

## Chapter 5 Study Questions

1. You are running an exercise clinic and you need to decide what rules to follow regarding CAD screening for your clients. According to ACSM guidelines, which clients should have a stress test before beginning a vigorous exercise schedule in your gym?
2. What level of risk (deaths/10,000) is a subject exposed to when he performs an exercise stress test? What assumptions are inherent in that level of risk?
3. Are maximal stress tests riskier than submaximal?
4. When conducting a stress test, which 8 absolute indicators tell you to immediately stop the test?
5. What do we mean by an absolute vs. a relative guideline for testing?
6. Name some relative indicators to stop a test? (there are 7)
7. Name the 9 absolute contra-indicators to perform a stress test.
8. Describe some of the relative contra-indicators to perform a stress test (there are 12).
9. You start working at a new clinic. They tell you that you must stop a stress test if the subject's heart rate exceeds his age-predicted maximal HR or if systolic blood pressure exceeds 200 mmHg. A 70 yr-old client gets on the treadmill and his systolic blood pressure reaches 200 yet his heart rate is well below age-predicted max. What do you do? What is the ACSM guideline for terminating a test? Absolute or relative?
10. You start working at a new clinic. They tell you they don't use the ACSM guidelines for their clients and they are going to use other guidelines established by their board of directors. What do you do?
11. Describe how you would explain to a client the risk involved in performing a stress test.
12. What is the difference between stable and unstable angina?
13. What is atypical angina?
14. Make sure you can recognize V Tach on an EKG. What do you do if you see it during a stress test?

