



Fitness Test Form

ID: _____
 Visit: Pre-randomization 05
 6 month 08
 18 month 10

Date: ____ / ____ / _____

AGE: _____

GENDER: M / F

1. Compute predicted maximal heart rate (220 – age in years) _ _ _ _
x 0 . 8 5
2. Compute 85% predicted maximal heart rate..... _ _ _ _
3. Measure pre-exercise blood pressure _ _ _ _ / _ _ _ _
4. Measure pre-exercise heart rate _ _ _ _
5. Conduct Treadmill Test

Time	Stage	Speed/Grade	Heart Rate	BP	RPE
0 min.	Warm Up	2 MPH / 0% grade			
1 min.		↓			
2 min.	Stage 1	__ MPH / 2% grade			
3 min.		↓	2:50 _ _ _ _ ¹		
4 min.		↓	3:50 _ _ _ _ ¹		
5 min.	Stage 2	__ MPH / 7% grade	4:50 _ _ _ _ ¹	4:20 _ _ _ _ / _ _ _ _ ²	4:20 _ _ _ ³
6 min.		↓	5:50 _ _ _ _ ¹		
7 min.		↓	6:50 _ _ _ _ ¹		
8 min.	Cool Down	2 MPH / 0% grade	7:50 _ _ _ _ ¹	7:20 _ _ _ _ / _ _ _ _ ²	7:20 _ _ _ ³
9 min.		↓			
10 min.		↓	9:50 _ _ _ _		

6. Measure post-exercise blood pressure (after 3 mins.)..... _ _ _ _ / _ _ _ _
7. Measure post-exercise heart rate (after 3 mins.)..... _ _ _ _
8. Fitness Test Outcome..... **terminated**^{1,2,3} 1
completed 2

Collected by (staff ID):	_____
Reviewed by (staff ID):	_____
Entered by (staff ID):	_____

¹ If heart rate greater than 85% of max (item 2 above) then terminate test.
² If SBP>240 or DBP>115 then terminate test.
³ If RPE>17 then terminate test.

Overview

The fitness test form is filled out by the treadmill technician. Part of the form is complete before the participant arrives, the rest is completed during the test.

Administration Instructions

Attach an ID label to the form. Using a blue or black pen, check the appropriate box to designate the appropriate visit: Pre-randomization, 6, or 18 month. Only one box should be marked.

Before participant arrives, fill out his/her age and gender in the boxes at the top of the page. Then complete items 1 and 2 (compute 85% max heart rate). Round off all decimals for the 85% max heart rate (150.4 rounds to 150, 150.5 rounds to 151). Finally, use participant's age at baseline and gender to fill in the appropriate speed for the treadmill for stages 1 and 2. Enter the appropriate speeds in the table for item 5.

Complete the remainder of the form as the participant does the test. Consult MOP chapter 18 for information on how to conduct the test.

Coding Instructions

No coding is required.

Review Instructions

Page 1 should have an ID label and be dated.

Make sure the form is legible. Because the form is completed in a hurry while the test is ongoing, it may be necessary to go back and clarify some of the notations. In this case, do not mark over the original values, just add a clarifying notation in the margin (date and initial it).

If test was terminated:

- Make sure questions 1, 2, 3, 4, 6, 7, and 8 were completed.

If test was not terminated:

- Make sure all questions were completed.
- Check to be sure participant's heart rate, BP, and Rating of Perceived Exertion (RPE) stayed below the termination levels throughout the test. Termination levels are 85% max (from item #2) for heart rate, SBP>240 or DBP>115 for blood pressure, or a RPE>17. If levels were exceeded and the test was not terminated, refer this case to the clinician, investigator, and clinic coordinator for immediate review. Also notify the coordinating center of the safety violation.
- If the test was terminated due to heart rate, record the heart rate in the next available heart rate space.

Additional Instructions

Age and gender are not entered.