



Physical Activity Readiness Questionnaire (Par-Q) Postnatal Pilates

Your Details	
Name:	Address:
Date of Birth:	
Phone number:	Occupation:
Email:	Emergency contact:
Birth Details	
Date of delivery:	Type of delivery:
Multiple Birth:	Episiotomy/Tearing:
How would you rate your energy levels: (1=very low, 10=very high)	Breastfeeding: If yes, any soreness/tenderness:
Date of postnatal checkup:	Diastasis Recti:
Details of postnatal checkup:	Pelvic Girdle Pain:
	Pelvic Floor weakness:
Please give any other information regarding your pregnancy/birth that you feel may be relevant to your participation in this class:	
Updates:	
Activity Details:	
Exercise History:	
Exercise Goals:	
Please rate your fitness (1=very low, 10=very high)	Please rate your motivation (1=very low, 10=very high)
Areas of specific interest/concern:	

General Medical History		
Have you ever suffered from heart trouble?	Yes	No
Are you presently taking any form of medication?	Yes	No
Do you suffer from chest pains?	Yes	No
Do you ever have spells of dizziness or feel faint?	Yes	No
Have you ever had asthma, chronic bronchitis or any other chest ailments? If yes, please indicate which:	Yes	No
Do you suffer from back pain or any orthopaedic problem? If yes, please indicate which:	Yes	No
Do you suffer from severe headaches or migraines?	Yes	No
Are you recuperating from any recent illness/operation or injury?	Yes	No
Have you any medical conditions that could affect your ability to participate in this class?	Yes	No
Are you pregnant? If yes, how many months:	Yes	No
Is there any history of heart disease in your immediate family (under the age of 55)?	Yes	No
Have you ever had either high or low blood pressure? If yes, please indicate which:	Yes	No
Have you ever had high cholesterol?	Yes	No
If you have answered Yes to any of these questions, or you are currently on any medication, please give further details:		
Updates:		
Please note: If you answered YES to any of the above questions, you are advised to seek medical advice/approval before commencing an exercise programme.		
<p><i>I have been informed that if I answer YES to any of the questions of this form, I should seek medical advice/approval before starting and exercise programme and/or induction. If I wish to continue without such advice, I do so entirely at my own risk. I confirm that I have read, fully understood and answered the above questions honestly. I understand that AM Pilates cannot be held responsible for any injuries or ill health arising from my participation in the exercise programme.</i></p> <p><i>I have been informed that I am required to update this PAR-Q should my medical status change. I understand that I am at all times responsible for the wellbeing and safety of any of my children or dependents that I bring with me to the class for the entire duration of the class.</i></p> <p><i>I consent that my personal data is collected, handled and stored in compliance with the 2018 GDPR (General Data Protection Regulation). I have been informed about the purposes for processing my personal data, the retention period for that personal data, who it will be shared with and my right of withdrawal of consent.</i></p>		
Start Date:	End Date:	
Signed Client:	Date:	
Signed Instructor:	Date:	
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Diastasis Recti

A separation of the vertical abdominal muscles (rectus abdominis) can be the result of pregnancy, posture and movement habits, injury or muscular weaknesses. The linea alba, the connective tissue between both strands of muscle becomes stretched and thinner. An increase in intra-abdominal pressure can cause 'doming', a tent-shaped protrusion along the linea alba where the abdominal contents push outwards.

How to check for Diastasis recti:

Lie on your back, knees bent and feet flat on the floor. You can support your head with a cushion.

Start by placing your fingertips above your bellybutton and explore how the area above and below it feels (soft/firm). Contract your abdominals a little, keep feeling with your fingertips along the linea alba.

This will give you a good impression how soft/firm the connective tissue is. Next, extend the forefinger and the middle finger of your right hand and line them up vertically, along your linea alba, fingertips on your bellybutton. The heel of your hand points to your breastbone (Image 1).

Supporting your head with your left hand, lift your head off the floor. The two strands of muscle on either side of your fingers contract, they feel a bit like two pieces of thick rope (Image 2).

You now need to measure, how many fingers fit into the gap between the muscles. Move your fingers up and down. The gap is usually widest around the bellybutton.

A gap of 2 fingers or more is called Diastasis Recti. We will address this during the exercises and adapt them accordingly.

