SHW/02/2023 Date: 4 April 2023

Next Review: 3 April 2024

HEAT STRESS MANAGEMENT PLAN

1 INTRODUCTION

1.1 Meteorological Service Singapore (MSS) has said that Singapore's average surface temperature has been rising at a rate of about 0.25 degrees Celsius per decade since the 1950s, and it is projected to continue to rise.

1.2 Heat is primarily received on the earth's surface as radiation from the sun and May tends to be the warmest month of the year. According to NEA, a heatwave is defined as
- daily maximum air temperature is at least 35 degrees for at least 3 consecutive days and
- the daily mean temperature throughout the period is at least 29 degrees.

1.3 It is therefore important to introduce additional heat injury prevention measures to mitigate the increased risks of heat injury during sport.

2 AIM

2.1 The severe hot weather plan is developed to protect the sporting fraternity from heat related injuries. It aims to help the sporting fraternity to better prepare, plan and respond during severe hot weather and prevent/reduce heat injuries by raising public awareness and highlighting key actions to be taken. This plan provides guidelines on heat injury prevention measures to be adopted and incorporated by respective divisions and their stakeholders into their operational plans.

3 SCOPE

3.1 This plan shall apply to all sports facilities and events / programs / physical activities. The information will be featured in SportSG website.

3.2 The 3-band formulation recommended by NEA and its expert panel shall be adopted for this plan. It also builds on the expertise of the Sport Safety Committee when developing this plan so as to help the sport fraternity to better prepare and plan for severe hot weather.

Heat Stress Health Advisory for General Population Advice on activities and measures to prevent heat-related health conditions		
Low Risk (WBGT<31°C)	**Moderate Risk (31≤WBGT<33°C)**	**High Risk (WBGT≥33°C)**

3.3 Intrinsic and extrinsic factors shall be covered in the plan:

Intrinsic factors	a. Operational Requirements	Intensity of activities/work, interval of breaks, accumulated fatigue, sleep deprivation.
	b. Well-being of staff and participants	Dehydration, inadequate nutrition, medical history, physical conditioning/training, physical fitness, obesity, stress.
Extrinsic factors	a. Environment	Ambient temperature / humidity, surroundings, flooring.
	b. Physical barriers contributing to heat loss	Confined spaces, attire/clothing.

4 HEAT INJURY PREVENTION (HIP) MEASURES

4.1 The following HIP measures have been designed to reduce the risk of heat injury during sport.

5 RISK ASSESSMENT

5.1 In the absence of any measures for specific activities, one must exercise discretion and conduct a risk assessment to eliminate or reduce risks to as low as reasonably practicable for any physical activities. Please refer to links below for information on risk management:
https://www.sportsingapore.gov.sg/sports-education/sports-safety/safety-resources-useful-links/

https://www.udemy.com/course/sports-safety-risk-management/

5.2 Other factors for consideration include the following:

i) Conduct of Physical Activities

a. When conducting physical activities especially for the first time and/or conducted in an unfamiliar environment (outdoors and/or indoors without air-conditioning), the following shall be included in the risk assessment plan:
- Person's health status and level of preparedness (Participants, Instructors, volunteers etc),
- Appropriate attire and use of sunscreen,
- weather conditions (temperature, humidity) and

- intensity of activity.

b. Access to water and first aid/AED shall be easily available. First aid items/AED shall be inspected regularly to ensure that items are serviceable and replenished.

c. Participants, instructors, volunteers etc shall complete the Get-Active Questionnaire (GAQ) (Annex A) and/or checklist of intrinsic risk factors for exertional heat stroke, and/or conduct equivalent assessments prior to commencement of physical activities.

Checklist of Intrinsic Risk Factors for Exertional Heat Stroke	
Are you at risk for Exertional Heat Stroke (EHS)?	
1. Are you physically ready for training and competition?	Athletes need to match their exercise intensity with their fitness level. Novice athletes with poor physical fitness tend to outpace themselves during competition. An overload in exercise intensity is a key factor contributing to EHS.
2. Have you acclimatised to the climate?	In Singapore's context, it is important for visiting athletes to have adequate acclimatisation to the heat and local climate.
3. Have you been ill recently?	Heat stroke risk can be increased by disturbances to the immune system e.g. from a recent bout of illness or sub-clinical infection.
4. Are you taking any medications?	Athletes on medication for chronic medical conditions need to consult their prescribing physician on the risks of undertaking strenuous physical activity. Stimulants, antihistamines, diuretics and other common medications can impair the body's ability to mount an effective thermoregulatory response during exercise in the heat. Athletes taking medication for recent illness should be advised against participation in view of the dual risks medication and recent illness pose.
5. Do you tend to push your body hard?	An athlete's high level of motivation is one of the most consistent hallmarks of exertional heat stroke. Signals which urge the body to slow down are blocked out when athletes knowingly pushing the limits to reach the highest levels of performance.
6. Are you at risk for heat injury?	<u>High Body Mass:</u> High body-mass athletes expend metabolic energy at higher absolute rates than their lean counterparts, placing high body-mass athletes at higher risk of heat injury. <u>Children and Youth:</u> It is well established that classical heat stroke (results from prolonged passive exposure to extreme environmental heat and occurring mostly during heatwaves affecting infants, toddlers, and the elderly) typically affects the very young and the very old. Children and youth may be unable to assess and mitigate risks of training and competing in the heat.

Source: Extracted from the Sport Safety Committee Report 2019

d. Participants, instructors, volunteers etc shall be briefed on safety precautions such as stopping the activity when unwell or breathless and to seek medical treatment when necessary. They must also know their own state of health and be conscious of the risks of exceeding their threshold for safe participation in the physical activity. They shall also be advised to adopt good dietary habit, well-regulated sleep routine and catering for recovery in between training bouts to prevent training-induced immune suppression.

e. Intensity of sporting activities shall be introduced progressively and at a level suitable to the participant.

f. Instructors and supporting manpower such as volunteers, parents shall maintain high vigilance on participants who are unwell, on medication and/or recently recovered from illness.

g. Warm-up and cool-down exercises including static and dynamic stretches shall be conducted before and after the sporting activity.

h. Ensure that participants, instructors, volunteers etc are hydrated and drink at least 250ml of water every 30 mins. On hot days, ice slurry may also be provided to induce greater internal cooling.

i. Check that urine colour is clear or light yellow. If urine is darker yellow than usual, this may suggest early signs of dehydration.

Urine Colour Chart

Colour	Level of Hydration
No colour (clear)	Good hydration
Pale yellow	Good hydration/mild dehydration
Dark yellow	Mild/moderate dehydration
Orange	Moderate/severe dehydration
Brown	Severe dehydration

j. If vendors / partners are appointed to conduct the said physical activities, they shall submit their risk assessment plans and its risks mitigated to as low as reasonably possible (ALARP) to ActiveSG facility management prior to commencement of activities.

ii) Environment

a. Sport/event/interest group organisers shall take reference from NEA website or myENV app to check weather conditions prior to conducting physical activities

outdoors and/or indoors without air-conditioning. See link below: https://www.nea.gov.sg/weather

b. According to NEA, the hottest part of the day is typically between 11am to 4pm. Sport/event/interest group organisers, instructors and participants should exercise caution and review their risk assessment plans for additional safety measures for any outdoor activities during that period. Examples of additional measures include instituting more frequent breaks; increase hydration, etc.

6 FACTORS THAT CONTRIBUTE TO HEAT STRESS

6.1 Generally, 3 factors that contribute to heat stress when engaging in physical activities:

a. Personal – persons with the following conditions (non-exhaustive) are at higher risk of developing heat stroke: persons who are unwell and/or on medication; persons who have just recovered from an illness; persons fitness level; acclimatisation to hotter environment; persons medical conditions; and alcohol consumption.

b. Environmental – risk factors refer to temperature, humidity, and level of ventilation/air movement; and direct heat source.

c. Types of exercise – high intensity; endurance level; degree of strength. The higher intensity of the physical activity, the more internal heat the body produces.

7 SIGNS AND SYMPTOMS OF HEAT INJURY

7.1 Early recognition of symptoms of exertional heat stroke and rapid first responder intervention can reduce morbidity and mortality. The consequence of heat injury can be significantly alleviated by early cooling and intervention measures. Therefore, it is imperative that suspected heat injury casualties are identified early.

7.2 Participants, instructors, volunteers, staff and medical care providers etc shall be educated on the recognition of early signs of heat injury and activation of an emergency medical responder when these signs are observed. Such information shall be included in safety briefings conducted prior to activity or event.

7.3 The symptoms of heat injury may include:

a. Inability to continue physical activity due to extreme fatigue.

b. Hot and flushing (redness) of skin.

c. Severe muscle cramps.

d. Nausea and/ or vomiting.

e. Headache, giddiness, and/ or fainting spells during sudden change in position.

f. Change in mental status - confusion, agitation, disorientation, seizures or loss of consciousness.

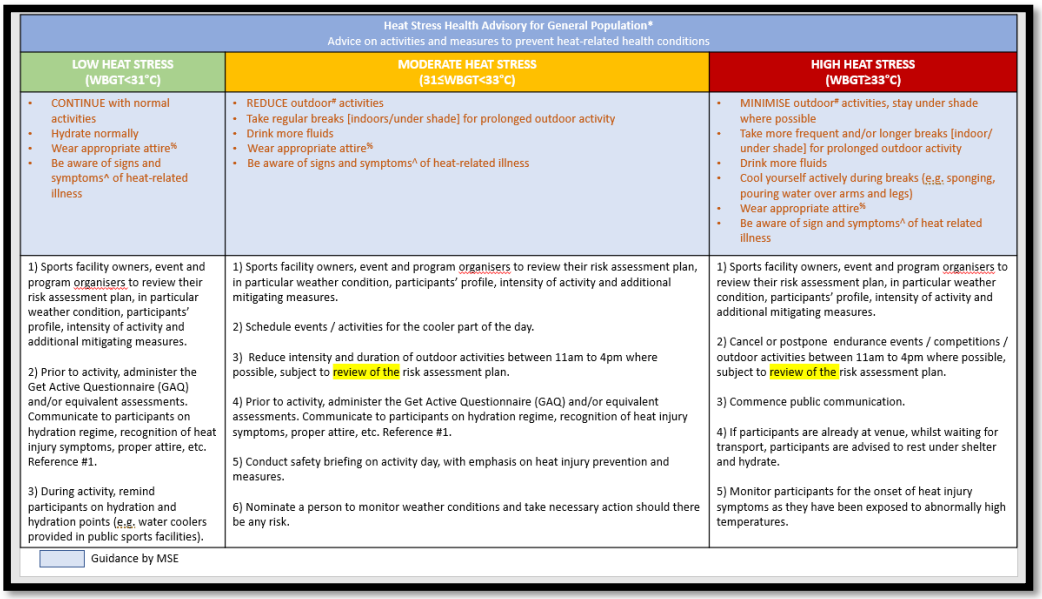
g. A comatose, non-arousable state.

7.4 For details, please refer to the link below: https://www.sportsingapore.gov.sg/sports-education/sports-safety/safety-resources-useful-links/

Sport Safety Committee Report 2019
SS681: 2022 Code of Practice for Sport Safety

8 3-Phase Approach

8.1 The table below features the plan for the 3-phased approach.



Heat Stress Health Advisory for General Population* Advice on activities and measures to prevent heat-related health conditions		
LOW HEAT STRESS (WBGT<31°C)	**MODERATE HEAT STRESS (31≤WBGT<33°C)**	**HIGH HEAT STRESS (WBGT≥33°C)**
• CONTINUE with normal activities • Hydrate normally • Wear appropriate attire% • Be aware of signs and symptoms^ of heat-related illness	• REDUCE outdoor# activities • Take regular breaks [indoors/under shade] for prolonged outdoor activity • Drink more fluids • Wear appropriate attire% • Be aware of signs and symptoms^ of heat-related illness	• MINIMISE outdoor# activities, stay under shade where possible • Take more frequent and/or longer breaks [indoor/ under shade] for prolonged outdoor activity • Drink more fluids • Cool yourself actively during breaks (e.g. sponging, pouring water over arms and legs) • Wear appropriate attire% • Be aware of sign and symptoms^ of heat related illness
1) Sports facility owners, event and program organisers to review their risk assessment plan, in particular weather condition, participants' profile, intensity of activity and additional mitigating measures. 2) Prior to activity, administer the Get Active Questionnaire (GAQ) and/or equivalent assessments. Communicate to participants on hydration regime, recognition of heat injury symptoms, proper attire, etc. Reference #1. 3) During activity, remind participants on hydration and hydration points (e.g. water coolers provided in public sports facilities).	1) Sports facility owners, event and program organisers to review their risk assessment plan, in particular weather condition, participants' profile, intensity of activity and additional mitigating measures. 2) Schedule events / activities for the cooler part of the day. 3) Reduce intensity and duration of outdoor activities between 11am to 4pm where possible, subject to review of the risk assessment plan. 4) Prior to activity, administer the Get Active Questionnaire (GAQ) and/or equivalent assessments. Communicate to participants on hydration regime, recognition of heat injury symptoms, proper attire, etc. Reference #1. 5) Conduct safety briefing on activity day, with emphasis on heat injury prevention and measures. 6) Nominate a person to monitor weather conditions and take necessary action should there be any risk.	1) Sports facility owners, event and program organisers to review their risk assessment plan, in particular weather condition, participants' profile, intensity of activity and additional mitigating measures. 2) Cancel or postpone endurance events / competitions / outdoor activities between 11am to 4pm where possible, subject to review of the risk assessment plan. 3) Commence public communication. 4) If participants are already at venue, whilst waiting for transport, participants are advised to rest under shelter and hydrate. 5) Monitor participants for the onset of heat injury symptoms as they have been exposed to abnormally high temperatures.
Guidance by MSE		

Heat Stress Health Advisory for General Population* Advice on activities and measures to prevent heat-related health conditions		
LOW HEAT STRESS (WBGT<31°C)	**MODERATE HEAT STRESS (31≤WBGT<33°C)**	**HIGH HEAT STRESS (WBGT≥33°C)**
LOW HEAT STRESS (WBGT<31°C) • CONTINUE with normal activities • Hydrate normally • Wear appropriate attire% • Be aware of signs and symptoms^ of heat-related illness	**MODERATE HEAT STRESS (31≤WBGT<33°C)** • REDUCE outdoor# activities • Take regular breaks [indoors/under shade] for prolonged outdoor activity • Drink more fluids • Wear appropriate attire% • Be aware of signs and symptoms^ of heat-related illness	**HIGH HEAT STRESS (WBGT≥33°C)** • MINIMISE outdoor# activities, stay under shade where possible • Take more frequent and/or longer breaks [indoor/ under shade] for prolonged outdoor activity • Drink more fluids • Cool yourself actively during breaks (e.g. sponging, pouring water over arms and legs) • Wear appropriate attire% • Be aware of sign and symptoms^ of heat related illness
	7) Constantly check on participants well-being, especially those appearing unwell and advise them to rest and refrain from carrying on with activity. Remind participants on adequate hydration methods and sun protection, e.g. easy access to water / drinks points, application of sun block, etc. 8) Where possible, identify shelters / air-conditioning facilities / shady areas, etc. for event officials, staff, volunteers, participants, etc.., and ensure drinking water supplies are sufficiently replenished. 9) Schedule frequent intervals / breaks for rest, drinks, cooling down. 10) Provide adequate medical coverage at events including ice and cooling measures for heat injury management and medical plan for evacuation to nearest hospital.	6) Outdoor sport facilities will be closed between 11am to 4pm. except public swimming pools.

Reference #1: Heat Disorders Prevention Guide (2013); UV Protection Guidebook: SEAG (2015); Heat Disorders Prevention & UV Protection Guide (2016); Sports Safety Committee Report March 2019 (Chapter 7:Heat Injuries in Sports); SS681:2022 Code of Practice for Sport Safety (Clause 9:Heat Injuries)
*This does not apply to people who have recently recovered from illness or have intercurrent illness, who should rest and avoid strenuous outdoor activities. Recent travelers from cooler climates also exercise greater precaution
#Outdoor activities refer to activities under direct sun exposure
%Lightweight, loose-fitting, heat permeable and light-colored clothing with absorbent material to keep cool and minimize barriers to evaporation.
^Examples of signs and symptoms of heat-related illness include headache, nausea, dizziness, irritability, confusion or altered mental state, thirst, heavy sweating.
The three levels of heat stress convey the corresponding risk of the general population experiencing heat-related illnesses (e.g. heat exhaustion, cramp, stroke) during prolonged outdoor activities.
Groups more vulnerable to heat stress should exercise greater caution, including the elderly, children and infants, people who are ill or recently recovered, or have chronic conditions, pregnant women, and recent travellers from cooler climates.
Groups such as athletes (SportSG), outdoor workers (MOM), uniformed personnel (SAF, Home Team) should refer to their respective sectoral guidelines that are tailored to their requirements. Students should follow their school's instructions.

9 Work / Physical Activity Scheduling

9.1 Under moderate risk, work/physical activities shall be alternated, for example by scheduling 15 minutes of rest for every 45-60 minutes of work/physical activities. The duration of rest period shall be increased under high-risk exposure conditions.

9.2 Below are the proposed guidelines:

Heat Stress Level	**WBGT**	**Work/Physical Activities: Rest**
Low	<31° C	45-60 mins: 15 mins
Moderate	31≤WBGT<33°C	30 mins : 15 mins
High	≥33° C	15-30 mins: 30 mins

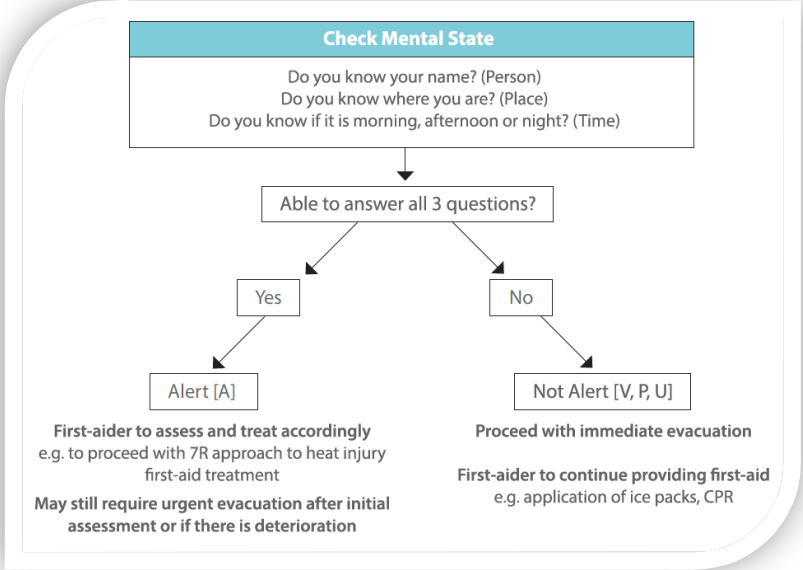
10 First Aid Treatment

10.1 First aid for heat illness comprises 2 key steps:

a. Determine victim's level of consciousness such as using the AVPU scale (Alert, Verbal response, response to Pain and Unresponsive)

Alert	▪ Victim is fully awake with spontaneous eyes opening. ▪ Appears aware of and responsive to the environment. ▪ Follows commands, eyes tract people and objects.
Verbal response	▪ Eyes do not open spontaneously but victim responds appropriately when spoken to e.g. limbs/eyes movement, grunt or moan.
Response to Pain	▪ Victim does not respond to verbal stimuli but moves or groans in response to painful stimuli e.g. pinching skin, ear lobe or nail bed.
Unresponsive	Victim does not respond to any stimuli.

After using the AVPU scale, the proposed emergency response/first aid treatment is listed below:



b. On-site treatment using the 7R approach for heat stress is as follows:

Recognise symptoms	Recognise symptoms of heat stress and report early
Rest Victim	Get victim to sit or lie down in a cool shaded area with good ventilation.
Remove clothing	Loosen or remove excess clothing s appropriate (while preserving the modesty).
Reduce temperature	Reduce body temperature as fast as possible by applying ice packs, wet towels, or cool water. Other measures include fanning the victim to promote evaporative cooling, use of cooling blankets and using cold water immersion.
Rehydrate	Rehydrate by providing fluids if victim is conscious.
Resuscitate	If the victim is unconscious, call for help immediately and commence resuscitation.
Rush to hospital	Call for an ambulance and convey victim to hospital.

11 AT-RISK GROUPS

11.1 Although anyone at any time can suffer from heat-related illness, some people are at greater risk than others:

- Infants and young children whose body systems have not fully developed,
- Older adults whose body systems are ageing and have decreased heart functions and body reserves,
- People with disabilities or overweight,
- People who overexert during exercise,

- Individuals with pre-existing medical conditions especially with heart disease or high blood pressure, or who take certain medications, such as for depression, insomnia, or poor circulation that decreases their immunity and
- Pregnant women as their bodies must work harder to cool down both herself and the developing baby.

11.2 Wear appropriate clothing: lightweight and loose-fitting.

11.3 Schedule outdoor activities carefully: Engage in outdoor activities when weather is coolest like morning and evening hours. Rest often in shady areas for body to recover.

11.4 Pace oneself: Defer exercises during severe hot weather. If one is not accustomed to exercising in a hot environment, start slowly and pick up the pace gradually. If exertion in the heat makes the heart pound and leaves one gasping for breath, STOP all activities. Get into a cool area or into the shade, and rest, especially if symptoms such as light headedness, confusion, feelings of weakness or fainting appear.

11.5 Apply sunscreen: Sunburn affects a body's ability to cool down and can make one dehydrated. When exercising outdoors, protect oneself from the sun by wearing a wide-brimmed hat, sunglasses, and put on sunscreen of SPF 15 or higher 30 minutes prior to going outdoors. Continue to reapply it according to the package directions. It is preferable to look for sunscreens that feature "broad spectrum" or "UVA/UVB protection" on the labels.

11.6 Keep in mind: Electric fans may provide comfort, but during severe hot weather, these fans will not prevent heat-related illness. Take a cool shower or bath or move to an air-conditioned place to cool off. Refrain from using the stove and oven to maintain a cooler temperature indoors.

11.7 Avoid Hot and Heavy Meals: They add heat to one's body.

11.8 Stay hydrated: Drink more fluids, regardless of how active one is. Do not wait until thirsty to drink. If the doctor limits fluid intake, consult them on the quantity to drink during hot weather. Refrain from very sugary or alcoholic drinks as it causes one to lose more body fluid.

11.9 Replace salt and minerals: Heavy sweating removes salt and minerals from the body that need to be replaced. A sports drink can replace the salt and minerals you lose in sweat. If on a low-salt diet, suffers from diabetes, high blood pressure, or other chronic conditions, consult the doctor before drinking a sports beverage or taking salt tablets.

11.10 Stayed informed: Check for updates on heat alerts and safety tips. Identify any cooling shelters within the vicinity of the exercise area. Learn the signs and symptoms of heat-related injury and how to treat them.

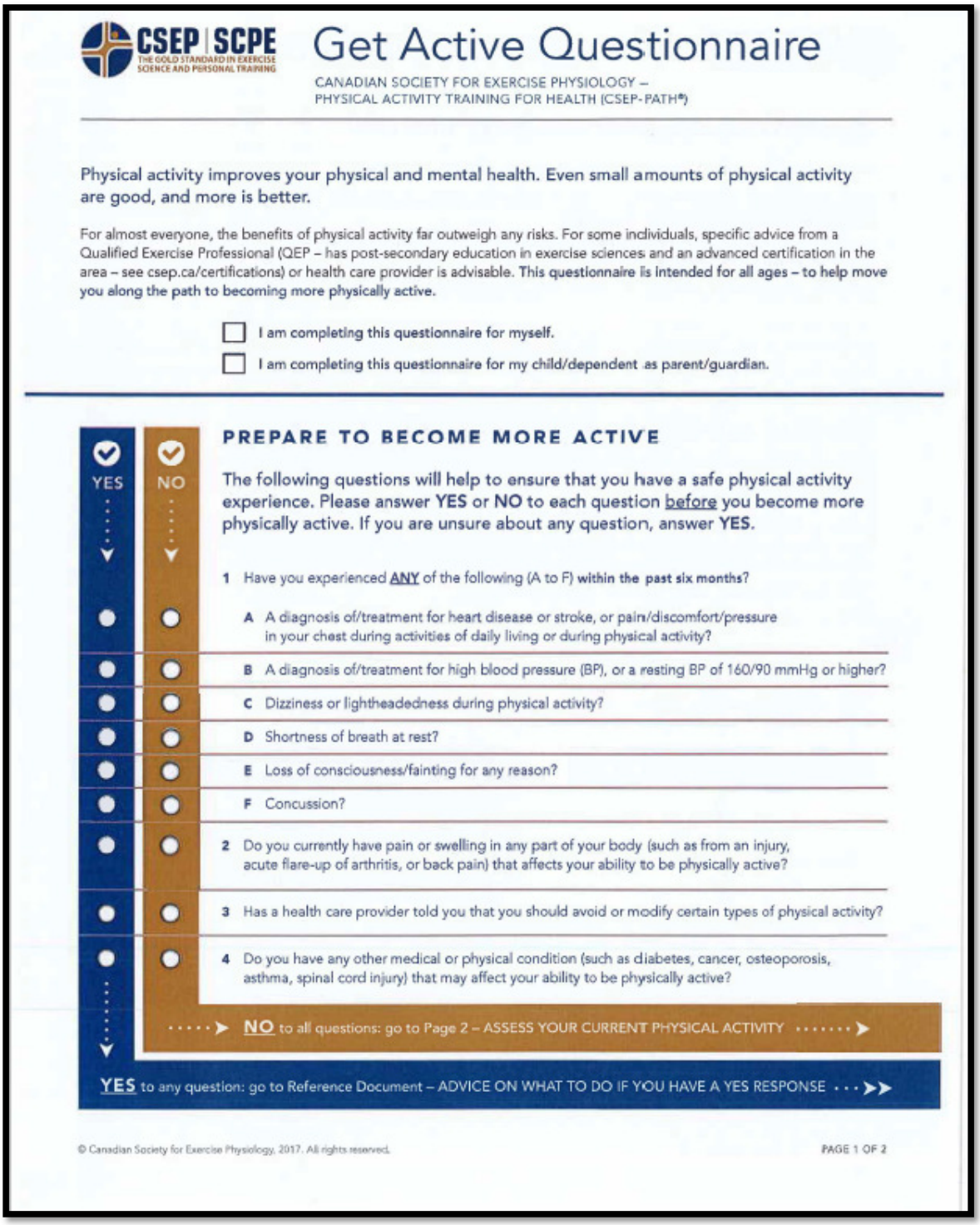
11.11 Use a Buddy System: When exercising in the heat, monitor the condition of your buddy and likewise the buddy will do the same for you. Heat-induced illness can cause a person to become confused or lose consciousness.

11.12 Visit adults at risk at least twice a day and closely watch them for signs of heat exhaustion or heat stroke. Infants and young children, of course, need much more frequent watching.

12 CONCLUSION

12.1 Safety is everyone's responsibility. During the hot months, all must place deliberate emphasis to prevent heat-related injuries through the measures stated above. Exercise discretion and consider implementing additional safety measures if deemed necessary.

Annex A – Get Active Questionnaire



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Get Active Questionnaire

CANADIAN SOCIETY FOR EXERCISE PHYSIOLOGY –
PHYSICAL ACTIVITY TRAINING FOR HEALTH (CSEP-PATH®)

Physical activity improves your physical and mental health. Even small amounts of physical activity are good, and more is better.

For almost everyone, the benefits of physical activity far outweigh any risks. For some individuals, specific advice from a Qualified Exercise Professional (QEP – has post-secondary education in exercise sciences and an advanced certification in the area – see csep.ca/certifications) or health care provider is advisable. This questionnaire is intended for all ages – to help move you along the path to becoming more physically active.

☐ I am completing this questionnaire for myself.

☐ I am completing this questionnaire for my child/dependent as parent/guardian.

PREPARE TO BECOME MORE ACTIVE

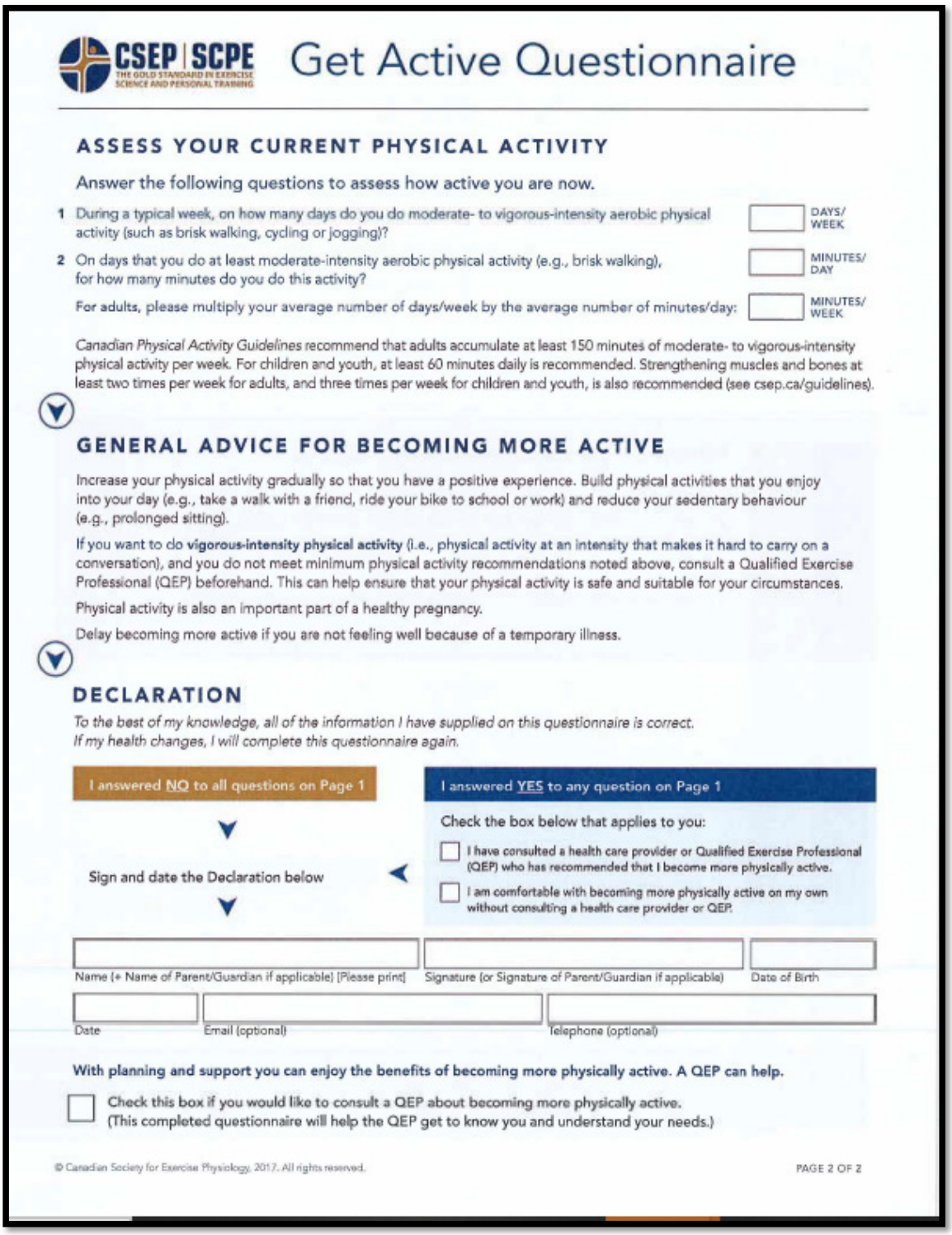
The following questions will help to ensure that you have a safe physical activity experience. Please answer **YES** or **NO** to each question before you become more physically active. If you are unsure about any question, answer **YES**.

YES	NO	
		1 Have you experienced **ANY** of the following (A to F) **within the past six months?**
○	○	**A** A diagnosis of/treatment for heart disease or stroke, or pain/discomfort/pressure in your chest during activities of daily living or during physical activity?
○	○	**B** A diagnosis of/treatment for high blood pressure (BP), or a resting BP of 160/90 mmHg or higher?
○	○	**C** Dizziness or lightheadedness during physical activity?
○	○	**D** Shortness of breath at rest?
○	○	**E** Loss of consciousness/fainting for any reason?
○	○	**F** Concussion?
○	○	2 Do you currently have pain or swelling in any part of your body (such as from an injury, acute flare-up of arthritis, or back pain) that affects your ability to be physically active?
○	○	3 Has a health care provider told you that you should avoid or modify certain types of physical activity?
○	○	4 Do you have any other medical or physical condition (such as diabetes, cancer, osteoporosis, asthma, spinal cord injury) that may affect your ability to be physically active?

➤ **NO** to all questions: go to Page 2 – ASSESS YOUR CURRENT PHYSICAL ACTIVITY ➤

YES to any question: go to Reference Document – ADVICE ON WHAT TO DO IF YOU HAVE A YES RESPONSE ➤➤

PAGE 1 OF 2



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Get Active Questionnaire

ASSESS YOUR CURRENT PHYSICAL ACTIVITY

Answer the following questions to assess how active you are now.

1 During a typical week, on how many days do you do moderate- to vigorous-intensity aerobic physical activity (such as brisk walking, cycling or jogging)? ☐ DAYS/WEEK

2 On days that you do at least moderate-intensity aerobic physical activity (e.g., brisk walking), for how many minutes do you do this activity? ☐ MINUTES/DAY

For adults, please multiply your average number of days/week by the average number of minutes/day: ☐ MINUTES/WEEK

Canadian Physical Activity Guidelines recommend that adults accumulate at least 150 minutes of moderate- to vigorous-intensity physical activity per week. For children and youth, at least 60 minutes daily is recommended. Strengthening muscles and bones at least two times per week for adults, and three times per week for children and youth, is also recommended (see csep.ca/guidelines).

GENERAL ADVICE FOR BECOMING MORE ACTIVE

Increase your physical activity gradually so that you have a positive experience. Build physical activities that you enjoy into your day (e.g., take a walk with a friend, ride your bike to school or work) and reduce your sedentary behaviour (e.g., prolonged sitting).

If you want to do **vigorous-intensity physical activity** (i.e., physical activity at an intensity that makes it hard to carry on a conversation), and you do not meet minimum physical activity recommendations noted above, consult a Qualified Exercise Professional (QEP) beforehand. This can help ensure that your physical activity is safe and suitable for your circumstances.

Physical activity is also an important part of a healthy pregnancy.

Delay becoming more active if you are not feeling well because of a temporary illness.

DECLARATION

To the best of my knowledge, all of the information I have supplied on this questionnaire is correct.
If my health changes, I will complete this questionnaire again.

I answered NO to all questions on Page 1

Sign and date the Declaration below

I answered YES to any question on Page 1

Check the box below that applies to you:

☐ I have consulted a health care provider or Qualified Exercise Professional (QEP) who has recommended that I become more physically active.

☐ I am comfortable with becoming more physically active on my own without consulting a health care provider or QEP.

Name (+ Name of Parent/Guardian if applicable) [Please print] | Signature (or Signature of Parent/Guardian if applicable) | Date of Birth

Date | Email (optional) | Telephone (optional)

With planning and support you can enjoy the benefits of becoming more physically active. A QEP can help.

☐ Check this box if you would like to consult a QEP about becoming more physically active.
(This completed questionnaire will help the QEP get to know you and understand your needs.)

PAGE 2 OF 2

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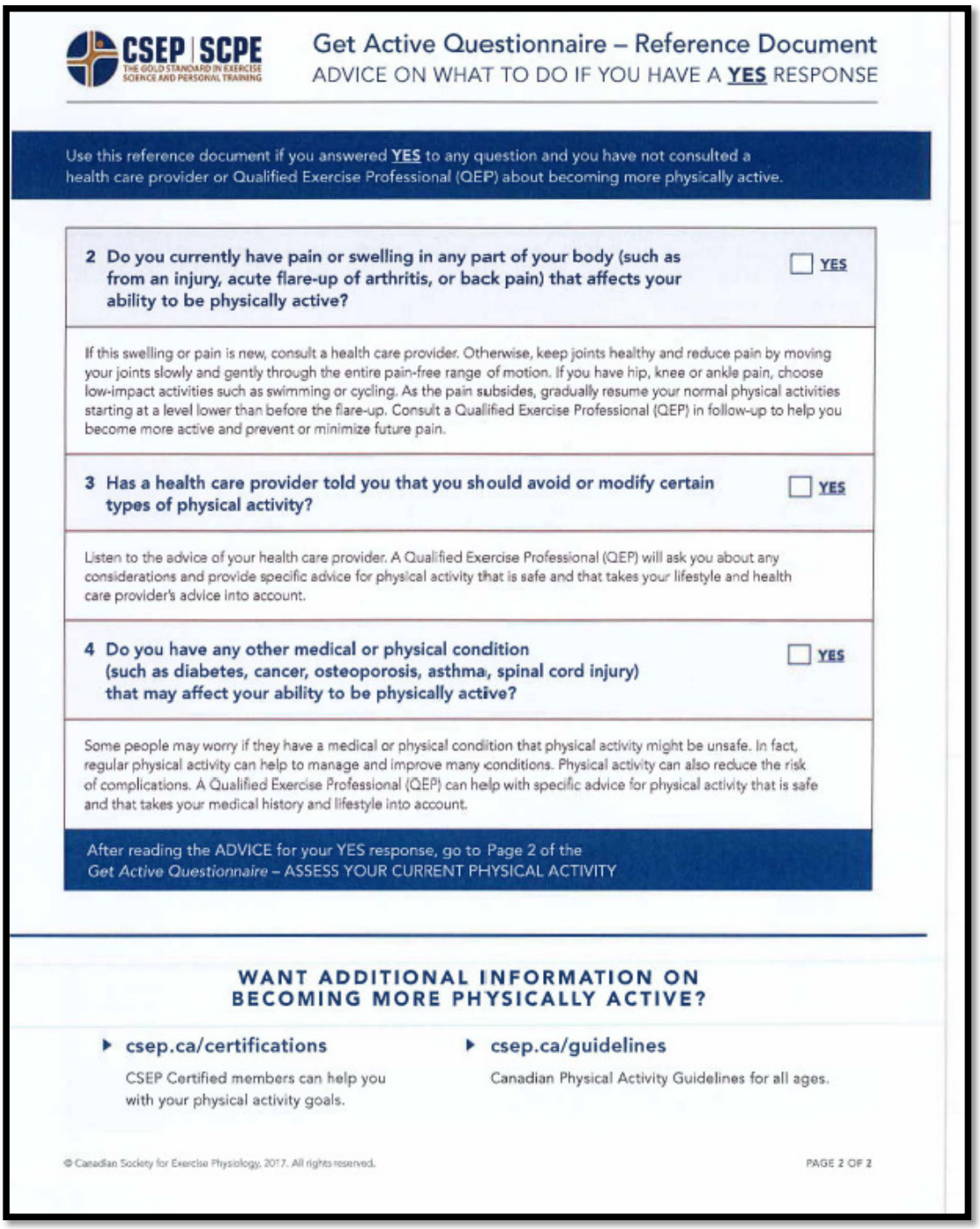
Get Active Questionnaire – Reference Document

ADVICE ON WHAT TO DO IF YOU HAVE A **YES** RESPONSE

Use this reference document if you answered **YES** to any question and you have not consulted a health care provider or Qualified Exercise Professional (QEP) about becoming more physically active.

1 Have you experienced ANY of the following (A to F) within the past six months?	
A A diagnosis of/treatment for heart disease or stroke, or pain/discomfort/pressure in your chest during activities of daily living or during physical activity? ☐ **YES**	Physical activity is likely to be beneficial. If you have been treated for heart disease but have not completed a cardiac rehabilitation program within the past 6 months, consult a doctor – a supervised cardiac rehabilitation program is strongly recommended. If you are resuming physical activity after more than 6 months of inactivity, begin slowly with light- to moderate-intensity physical activity. If you have pain/discomfort/pressure in your chest and it is new for you, talk to a doctor. Describe the symptom and what activities bring it on.
B A diagnosis of/treatment for high blood pressure (BP), or a resting BP of 160/90 mmHg or higher? ☐ **YES**	Physical activity is likely to be beneficial if you have been diagnosed and treated for high blood pressure (BP). If you are unsure of your resting BP, consult a health care provider or a Qualified Exercise Professional (QEP) to have it measured. If you are taking BP medication and your BP is under good control, regular physical activity is recommended as it may help to lower your BP. Your doctor should be aware of your physical activity level so your medication needs can be monitored. If your BP is 160/90 or higher, you should receive medical clearance and consult a QEP about safe and appropriate physical activity.
C Dizziness or lightheadedness during physical activity ☐ **YES**	There are several possible reasons for feeling this way and many are not worrisome. Before becoming more active, consult a health care provider to identify reasons and minimize risk. Until then, refrain from increasing the intensity of your physical activity.
D Shortness of breath at rest ☐ **YES**	If you have asthma and this is relieved with medication, light to moderate physical activity is safe. If your shortness of breath is not relieved with medication, consult a doctor.
E Loss of consciousness/fainting for any reason ☐ **YES**	Before becoming more active, consult a doctor to identify reasons and minimize risk. Once you are medically cleared, consult a Qualified Exercise Professional (QEP) about types of physical activity suitable for your condition.
F Concussion ☐ **YES**	A concussion is an injury to the brain that requires time to recover. Increasing physical activity while still experiencing symptoms may worsen your symptoms, lengthen your recovery, and increase your risk for another concussion. A health care provider will let you know when you can start becoming more physically active, and a Qualified Exercise Professional (QEP) can help get you started.

After reading the ADVICE for your YES response, go to Page 2 of the *Get Active Questionnaire* – ASSESS YOUR CURRENT PHYSICAL ACTIVITY



CSEP | SCPE
THE GOLD STANDARD IN EXERCISE SCIENCE AND PERSONAL TRAINING

Get Active Questionnaire – Reference Document
ADVICE ON WHAT TO DO IF YOU HAVE A **YES** RESPONSE

Use this reference document if you answered **YES** to any question and you have not consulted a health care provider or Qualified Exercise Professional (QEP) about becoming more physically active.

2 Do you currently have pain or swelling in any part of your body (such as from an injury, acute flare-up of arthritis, or back pain) that affects your ability to be physically active? ☐ YES

If this swelling or pain is new, consult a health care provider. Otherwise, keep joints healthy and reduce pain by moving your joints slowly and gently through the entire pain-free range of motion. If you have hip, knee or ankle pain, choose low-impact activities such as swimming or cycling. As the pain subsides, gradually resume your normal physical activities starting at a level lower than before the flare-up. Consult a Qualified Exercise Professional (QEP) in follow-up to help you become more active and prevent or minimize future pain.

3 Has a health care provider told you that you should avoid or modify certain types of physical activity? ☐ YES

Listen to the advice of your health care provider. A Qualified Exercise Professional (QEP) will ask you about any considerations and provide specific advice for physical activity that is safe and that takes your lifestyle and health care provider's advice into account.

4 Do you have any other medical or physical condition (such as diabetes, cancer, osteoporosis, asthma, spinal cord injury) that may affect your ability to be physically active? ☐ YES

Some people may worry if they have a medical or physical condition that physical activity might be unsafe. In fact, regular physical activity can help to manage and improve many conditions. Physical activity can also reduce the risk of complications. A Qualified Exercise Professional (QEP) can help with specific advice for physical activity that is safe and that takes your medical history and lifestyle into account.

After reading the ADVICE for your YES response, go to Page 2 of the *Get Active Questionnaire* – ASSESS YOUR CURRENT PHYSICAL ACTIVITY

WANT ADDITIONAL INFORMATION ON BECOMING MORE PHYSICALLY ACTIVE?

- **csep.ca/certifications**
  CSEP Certified members can help you with your physical activity goals.
- **csep.ca/guidelines**
  Canadian Physical Activity Guidelines for all ages.

PAGE 2 OF 2