

# Endurance Athlete Cardiovascular Risk Assessment

## Personal Information

Name

Date of Birth

Age

Gender

## Sport & Training History

Primary Sport

Years of Endurance Training

Average Weekly Training Hours

## Medical History

Family History of Cardiovascular Disease

Personal History of Heart Conditions

Other Medical Conditions

## Symptoms & Alarming Events

Have you experienced any of the following?

History of Fainting, Chest Pain, or Palpitations during Exercise

## Lifestyle Factors

Smoking Status

Alcohol Consumption (drinks/week)

Brief Dietary Description

## Vital Signs

Blood Pressure (mmHg)

Resting Heart Rate (bpm)

## Recent Cardiac Evaluation

Type of Evaluation

Date of Evaluation

Key Findings