

ASSESSMENT RESULTS FORM



Name: _____

ESSENTIAL CARDIOVASCULAR ASSESSMENT RESULTS

HEART RATE

DATE: _____

Resting heart rate: _____ bpm Exercise heart rate: _____ bpm

BLOOD PRESSURE

DATE: _____

Resting blood pressure: ____ / ____ mmHg

BODY-COMPOSITION ASSESSMENT RESULTS

HEIGHT, WEIGHT, AND BODY MASS INDEX

DATE: _____

Weight (lb): _____ Height (in): _____

If necessary, convert to metric units: Weight in pounds x 0.454 = Weight in kg Height in inches x 0.0254 = Height in m

Weight (kg): _____ Height (m): _____

Calculate body mass index (BMI): $\text{Weight (kg)} \div \text{Height}^2 \text{ (m)}$ or $\text{BMI} = \text{Weight (kg)} / \text{Height}^2 \text{ (m)}$ or $\frac{\text{Weight (lb)}}{\text{Height}^2 \text{ (in)}} \times 703$
BMI: _____

Note: Refer to page 207 for a BMI chart.

SKINFOLD MEASUREMENTS

DATE: _____

MEN

Chest: _____

Abdomen: _____

Thigh: _____

Total: _____

% Body-fat estimation: _____

Note: Refer to pages 203 and 204 to determine body-fat estimates.

WOMEN

Triceps: _____

Suprailium: _____

Thigh: _____

Total: _____

GIRTH MEASUREMENTS

DATE: _____

Abdomen: _____

Hip: _____

Waist: _____

Waist-to-hip ratio: _____

Note: Refer to page 209 for a waist-to-hip ratio norms table and to page 210 for waist circumference categories.



SPORT-SKILL ASSESSMENTS

STANDING LONG JUMP

DATE: _____

Distance jumped:

Attempt 1: _____

Attempt 2: _____

Attempt 3: _____

Percentile rank: _____

Note: Refer to page 251 to determine percentile ranks.

VERTICAL JUMP TEST

DATE: _____

Height jumped:

Attempt 1: _____

Attempt 2: _____

Attempt 3: _____

SPEED, AGILITY, AND QUICKNESS TESTING

PRO AGILITY TEST

DATE: _____

Time:

Attempt 1: _____

Attempt 2: _____

Attempt 3: _____

40-YARD DASH

DATE: _____

Time:

Attempt 1: _____

Attempt 2: _____

Average of 2 attempts: _____

1-RM LEG PRESS

DATE: _____

Set 1

Resistance: _____

Number of repetitions: _____

Set 2

Resistance: _____

Number of repetitions: _____

Set 3

Resistance: _____

Number of repetitions: _____

1-RM effort

Resistance: _____

Number of attempts: _____

Comments: _____

Absolute strength: _____

Relative strength: _____ (1-RM/Client's weight)

Performance rating: _____

Note: Refer to pages 245 and 246 to determine performance rating

1-RM SQUAT TEST

DATE: _____

Set 1

Resistance: _____

Number of repetitions: _____

Set 2

Resistance: _____

Number of repetitions: _____

Set 3

Resistance: _____

Number of repetitions: _____

1-RM effort

Resistance: _____

Number of attempts: _____

Comments: _____

Absolute strength: _____

Relative strength: _____ (1-RM/Client's weight)

MUSCULAR-ENDURANCE TESTING

PUSH-UP TEST

DATE: _____

Number performed: _____

Performance rating: _____

Note: Refer to page 235 to determine performance rating.

CURL-UP TEST

DATE: _____

Number performed: _____

Performance rating: _____

Note: Refer to pages 237 and 238 to determine performance rating.

BODY-WEIGHT SQUAT TEST

DATE: _____

Number performed: _____ Depth of squat: _____ degrees

MUSCULAR-STRENGTH TESTING

1-RM BENCH PRESS TEST

DATE: _____

Set 1

Resistance: _____

Number of repetitions: _____

Set 4

Resistance: _____

Number of repetitions: _____

Set 2

Resistance: _____

Number of repetitions: _____

Set 5 (if needed)

Resistance: _____

Number of repetitions: _____

Set 3

Resistance: _____

Number of repetitions: _____

Set 6 (if needed)

Resistance: _____

Number of repetitions: _____

1-RM effort

Resistance: _____

Number of attempts: _____

Comments: _____

Absolute strength: _____

Relative strength: _____ (1-RM/Client's weight)

Performance rating: _____

Note: Refer to page 243 to determine performance rating.

VT 2 THRESHOLD TEST

Minute 16 HR: _____ bpm

Minute 17 HR: _____ bpm

Minute 18 HR: _____ bpm

Minute 19 HR: _____ bpm

Minute 20 HR: _____ bpm

VT2 estimate: _____ bpm (Average HR x 0.95)

DATE: _____

ROCKPORT FITNESS WALKING TEST (1 MILE)

DATE: _____

1-mile time: _____

Immediate post-exercise heart rate: _____ bpm

RPE: _____

Weather: _____

Location: _____

Surface: _____

Other notes: _____

Calculate $\dot{V}O_2$:

Females: $\dot{V}O_2$ (mL/kg/min) = 132.853 – (0.1692 x Weight in kg) – (0.3877 x Age) – (3.265 x Walk time, expressed in minutes to the nearest 100th) – (0.1565 x HR)

Males: $\dot{V}O_2$ (mL/kg/min) = 139.168 – (0.1692 x Weight in kg) – (0.3877 x Age) – (3.265 x Walk time, expressed in minutes to the nearest 100th) – (0.1565 x HR)

$\dot{V}O_2$: _____

Performance rating: _____

Note: Refer to page 228 to determine performance rating.

1.5-MILE RUN

DATE: _____

Weight (kg): _____

Exercise time: _____

Post-exercise HR: _____ bpm

Percentile: _____

Note: Refer to page 229 to determine percentile.

YMCA SUBMAXIMAL STEP TEST

DATE: _____

Post-exercise one-minute HR: _____ bpm

Performance rating: _____

Note: Refer to page 232 to determine performance rating.

CARDIORESPIRATORY FITNESS TESTING RESULTS

DATE: _____

YMCA BIKE TEST

Submaximal target exercise heart rate: _____

Weight (kg): _____

Seated, resting blood pressure: _____

Stage 1:

Minute 1: HR ____ bpm

RPE ____

Minute 2: HR ____ bpm

RPE ____

Minute 3: BP ____/____ mmHg

HR ____ bpm

RPE ____

Minute 4 (if needed): BP ____/____ mmHg

HR ____ bpm

RPE ____

Stage 2:

Minute 1: HR ____ bpm

RPE ____

Minute 2: HR ____ bpm

RPE ____

Minute 3: BP ____/____ mmHg

HR ____ bpm

RPE ____

Minute 4 (if needed): BP ____/____ mmHg

HR ____ bpm

RPE ____

Stage 3:

Minute 1: HR ____ bpm

RPE ____

Minute 2: HR ____ bpm

RPE ____

Minute 3: BP ____/____ mmHg

HR ____ bpm

RPE ____

Minute 4 (if needed): BP ____/____ mmHg

HR ____ bpm

RPE ____

Stage 4:

Minute 1: HR ____ bpm

RPE ____

Minute 2: HR ____ bpm

RPE ____

Minute 3: BP ____/____ mmHg

HR ____ bpm

RPE ____

Minute 4 (if needed): BP ____/____ mmHg

HR ____ bpm

RPE ____

FIRST VENTILATORY THRESHOLD TEST (TALK TEST) USING A TREADMILL

DATE: _____

Pre-exercise HR: ____ bpm

Pre-exercise BP (if necessary): ____/____ mmHg

Stage 1:

HR: ____ bpm

Client assessment of discomfort _____

Stage 2:

HR: ____ bpm

Client assessment of discomfort _____

Stage 3:

HR: ____ bpm

Client assessment of discomfort _____

VT1 HR: ____ bpm