

Medical Clearance Form Exercise Class

Name of Patient			Date	
through the Emp William Beam, F	oloyee Wellness Prog Ph.D., associate profe	gram at Cal State Full essor in the Division o	ass and fitness assessment being offered erton. The program is under the direction of Kinesiology and Health Science. Dr. Bei	
and aerobic train strength training be done at a "m	ning. The strength tra machines, free weig oderate" intensity, ab	aining typically consise the sand floor exercise the sand floor exercise the sand floor exercise the same the s	emphasis of the class is on strength training of sets of 8-12 repetitions on a variety case. It is recommended that the aerobic trainate reserve for 15-30 minutes. However, appropriate.	of ining
Please indicate l	below for which of the	following your patien	t is cleared to participate:	
Strength training: Limitations	() Yes with no lii	mitations () <u>Yes</u> wit	th limitations below () <u>No</u> cannot participat	.e
Aerobic training: Limitations	() <u>Yes</u> with no lii	mitations () <u>Yes</u> wit	th limitations below () <u>No</u> cannot participat	e
strength, flexibil conducted on a some cases (de either be a subn	ity and/or lung function treadmill or cycle ergon pending on exercise naximal test (typically	on. Aerobic fitness is cometer. The particip risk) electrocardiogra stopping at 80-85%	composition, aerobic fitness, blood pressur measured through a graded exercise test ant's heart rate and blood pressure and in am are recorded during the test. The test of of the participant's heart rate reserve) or a cic, it is solely for the purpose of fitness	can
Please indicate l	below for which of the	following your patien	t is cleared to participate:	
Exercise test: Limitations	() <u>Yes</u> with no lii	mitations () <u>Yes</u> wi	th limitations below () <u>No</u> cannot participat	e
Signature of Physician / Primary Care Provider			Date	
Printed Name of	Physician / Medical Gre	oup	Please return this form to:	
Street Address			Employee Wellness Program Kinesiology & Health Science, KHS-1	21
City	State	Zip	Cal State Fullerton 800 N. State College Blvd. Fullerton, CA 92834	

Phone