**Chapter 6: Pre-Activity Health Screening and Fitness Testing**

**As demonstrated in many of the cases described in this textbook, plaintiffs often file negligent claims alleging the defendant(s) failed to conduct pre-activity health screening and fitness assessments. To minimize these types of claims, it is essential that fitness managers develop screening and testing procedures that reflect applicable laws and published standards of practice. Once developed, training of employees involved in screening/testing is needed so that the procedures are properly implemented.**

Review the learning objectives listed on page 207 in the text. After reading this chapter, complete the following study questions. **Instructions:** **Click on the shaded box provided - then type in your answer.**

**Study Questions**

1. (1) List and describe the two main purposes of pre-activity health screening.

(2) Describe one of the studies included in this chapter that provided data regarding the number of U.S adults with chronic diseases.

1. *ACSM’s Health/Fitness Facility Standards and Guidelines* (5th ed.) states: “Facility operators shall offer a self-guided or professionally-guided exercise preparticipation health screening tool…to all new members and prospective users.” Describe each and in what settings each is best used:
2. Self-guided
3. Professionally-guided
4. Explain how each of the following are different.
5. Medical history
6. Medical release
7. Medical clearance
8. Medical evaluation
9. The following questions are related to the 2014 national study that obtained data from ACSM certified exercise physiologists, described on pp. 209-211.
10. **True or False:** Compliance rates regarding the percentage of fitness facilities requiring new participants to complete a pre-activity health screening device varied among the types of fitness settings.
11. Study participants described reasons why their fitness facility did not conduct pre-activity health screenings (see list on p. 210). Explain why these are, likely, not legal defenses that can be used in a court of law.
12. Study participants also identified three areas of challenges (summarized on pp. 210-211). Describe how these challenges can be addressed. Hint: See Risk Management Strategy #5 (pp. 234-236).
13. Why do you believe that only 1/3 of managers were “very familiar” with ACSM published standards of practice regarding pre-activity health screening, as shown in Table 6-2 on p. 210?
14. The PASQ was developed as a professionally-guided screening questionnaire based on the criteria published in *ACSM’s Health/Fitness Facility Standards and Guidelines* (5th ed.). Referring to the PASQ forms in the Appendix, describe the five steps involved in professional-guided screening procedures.




20. The PAR-Q+ is frequently used in fitness facilities. Describe its advantages compared to the PASQ.
21. Pre-activity health screening questionnaires, such as the PASQ, are generally completed when an individual joins a fitness facility. When should fitness managers and exercise professionals have participants complete a medical history questionnaire?
22. What guidance should the facility’s risk management advisory committee members such as the medical advisor, clinical exercise physiologist, and legal counsel provide with regard to pre-activity health screening/medical history and fitness testing procedures?
23. Medical advisor
24. Clinical exercise physiologist
25. Legal counsel
26. What are the four major purposes of health-related fitness testing?



31. Maximal fitness tests are not recommended in fitness facilities given they may increase the risk of injury. Describe two typical “sub-maximal” fitness tests that can quickly become maximal or near maximal tests and why they should be avoided and/or modified.

1. How should fitness managers and exercise professionals help ensure that employees involved in fitness testing follow all of the safety precautions listed in Step C on p. 215?

Hint: See Risk Management Strategies #8 and #9.

1. Although HIPAA will likely not apply to most fitness facilities, fitness facilities could be subject to state privacy laws as well as various civil claims for not keeping an individual’s health/fitness data private, confidential, and secure. List examples of forms obtained in screening and testing procedures that need to be kept private, confidential and secure.
2. Two contracts were described in this chapter – the Refusal Form and Informed Consent in Exhibits 6-1 and 6-2, respectively.

1. Which one contains exculpatory language?
2. Describe two situations when an informed consent is legally required?
3. **True or False:** Place a T or F in the space provided.

      A) According to a 2014 national study, 35% of fitness facilities had at least one CV event in the past five years.

      B) A self-guided pre-activity screening tool is best used in non-staffed fitness facilities.

      C) An informed consent is like an express assumption of risk in that it explicitly informs the individual of the risks inherent in the activity.

      D) Legal liability exposures exist for clinical exercise testing but not for health- related fitness testing.

      E) An informed consent contains an exculpatory clause.

      F) There are no laws that employer-sponsored wellness programs need to follow when employees complete a medical history questionnaire.

      G) Pre-activity heath screening procedures should include having new participants provide emergency contact information.

      H) There are no laws that fitness facilities need to follow if they conduct blood tests such as fingerstick tests.

      I) Criteria used to determine the need for medical clearance must be the same for all participants to minimize potential ADA violations.

      J) It is okay for exercise professionals to discuss the health/fitness status of their

participants in open areas like the front desk.

1. Numerous negligence claims made in the *Baldi-Perry* case (described in Chapter 2) related to screening and testing failures are listed on p. 221. In addition to the three spotlight cases in this chapter, other cases (see Table 6-4 on p. 231) involved similar negligent claims. These cases demonstrate the importance of conducting proper screening and testing procedures. Describe the evidence the court considered when ruling in the following two spotlight cases.
2. *Covenant Health System v. Barnett*
3. *Howard v. Missouri Bone and Joint Center*
4. (1) Why should exercise professionals avoid using the phrase “no pain, no gain”?

(2) Why is it essential that exercise professionals be able to distinguish “pain” and

“muscle soreness”?

1. **Case Study:**

Mr. Anderson is a faculty member at Florida’s Best University (FBU). As an employee, he was able to join the FBU’s campus recreation facility at a discounted rate. He enjoyed walking around the facility’s indoor track two-three times per week. Upon joining, he completed the PASQ – the pre-activity health screening form completed by all new members. He did not indicate any health issues on the PASQ that required him to obtain medical clearance. After about six months, he enrolled in the campus recreation personal fitness training program. All personal fitness trainers who worked in the facility were current students in the FBU’s Kinesiology program. To become a personal fitness trainer, they had to possess an accredited personal trainer certification. Mr. Anderson was assigned a personal trainer, MB, by the facility’s personal trainer coordinator. The coordinator provided MB with a copy of Mr. Anderson’s completed PASQ.

In the first session, Mr. Anderson informed MB that he wanted to improve his flexibility and muscle strength. MB did not ask him about any medical conditions and assumed, based on the PASQ, he was apparently healthy. However, Mr. Anderson had back problems in recent years including a herniated disc. MB did not have Mr. Anderson perform any fitness assessments – only some skinfold measurements. After this brief skinfold assessment, MB had Mr. Anderson perform a deadlift with 80 pounds. While performing the lift, they both heard a loud pop. Mr. Anderson told MB he was experiencing a sharp pain in his back and down his leg. MB told him not to worry, that aches and pains are common when beginning a new exercise program and that it was fine for him to continue with the deadlifts, so he did. Soon, thereafter, the pain became much worse and Mr. Anderson fell to the ground. EMS was called and they took him to the hospital where he was diagnosed with two herniated discs that required surgery. Mr. Anderson then filed a complaint alleging negligence on part of MB and the facility.

1. List the possible negligent claims made against the trainer, MB.
2. List the possible “direct liability” negligence claims made against the campus recreation facility.

1. How will Mr. Anderson prove the defendants were negligent?
2. Why should personal fitness trainers conduct medical histories and proper fitness assessments to help prevent what happened in this case?
3. The medical clearance form in the Appendix (Form 6-4, p. 246) is completed by the fitness participant’s health care provider. The intensity levels were included in this form because (a) the ACSM only provided medical clearance recommendations for moderate and vigorous intensity levels (high intensity was missing), and (b) high intensity programs are very popular. Why would it be a good practice to have participants who enroll in a high intensity exercise program to first obtain medical clearance?
4. In *Nosal-Tabor v. Sharp Chula Medical Center,* a nurse refused to perform stress tests because the medical center had not adopted legally required standards specified by the California Nursing Practice Act and guidelines promulgated by the Nursing and Medical Board of California. For her inactions, the nurse was fired and she filed a wrongful termination claim.
5. The trial court ruled in favor of the medical center. Explain why the appellate court reversed this ruling?
6. What are the lessons learned from this case for non-physicians who conduct clinical stress tests?

**Continue to next page for final question, #20**

1. **Matching:** Indicate the correct response in the space provided from the list of terms below.

      Case in which the plaintiff claimed her injuries from a fall off the treadmill were due to the improper supervision by medical personnel during a stress test. The court ruled that the plaintiff failed to file her claim within the statute of limitations required for a medical malpractice claim.

      Individually identifiable health information that is protected under the HIPAA.

      A test prescribed by a physician or other health care provider for diagnostic reasons and is conducted in a clinical or medical setting.

      The right of an individual to enjoy freedom from intrusion…; the right to maintain control over personal information.

      Case in which the court ruled the plaintiff assumed the risks even though his personal fitness trainer failed to assess his health history, physical condition, and cardiac risk factors.

      The practice of permitting only certain authorized individuals to access individually identifiable health information.

      A term that refers to the safeguards used to control access and protect individually identifiable health information from disclosure to unauthorized persons.

      A law that may be violated if a fitness facility does not treat all new participants the same with regard to pre-activity health screening procedures.

1. Confidentiality E. PHI
2. *Rostai v. Neste Enterprises* F. Privacy
3. GXTG. ADA
4. Security H*. Moore v. Jackson Cardiology Associates*