Common sense is your best guide when you answer these questions. Please read the questions carefully, and answer each one honestly: Circle YES or NO

1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?
   - YES
   - NO

2. Do you feel pain in your chest when you do physical activity?
   - YES
   - NO

3. In the past month, have you had chest pain when you were not doing physical activity?
   - YES
   - NO

4. Do you lose your balance because of dizziness or do you ever lose consciousness?
   - YES
   - NO

5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?
   - YES
   - NO

6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
   - YES
   - NO

7. Do you know of any other reason why you should not do physical activity?
   - YES
   - NO

If you answered YES to any of the above questions, you must obtain medical clearance from a physician before you may take the Paramedic Physical Fitness Test. Contact occupational.testing@umanitoba.ca for the Physician’s Release Form.