CSEP Certified Personal Trainer®
Update to Pre-Participation Screening Procedures

As stated in the CSEP Physical Activity Training for Health (CSEP-PATH) manual, pre-participation screening is an essential part of STEP 1 – ASK: Getting to Know the Client.

“Although becoming more physically active is very safe for most people and yields many health benefits, it is important to screen new clients to identify those who may need a more thorough evaluation before doing a fitness assessment or becoming much more physically active. The screening process also provides an opportunity for the qualified exercise professional to begin to gain insights on the client’s motivations, aspirations, readiness for change and knowledge of physical activity, fitness and health.”

- CSEP-PATH (2013) page 47

CSEP Professional Standards Program™ Committee also recognizes the importance of pre-participation screening and, as such, recommended both certifications use the PAR-Q+ (2011). While the PAR-Q+ was an evidence-based, self-administered screening tool, the CSEP Board of Directors made a decision in 2015 to develop an updated and re-branded pre-participation screening tool. The new tool was to be user-friendly; grounded in evidence; and would safely encourage and ‘screen-in’ for regular, healthy physical activity.

After two years of development, CSEP is proud to introduce the Get Active Questionnaire! The development of the Get Active Questionnaire included early input from CSEP members via an online member survey; a strategic planning session with CSEP members, stakeholders and other experts; and an environmental scan of pre-screening procedures followed by like organizations. After the Steering Committee developed an early version of the Get Active Questionnaire, it was sent back to members for feedback/input via a second member survey. After this, CSEP commissioned three studies to evaluate the effectiveness of the tool in each of the following community-dwelling populations: older adults, children, and apparently healthy individuals. The overall results from the studies were generally positive and led to further refinement of the Get Active Questionnaire by the Steering Committee. The result of two years of hard work is the attached Get Active Questionnaire, the accompanying Get Active Questionnaire Reference Document, and the CSEP-CPT Health Screening Tool.

The Get Active Questionnaire is a two-page self-administered, pre-participation screening tool. The accompanying Get Active Questionnaire Reference Document allows the user to make an informed decision about appropriateness of physical activity/exercise or whether further information from a health care provider or qualified exercise professional is warranted. The CSEP-CPT Health Screening Tool can be used in addition to the Get Active Questionnaire and only when a client declares during the pre-screening process outlined on the following pages that he/she has a medical condition.

Until the CSEP-PATH 2nd edition is complete with inclusion of the Get Active Questionnaire and accompanying reference document, please refer to the pre-participation screening process outlined in this document. a CSEP-CPT should be following as part of STEP 1-ASK. More information on actual use and interpretation of the Get Active Questionnaire is available in the webinar: Guide to Using the Get Active Questionnaire. This webinar is free and worth 5 Professional Development Credits.
A CSEP-CPT® works with apparently healthy individuals or those with one stable health condition that are able to exercise independently. In other words, a CSEP-CPT is sanctioned to work with lower risk individuals. Risk is determined through a series of steps and processes, including:

1. Use of an evidence-informed tool to help identify individuals who should first seek advice from an appropriate health care provider before becoming more physically active.
2. Measurement of resting blood pressure and heart rate to ensure each are within acceptable limits.
3. Determination of client’s medical history (such as any suspected or diagnosed conditions, symptoms associated with the condition, current medications being taken, or other doctor-prescribed therapies)
4. Confirmation, that if a client has a diagnosed medical condition, that the condition is stable and the risk of an adverse event during exercise is low.
5. Determination of a client’s current activity level, which also helps establish level of risk

As part of **STEP 1 – ASK**, outlined in the CSEP Physical Activity Training for Health (CSEP-PATH) manual, a CSEP-CPT will get to know the client and accordingly chart all information in his/her SOAP notes. As part of **Step 1 – ASK**, the CSEP-CPT should do the following:

**A. GET ACTIVE QUESTIONNAIRE AND RESTING HEART RATE/BLOOD PRESSURE**: Have the client complete an informed consent, pre-participation screening tool (such as the Get Active Questionnaire), and any other necessary paperwork used as part of STEP 1 - ASK. All forms, as appropriate, should be signed and dated (and if necessary, witnessed). Review the answers to the Get Active Questionnaire and determine if any initial responses on this form should prompt the client to first seek clearance from an appropriate health care provider before proceeding (i.e., client identifies on GAQ that he/she has pain/discomfort/pressure in his/her chest during activities of daily living or during physical activity or gets dizzy/lightheaded during physical activity, had a recent concussion, etc.).

Measure resting heart rate (HR) and blood pressure (BP). If resting HR is >100 bpm or systolic BP is >160 mmHg or diastolic BP is >90 mmHg (following the procedures for measuring each of HR and BP as outlined in the CSEP-PATH), the client should see a health care provider for clearance or be referred to a CSEP-CEP. **NOTE**: The change in BP limits is based on work done by Thomas et al (2011) on risk of an adverse event in individuals with established hypertension.

**B. MEDICAL HISTORY**: Determine if client has any suspected or diagnosed medical conditions or is taking any medications. **ASK** clients the following questions, regardless of the answers provided on the Get Active Questionnaire:

- **Do you have a suspected or diagnosed medical condition?**
- **Do you have any symptoms associated with the medical condition?**
- **Do you currently take any medications?**
If there are no medical conditions or medications being taken, and HR and BP are below cutoffs, proceed to **STEP 2 – ASSESS** as described in the CSEP-PATH manual, which includes an assessment of current levels of physical activity participation and fitness.

If the client answers YES to any of these questions, proceed to **C** and **D**.

**C. PHYSICAL ACTIVITY:** Consider the client’s PA level, based on either information obtained from the Get Active Questionnaire and/or using the PASB-Q. The cardiovascular risks associated with exercise lessen as individuals become more physically active.

**D. RISK OF ADVERSE EVENT:** A CSEP-CPT can work with clients who have one diagnosed medical condition that is “stable” or lower risk. This generally is considered to mean:

i) medical condition is being medically managed and client is asymptomatic;
ii) no change in medication or treatment plan in the past 6 months; and
iii) if physician has prescribed a medication, it is being taken as directed.

Examples of common conditions that are lower risk for an adverse event during exercise include: hypertension when resting BP is <160/90 mmHg; type II diabetes when blood glucose levels are being effectively managed either by medication or by diet and lifestyle, with no evidence of diabetic complications; or osteoarthritis when there is not currently excessive pain or inflammation. The **CSEP-CPT Health Screening Tool** can help identify common medical conditions that are lower risk. **However, even if the medical condition shown to be stable or lower risk, the CSEP-CPT must ultimately have the knowledge, skills and abilities to know how the medical condition, medications, and/or treatment affects the response to exercise, otherwise the client should be referred to a CSEP-CEP.**

If the client has a medical condition that is potentially unstable, has more than one medical condition, or has provided unclear information about their personal health history then he/she should be referred to a CSEP-CEP for exercise advice or to an appropriate health care provider to seek clearance for unrestricted physical activity. As noted in the CSEP-CPT Scope of Practice, it is crucial that a CSEP-CPT recognizes their own expertise and knows when to refer clients to other professionals.

For individuals who are deemed to have a lower risk medical condition, the benefits of physical activity outweigh the risks and the CSEP-CPT can proceed to **STEP 2 – ASSESS** of the CSEP-PATH process. If the client currently engages in regular moderate intensity physical activity, then moderate intensity activity is likely safe and can progress as appropriate. If the client is currently inactive then the exercise prescription should be adjusted accordingly to begin at a lower intensity and volume. Progressions in this case should be made gradually and as tolerated.

**Important considerations:** **Any medical information gained from the client should be charted in SOAP notes.** In the rare circumstance where an adverse event occurs during exercise, the CSEP-CPT will have documentation to support that they completed their ‘due diligence’ and acted in a ‘reasonably safe’ manner. A CSEP-CPT should consider taking appropriate continuing education courses to help them better understand any medical conditions they deal with in their practice.