrava – Bělský Les

Mob.: +420 724 099 599
+420 605 799 462

www.sportovnimedicina.cz, info@sportovnimedicina.cz

Medical questionnaire for athletes:

Name and surname: .....

Date of birth:.....personal ID no.:.....

Home address:.....postcode.....

phone (for minors, the legal guardian).....health insurer.....

Sport.....Club represented……

Active in sport since (years):.....hours per week .....

Completing the questionnaire below is a condition of the examination. Answers such as "see medical records" are not acceptable!

	Personal history (health data of the examinee)	Family history	
		mother	**father**
Hypertension (high blood pressure)	yes/no	yes/no	yes/no
Heart disease	yes/no	yes/no	yes/no
Diabetes mellitus	yes/no	yes/no	yes/no
Vascular disease	yes/no	yes/no	yes/no
Bronchial asthma	yes/no	yes/no	yes/no
Thyroid disorder	yes/no	yes/no	yes/no
Allergy	yes/no	yes/no	yes/no
Epilepsy	yes/no	yes/no	yes/no
Loss of consciousness on exertion	yes/no	---	---
Sudden death in sport in the family	yes/no		

note: cross out what does not apply

injuries:.....

operations: .....

Medication taken regularly (dietary supplements, vitamins etc. need not be listed):

…….....

Other serious health information:…….....

Date…….. **Signature……**

If you are having an **exercise stress test**, please turn over and **fill in the second page as well**

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Exercise stress test

Patient information about the procedure:	Do not eat for 2 hours before the examination. Have a light breakfast in the morning. An adequate fluid intake is advisable. The examination is not suitable after strenuous training.
Nature of the condition and prognosis, purpose of the procedure and of treatment: /indication/	**Ergometric testing** is an exercise examination of the patient on a bicycle ergometer with a gradual, stepwise increase in workload up to the maximum performance of the person examined, or until symptoms of heart disease appear. The examination serves to diagnose certain heart diseases and to assess the effectiveness of their treatment and the severity of these diseases. The examination, including recovery afterwards, takes approximately 20 minutes.
Performance and benefit of the procedure or treatment:	A nurse attaches electrodes to the client's chest and limbs; the client then pedals on a bicycle ergometer or walks on a treadmill with a gradually increasing workload up to their maximum performance, or until symptoms of heart disease appear. ECG, blood pressure and pulse are recorded during the examination.
Possible complications: /risks, treatment consequences, pain/	**All complications are rare and are prevented by the work of the cardiology team, but their occurrence cannot be ruled out:** irregular heart rhythm, myocardial infarction, heart failure, shock.

In the 2 weeks before the exercise stress test I have had an infectious illness or been treated with antibiotics*:

YES - NO

(note: the stress test cannot be carried out sooner than 2 weeks after recovery from an infectious illness, because of the risk of aggravating it and of serious complications, above all myocarditis!)

Consents*

I consent to the exercise examination and I declare that all the information given above is true: YES - NO

I consent to the processing of the personal data given here by Sportovní medicína, a.s. The data will be used for this examination and for communicating the results: YES - NO

I consent to the measured data (height, weight, body fat percentage, maximum heart rate), the performance parameters (power output achieved in W/kg, VO2max) and the training heart rate zones being passed on to school representatives and coaches (if you agree, please write in

name of the school (club) and the coach's name:……

Date…….. **Signature……**

(for persons under 18, the signature of the legal guardian)

*: *cross out what does not apply*