

Your Personal Health Record

Name: _____

Nutrition

Body Fat

Height

Weight

Body Fat %

Recommended



Exercise

Step Test

Resting Pulse

3 min. Exercise Pulse

5 min. Recovery Pulse

Pulse Rate after 3 min. moderate exercise:

110 or lower	Excellent
110-120	Very good
120-130	Good
130-140	Fair
140 or higher	Poor



Water

Hydrotherapy demonstration



Sunshine

Blood Pressure

Blood Pressure

Minimum: 140/90
Ideal: 120/70



Temperance

Computer Health Age

Health Age



Air

Peak Flow Meter

Peak Flow

Recommended



Rest

Massage



Trust

Health Counseling



Your Personal Health Record

Name: _____

Nutrition

Body Fat

Height

Weight

Body Fat %

Recommended



Exercise

Step Test

Resting Pulse

3 min. Exercise Pulse

5 min. Recovery Pulse

Pulse Rate after 3 min. moderate exercise:

110 or lower	Excellent
110-120	Very good
120-130	Good
130-140	Fair
140 or higher	Poor



Water

Hydrotherapy demonstration



Sunshine

Blood Pressure

Blood Pressure

Minimum: 140/90
Ideal: 120/70



Temperance

Computer Health Age

Health Age



Air

Peak Flow Meter

Peak Flow

Recommended



Rest

Massage



Trust

Health Counseling

