HEALTH CHECK QUESTIONNAIRE

Based on a traffic light model this questionnaire shows you the existence of possible personal health risks. Please fill in before visiting our Health check day and mark the answers of your choice, it will take about 10 minutes of your time.

Together with the outcomes of the Health Check tests this questionnaire can help you to get a clear view on possible personal health risks! If you have any questions about this list, print it and take it with you to the health check.

During our Health Check day you can receive a free advice from a professional concerning your questions related to personal health and lifestyle management.

New: Estimate your vitality within 5 minutes with the vitality measuring tool.

General personal health information

1. What is your age: .......... year’s  Gender: male/ female
   What is your height: .......... cm

2. Were you sick lately or needed treatment from a doctor?
   O  No
   O  Yes
   If yes, what treatment did you receive?..........................................................

3. Do you have a disease that affects your physical performance?
   O  No
   O  Yes
   If yes, what disease?..................................................................................

4. Do you use medicine? (prescription from a doctor)
   O  No
   O  Yes
   If yes, for what purpose?...........................................................................

5. Do you take part of a population screening to prevent from breast, intestine or cervix cancer?
   O  No
   O  Yes
   Not applicable

Your choices/answers with the next questions are organized according to a so called traffic light model. Explanation:

□  Means: favourable, an advice is not needed.

◇  Means: possible unfavourable, an advice can be useful.

○  Means: unfavourable, an advice is recommended.
Specific personal health information

6. Is there a member of your family (first line) affected by a cardiac disease or has a problem with blood circulation (cardiac attack, stroke etc.) or did he/she received surgery for this problem before the age of 60 years?

- [ ] No
- [ ] Yes, just one member
- [ ] Yes, several members

7. Does diabetes (type 2) occurs in your family (first line) before the age of 60 years?

- [ ] No
- [ ] Yes, just one member
- [ ] Yes, several members

8. Is there a hereditary increased level of cholesterol within your family?

- [ ] No
- [ ] Yes, just one member
- [ ] Yes, several members

9. Are one or more members of your family regular checked or treated for high blood pressure?

- [ ] No
- [ ] Yes, just one member
- [ ] Yes, several members

10. a. Do you experience periods of inexplicable passing pectoral pain, thoratic pain or pain in jaws and arms?

- [ ] No
- [ ] Sometimes
- [ ] Yes, often

b. Do you have to interrupt normal walking because of pain, cramp or fatigue in one or both legs and a break is needed to be able to continue walking.

- [ ] No
- [ ] Sometimes
- [ ] Yes, often

c. Do you become unwell, short of breath or dizzy during or after normal physical activities?

- [ ] No
- [ ] Sometimes
- [ ] Yes, often

Specific for women

11. a. Does breast cancer occurs in your family (first line) before the age of 60 years?

- [ ] No
- [ ] Yes, just one member
- [ ] Yes, several members

b. Do you suffer from a dysfunction of the thyroid gland?

- [ ] No
- [ ] Yes

c. If applicable: did you suffer from high blood pressure or diabetes during pregnancy?

- [ ] No
- [ ] Not applicable
- [ ] Yes

d. If applicable: did you get into transition (menopause) before the age of 40 years?

- [ ] No
- [ ] Not applicable
- [ ] Yes

You can visit our doctor for a medical advice for these items about your health without any obligation!
Your lifestyle during the last three months!

**Alcohol /drugs**

12. Do you use alcohol /drugs?

- □ No or stopped
- ◇ Sometimes (social)
- ○ Yes on a regular base

There is a discussion about the use of alcohol. Based on new outcomes it is recommended not to drink alcohol!

**Smoking**

13. Do you smoke?

- □ No or stopped
- ◇ Sometimes (social)
- ○ Yes on a regular base

There are special programs to beat alcohol/drugs and nicotine addiction. Ask the lifestyle/cardiovascular nurse for further information.

**Your workstyle at the office (office workers)**

14 a. Do you interrupt your work **consciously** at a regular base for your health?

'Every hour for a few minutes to leave your screen. Every two hours for at least 10 minutes to move and leave your chair. After 4 hours to have a lunchbreak/lunch walk'.

- □ Yes, often
- ◇ Sometimes
- ○ Rare or never

b. Do you use a software program for screen work management (like Ctrl work)?

- □ Yes, often
- ◇ Sometimes
- ○ Rare or never

c. Do you take your work posture **consciously** in account during work?

'You can check the settings of your workplace (flexible work spot). You have knowledge of a healthy work position and you can alter this work position (turning a seated position into a standing position)'.

- □ Yes, often
- ◇ Sometimes
- ○ Rare or never

d. Do you take relaxation **consciously** in account during your work?

'You do alter work tasks and do not exceed more than 6 hours of screen work daily. You take your hands from your mouse or keyboard and put them on the desk to rest at a regular base. You pay attention to relax eyes and body regularly (closing eyes, stretching muscles or perform exercises for relaxation)'.

- □ Yes, often
- ◇ Sometimes
- ○ Rare or never
Your daily exercise

15a. Do you measure up to the guideline for Dutch healthy exercise? (Read the added explanation):
Do you perform ½ hour of moderate physical exercise daily (like walking, cycling to your work, cleaning the house, gardening etc.) or 2 1/2 hours weekly?

☐ Yes, often ☑ Sometimes ☐ Rare or never

b. Do you use the stairs to the first or second floor even if an elevator is available?

☐ Yes, often ☑ Sometimes ☐ Rare or never

c. Do you keep a lunch walk during lunchtime to interrupt your work?

☐ Yes, often ☑ Sometimes ☐ Rare or never

Practising sports and other physical efforts

16a. Do you measure up to the guideline for Dutch Fitness? (Read the added explanation):
Do you practise sport for at least 20-30 minutes, 3 times a week or do you perform comparable physical efforts that make you breathe deeply and make you sweat, other than normal daily physical movement?

☐ Yes, often ☑ Sometimes ☐ Rare or never

b. Does this physical training also includes muscle strength exercises twice a week (exercises or activities that stimulate your body strength like stair walking, rowing, mountain biking, walking uphill, fitness etc.).

☐ Yes, often ☑ Sometimes ☐ Rare or never

c. How would you estimate your physical shape?

☐ Sufficient ☑ doubtful ☐ Insufficient

You can ask an advice about lifestyle with the cardio vascular advisor.

Nutrition

17. Do you take a breakfast daily?

☐ Yes, mostly ☑ Sometimes ☐ Rare or never

18. Do you take your meals at regular times (2 or 3 times daily)

☐ Yes, mostly ☑ Sometimes ☐ Rare or never

19. Do you choose consciously healthy food?

☐ Yes, mostly ☑ Sometimes ☐ Rare or never

20. Do you consume fruit on a daily base?

☐ Yes, mostly ☑ Sometimes ☐ Rare or never
21. Do you consume a portion of 200 gram of vegetables daily?

☐ Yes, mostly  ◊ Sometimes  O Rare or never

22. Do you consume so called fat fish on a weekly base (1-2 times).

☐ Yes, mostly  ◊ Sometimes  O Yes, often

23. Do you consume packaged meals?

☐ Rare or never  ◊ Sometimes  O Yes, often

24. Do you consume fast food?

☐ Rare or never  ◊ sometimes  O Yes, often

25a. Do you use a “crash” diet or a strongly limited diet not guided by a dietitian?

☐ No  ◊ sometimes  O Yes

25b. Did you gain more than 10% of your bodyweight during the last 3 months?

☐ No  O Yes

25c. Did you lose more than 5% of your bodyweight in this last month in an inexplicable way

☐ No  O Yes

Ask our food coach for information about food and diet.

About rest, relaxation and personal balance

26. Do you feel fit when you wake up?

☐ Yes, mostly  ◊ Sometimes  O Rare or never

27. Are you able to sleep well? (Getting asleep and oversleep)

☐ Yes, mostly  ◊ Sometimes  O Rare or never

28. Do you use medicine for sleeping?

☐ Rare or never  ◊ Sometimes  O Yes, often
29. When snoring, is your breath frequently interrupted during periods? (Ask your partner or sleeping mate!)

☐ Rare or never or n/a  ◇ Sometimes  ☐ Yes, often

30. Do you fall asleep within activities during daytime?

☐ Rare or never  ◇ Sometimes  ☐ Yes, often

31. Do you take consciously time for relaxation?

☐ Yes, often  ◇ Sometimes  ☐ Rare or never

32. Do you take painkillers for physical complaints (like headache, aching muscles) related to working under pressure?

☐ rare or never  ◇ Sometimes  ☐ yes ,often

33. Do you feel supported as an employee by your superior?

☐ Yes, often  ◇ Sometimes  ☐ Rare or never

34. Are you able to lose up in spare time?

☐ Yes, mostly  ◇ Sometimes  ☐ Rare or never

35. Do you work in spare time or in the weekends as well?

☐ rare or never  ◇ Sometimes  ☐ yes, often

36. Do you check your office mail in sparetime or weekends

☐ Yes, mostly  ◇ Sometimes  ☐ yes, often

37. Do you feel haunted or restless during periods?

☐ Rare or never  ◇ Sometimes  ☐ Yes, often

38. Do you feel depressed or disappointed during periods?

☐ Rare or never  ◇ Sometimes  ☐ Yes, often

39. Do you feel exhausted during periods?

☐ Rare or never  ◇ Sometimes  ☐ Yes, often

40. Do you feel frightened (panic) or confused during periods?

☐ Rare or never  ◇ Sometimes  ☐ Yes, often

Ask for an advice with the social worker for problems concerning balance between personal and private affairs.
Explanation about the Health Check questionnaire

**Question 1 to 11** are related to general health information and special to hereditary cardiovascular risk factors.

**Question 12 to 24** are related to lifestyle and habits concerning labour, nutrition, exercise, smoking and consume of alcohol.

**Question 25 to 40** are related to rest, relaxation and personal balance between work and private affairs. A good night rest and relaxation are essential to recover from physical and mental trains.

**Question 15:** The Dutch guideline for healthy exercise (2018) is a recommendation based on the health profit of moderate physical activities for inactive adults. The Aim of this standard is primary to prevent from so called lifestyle diseases for sedentary (inactive) persons.

**Question 16:** The Dutch guideline for physical fitness is a recommendation for the exercise that is needed to raise cardiovascular fitness and muscle strength. Muscle strength exercises are additional recommended to raise the level of fitness.

**E bike:** In general: The performance on an E-bike is insufficient to raise your cardiovascular fitness and muscle strength for adult Dutch people.

**An advice for health, nutrition and lifestyle?**
According to the outcomes of this questionnaire and the outcomes of the Health Check tests you can have a short free advice by a professional (for 10 minutes).

* Bottlenecks about food and bodyweight, diets and more by our Food Coach.
* Lifestyle adjustments by our cardiovascular nurse.
* Hearing and visual problems by our audiologist and optician.
* (sport) medical problems by our sport doctor.
* Problems with balance between work and private affairs by our social worker.

For health problems related to your work you can make an appointment with the company doctor on the walk-in hours: More info:


For prevention and health support you can visit the website of the Student Sports Centre


Curious about your vitality? Measure your vitality within 5 minutes, by answering the questions of the vitality measuring tool.
The Vitality measuring Tool

Vitality is an issue that is related to your energy level and the quality of your life as well! Vitality can influence physical and mental performance and social interaction in different ways. Unfortunately it is difficult to measure and hard to objectivize. This vitality questionnaire is a “self-assessment”’. The vitality measuring instrument is a tool for rating your physical and mental performance and social interaction related to your vitality.

Before continuing please read the explanation below

Explanation

Filling in the questionnaire and the measuring instrument will take about 5 minutes of your time. It will provide an insight of what vitality is about and how to estimate/rate your personal vitality.

The vitality measuring instrument contains eighteen (3x6) significant features related to physical and mental performance and social interaction based on core dimensions of vitality (energy, motivation and resilience).

Every feature has to be rated personally with:

- **Always** (or nearly always) Score 4 points
- **Often** (more than regular!) Score 3 points
- **Regular** (at a regular base) Score 2 points
- **Sometimes** (Occasionally) Score 1 point
- **Rare** (or never) Score 0 points

Mark the score that reflects your functioning as close as possible during the last three months and calculate the total score for every item (physical, mental and social).

Copy this total score for each item to answer the last three questions

Attention

The measuring instrument is a tool that gives outcomes about your personal vitality under **reserve** ¹

Finally

Try to formulate a strong quality of yourself and a point of improvement for every item related to your personal vitality. This might be another feature as mentioned before. Difficult? Ask someone you are familiar with to fill in the questionnaire for you!

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¹ The results of the “self-assessment” are only meaningful for the selected features and cannot be generalized to other features and areas of vitality. The results are due to your personal interpretation and cannot be considered as scientific valide outcomes.
# The Vitality Measuring Tool

<table>
<thead>
<tr>
<th>Always</th>
<th>Often</th>
<th>Regular</th>
<th>Sometimes</th>
<th>Rare</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I feel healthy and fit</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I am capable to perform considerable physical work</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>After work I have still enough energy for leisure activities</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I spend sufficient time to move daily (Dutch standard)</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I like to participate with sportive challenges and holidays</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I recover easily after physical work</td>
</tr>
</tbody>
</table>

Total score= **Pts** Copy your score to question 1

<table>
<thead>
<tr>
<th>Always</th>
<th>Often</th>
<th>Regular</th>
<th>Sometimes</th>
<th>Rare</th>
<th>Mentally</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I am filled with energy and self confidence</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I am able to concentrate well and to think clearly during work</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I have a healthy perspective on issues and loose up from work at home</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I like to take initiative for challenges at work</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I am stimulated by working under time pressure</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I can overcome setbacks (disappointments) easily</td>
</tr>
</tbody>
</table>

Total score= **Pts** Copy your score to question 2

<table>
<thead>
<tr>
<th>Always</th>
<th>Often</th>
<th>Regular</th>
<th>Sometimes</th>
<th>Rare</th>
<th>Social</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I like to maintain personal contacts in my social network</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I socialize easily with new colleagues</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I receive energy and become inspired by working in a group</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I like to motivate others for achieving goals as a team</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>Naturally I offer help to my colleagues when needed</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>I can deal with social problems in an acceptable way</td>
</tr>
</tbody>
</table>

Total score= **Pts** Copy your score to question 3
1. Rate the quality of your physical performance during the last three months based on the six selected physical features of vitality.

<table>
<thead>
<tr>
<th>Strong</th>
<th>sufficient</th>
<th>moderate</th>
<th>weak</th>
<th>rate</th>
</tr>
</thead>
</table>
| 24-----| 18---------| 12-------| 6----| 0----| pts (copy your score)

A strong quality is: ...............................................................

A point of improvement: ..........................................................

2. Rate the quality of your mental performance during the last three months based on the six selected mental features of vitality.

<table>
<thead>
<tr>
<th>Strong</th>
<th>sufficient</th>
<th>moderate</th>
<th>weak</th>
<th>rate</th>
</tr>
</thead>
</table>
| 24-----| 18---------| 12-------| 6----| 0----| pts (copy your score)

A strong quality is: ...............................................................

A point of improvement: ..........................................................

3. Rate the quality of your social interaction during the last three months based on the six selected social features of vitality.

<table>
<thead>
<tr>
<th>Strong</th>
<th>sufficient</th>
<th>moderate</th>
<th>weak</th>
<th>rate</th>
</tr>
</thead>
</table>
| 24-----| 18---------| 12-------| 6----| 0----| pts (copy your score)

A strong quality is: ...............................................................

A point of improvement: ..........................................................

You can discuss problems related to your health and vitality (physical, mentally and social) that influences your work with your company doctor or the staff welfare worker (a reference is needed). Make an appointment even without sickness notice!

For any further information: https://intranet.tue.nl/en/university/services/service-for-personnel-and-organization/working-environment

Visit our website: www.studentensportcentrumeindhoven.nl and go to: Health & Vitality. Maybe we can help you to realize your ambitions?

Any questions about the Vitality Measuring Instrument? Send an e-mail to: g.l.m.niemans@tue.nl