

Tour De Okinawa 2010 Health Check Sheet

Name of course : _____

this sheet need for attandance of Tour De Okinawa 2010, letting know your health over 70 years old.
Past 1 year, no taking medical checks who riders, thinking with chance to checks it this time?

We noticed tell you medical agency with individual.

Please write each blancks you need it.

【1】Having Sicks(or had sickness)	
High Blood Pressure	Yes · No
Low Blood Pressure	Yes · No
High Blood Suger (Diabetes)	Yes · No
Angina Pectoris · Arteriosclerosis.	Yes · No
Hypertrophy	Yes · No
Electrocardiogram disorder · Heart Noise	Yes · No
Irregular Pulse	Yes · No
Cerebrovascular Accident	Yes · No
Anemia	Yes · No
bronchitis · Asthma	Yes · No
Joint defect	Yes · No
Chronic	Yes · No
Epilepsy	Yes · No

Except upper sicks if you had been Sicks or had operated, please write the name and age below.

(Name of Sick · Name of Operation: _____) (_____ Years old)

If you have medicines, write here.

Name of Sick (_____)

Name of Medicines (_____) (_____) (_____) (_____)

【2】Body type and tendency to sick.	
having the Allergie	Yes · No
getting catch a cold or fever	Yes · No
Doing the exercise, painful the chest or getting pant violently	Yes · No
Having eczema	Yes · No
Getting noseblood immidiatey	Yes · No

【3】Diagnostic of your health	
Took health check during this year?	Yes · No
Date of checks Year Month Day	
Name of Agency	Yes · No
Decision (Normal · checks again · abnormality)	

Agreement to keep checking own health concern, made suring upper that I wrote it is.

Year Month Day

(Sign up)

Stamp