

LECTURE 1

Consultations & Screening

By Cathal Fanning

- **Consultations**
- **Screening**

Consultations

A consultation with a new client is the first opportunity you have to meet, greet and understand your client's needs. It also serves as a good chance to build a rapport with them, and to make them feel comfortable in the fitness environment. When the time comes to plan their sessions, you want to have considered as many details relating to the client as possible. This will not only make the programme design stage easier but will also ensure a more effective programme that is safer. You will most likely be working with healthy individuals most of the time, but some clients will require more intricate programmes based on current or prior issues they have.

In order to maintain the health of the client, help them achieve their goals, and to avoid chronic conditions such as obesity, diabetes and heart disease it is also important that you screen clients well prior to exercise. We will look at all of these areas in this module.

So, what are some of the important aspects to learn from your client when conducting a fitness consultation?

Their 'Why'

Initially we need to ascertain why the client has taken their first steps into exercise. What was the reason they made the decision to join the gym in the first place?

- Maybe they have an event coming up that they want to lose weight for?
- Maybe they realise that they aren't as fit as they used to be?
- Maybe they have fallen into a largely sedentary lifestyle and want to change it?
- Perhaps they have suffered an injury.

We need to know what made their decision so that we can assist in maintaining their motivation.

Their Aspirations

They will have an aspiration that links to their initial 'WHY'. This is not yet a fully-formed goal as such, but is the basis from which we can formulate their goals later. An aspiration might be to lose weight, have more energy, increase their flexibility, or fix their back pain.

Barriers

Barriers are an important point of discussion. If we can help the client to identify the things that may impede their progress and attendance in their programme, we might be able to help them to find a way around their barriers. For example, if time is a major limiting factor in the client's life, we could help them by creating short workouts that they can do in the gym or at home so that fitness isn't a large time-commitment for them.

Current Activity

An understanding of what they currently do for exercise allows us an insight into how we can assist them. Perhaps they cycle to work, play recreational sport or walk the dog twice a day. Or perhaps they are completely sedentary.

Our programming should serve to enhance and build upon the activity the client currently does and should fit in around their lifestyle.

Exercise History

An understanding of the client's former fitness involvement allows us to learn about their education in fitness. It may be that they have simply fallen out of the habit, yet they were previously very active. In this instance we can help the client to regain their fitness before building upon it. Equally, an insight into their exercise history might offer explanations about any muscular compensations they may exhibit. For example, if they have a history of cycling or studio cycling classes, they may have relatively tight hip flexors.

Availability

If we know what time the client has available to train in a typical week, we can build their programme accordingly. If they are only available twice a week, we can develop a plan to cover the 'fitness bases' over two sessions, rather than developing a complicated split routine etc.

Preferences

There is little point in including exercises in your client's programme that they simply do not enjoy. With so many fitness modalities available to us we should be able to find a suitable alternative to meet the needs of the client if they really dislike a particular exercise type. Equally if there is an exercise that they are really happy with, we should try to make sure to include this as it will increase their motivation and adherence.

Below, we recap some of the methods that you can use in the consultation to gather information as well as some of the other things you might need to find out about your client.

- Questionnaire.
- Face-to-face interview.
- Observation.
- Listening.
- Their goals.
- Any current barriers.
- Their preferences.
- Their expectations.
- Their age & training history.
- Their general lifestyle.

Once we have the above information about the client's background we are in a better place to offer advice and guidance. We will partner the above information with the information that we gain from the screening process.

Screening

Screening a client involves gaining a detailed understanding of their medical history, any potential risks, identifying exercise contraindications, and potentially referring them for medical clearance if necessary. The entire process is designed to ensure their safety when training, and to find out enough about them to design the best possible programme.

Some exercise modalities, including high intensity exercise for example, would not be suitable for certain clients, lifting weight above the head is contraindicated for others, and even exercises that are static in nature, such as the plank, would be a poor choice for some clients. So the screening process is an important one as it will assist you in a number of ways to ensure the correct journey for each client you have.

Screening involves:

Par-Q



Having the client complete a PAR-Q (Physical Activity Readiness Questionnaire) is an easy way to ascertain if they have any prior issues relating to health. It will also tell you if they have a family history of any issues that are of concern. You can take all this into account when you create their programme, including any contraindications you need to be aware of. If a client answers 'NO' to all questions and is between 15-69 years of age, it is normally agreed that they can start training. Those answering 'YES' to any question should gain medical clearance prior to training.

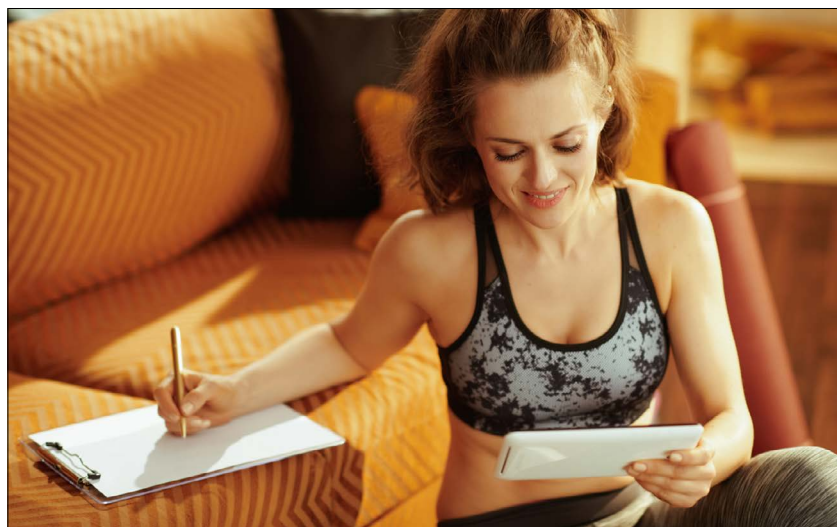
[As an aside here you need to be aware of the need to perform a verbal PAR-Q at the start of your sessions to ensure nothing has changed with the clients health.]

Par-Q+



To overcome some of the limitations of the PAR-Q there is a more sophisticated PAR-Q+ that is available for use in assessing clients. It involves lots more questions, as well as follow-on questions for any of the 'YES' answers. This allows the client to offer more information around the severity of the issues they have, and the trainer can make an informed decision on whether medical referral is necessary.

Informed Consent



An 'informed consent' form is signed by the client as an acknowledgment that they understand the process they are about to take part in and consent to it. They are also agreeing that their data will be taken and held for the purposes of planning etc. They are confirming that they are happy to proceed.

You should highlight all the stages they are going to go through including testing, physical assessment and exercise delivery.

Exercise History

You may decide that referral to your client's GP is a good idea. The severity of the issues presented should make your decision easier but if in any real doubt a GP referral is always a good idea. The client's welfare is the most important aspect to consider and they should be encouraged that this is precautionary and that their exercise journey will make them healthier in the long run.

Exercise Referral, Absolute Contraindications and Risk Stratification

There will be some members whom you absolutely cannot work with, and must be passed along to a medical practitioner, or a suitably qualified exercise specialist. There are many different medical issues that would lead to exercise contraindication and in order to work with these populations you should gain additional qualifications centred on the management of medical issues and diseases. Below we discuss exercise referral and clearance...

There are several conditions for which exercise would be considered absolutely contraindicated until such a time that the client has been medically cleared to train, and the condition is controlled. They include but are not limited to.

- Recent 'cardiac event' including myocardial infarction, or new/uncontrolled arrhythmias.
- Cardiac problems including severe aortic stenosis, acute myocarditis or pericarditis, or uncontrolled/unstable angina.
- Blood Pressure or heart-rate issues including a resting blood pressure of 180/100, a significant drop in blood pressure during exertion, or uncontrolled resting tachycardia (100bpm).
- Acute uncontrolled psychiatric illness.
- Pain, dizziness or excessive breathlessness during exertion.
- Febrile illness.
- Other unstable/uncontrolled conditions such as diabetes.

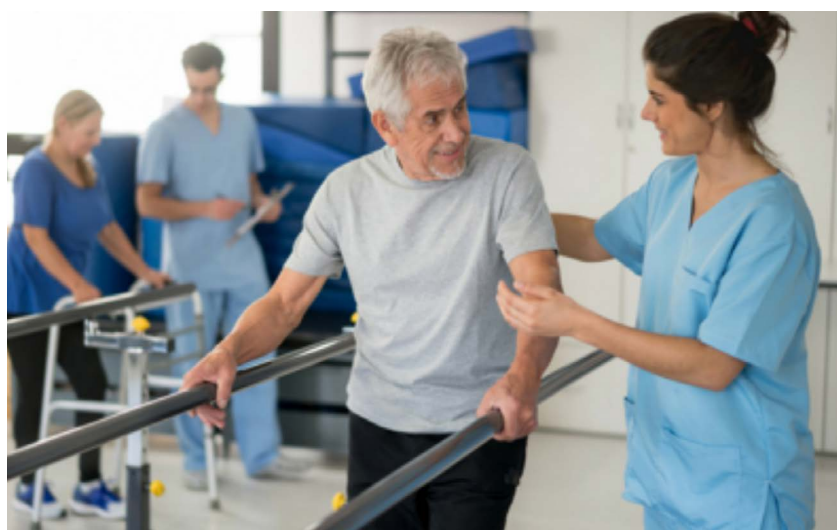
Other reasons for referring a client to their GP for medical clearance, and potentially to a more suitably qualified trainer would include...

- Client preference.
- PT doubt or uncertainty.
- PAR-Q answers raising concern (YES answers should be referred).
- Diagnosed cardiovascular, pulmonary or metabolic disease.
- If they exhibit multiple risk factors for disease such as cardiovascular disease.

The bottom line is that it is better to practice caution and refer the client rather than move forward and potentially cause more issues.

Some Conditions You May Encounter

- Heart disease.
- Eating disorders.
- Mental health issues.
- Diabetes.
- Angina.
- Hypertension.
- Stroke.
- Osteoporosis.
- Chronic fatigue.



Tools To Use When Screening

Another method we have available to us to ensure client safety is risk stratification. The aim of this process is to identify those clients that are at risk during training, understand the likelihood of them suffering a problem, and deciding what the best exercise process will be for them.

Available online is a tool that you might choose to use when assessing the risks of exercise for your clients. The Irwin and Morgan Risk Stratification tool is a widely used model that enables you to decipher whether your client poses a low, medium or high risk to exercise participation. Many risk-stratification models also have a pyramid with example strategies to employ with the clients training. Let's look at some of the things we may see...

Step One – does the client train on a regular basis? If yes then the client is able to train assuming they have no signs or symptoms of any cardiovascular, pulmonary or metabolic diseases or similar. If they have any symptoms, they should be referred to a qualified specialist and their exercise monitored and planned by a suitably qualified trainer.

Step Two – based on their prior activity levels we need to decide what intensity is correct to start at. If they are new to exercise, that intensity should be lower.

Injuries – if a client is injured or is suffering from an injury that you cannot assist with, then they should be referred to a specialist first.

Blood pressure – hypotension and hypertensions are a significant risk that you should be aware of - whether a client has either. If so, refer them to a medical practitioner.

Lower back pain – there are many causes of lower back pain, consultation with a specialist is recommended as training with such symptoms, can exacerbate the problem.

Pre / post natal – the desire to remain fit and active while pregnant, and to return to fitness following childbirth is a very big focus for many mothers. You should seek medical clearance for this kind of training and work with, or refer to a pre / post natal specialist.

Mental health & wellness – depression & anxiety, among other issues should be dealt with by a trained professional. While exercise can assist in the management of symptoms, in many cases those suffering should be referred.

Causes for concern – there are a range of other issues including neurological issues, fatigue, degenerative disorders and more. You should always refer your client for medical clearance if you or they have any doubts about their suitability. A medical referral follow by structured exercise through one of the locally or nationally- recognised referral schemes is the best course of action for many people.



Once you have appropriately screened the client and gained as much information as you can from them it is time to move on to physical measurements, as well as dynamic testing if they are fit and cleared to train.

Move on to the next lecture to explore this process in more detail.