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| Australian Government crest, Department of Veterans' Affairs branding | Cardiorespiratory Effort ToleranceMedical Impairment Assessment |
| Veteran |  | UIN |
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| Please assess the following conditions: For this assessment, each condition needs to be assessed in **isolation** from all others. This means that when assessing a condition, you will need to assess the impairment **as though** **only that single condition is present**, and that the veteran is otherwise healthy and normal. |

1. Please describe the current **cardiorespiratory symptoms** (e.g. dyspnoea, angina etc.) that limit the **exercise tolerance,** due to each condition *in isolation*.

| **Condition** | **Symptoms** |
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1. Please review the table and select **one** **activity category**, which **consistently causes cardiorespiratory symptoms**, due to each condition *in isolation.* If it is not possible to separate the impairment in this way, please select one activity category under “combined conditions.” The examples below are not exhaustive and should be used as a reference point to identify similar activities.

| **Cardiorespiratory Effort Tolerance** | Insert condition: | Insert condition: | Insert condition: | **Combined Conditions** |
| --- | --- | --- | --- | --- |
| **Unable to assess** |[ ] [ ] [ ] [ ]
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| * The veteran does not experience any cardiorespiratory symptoms
* The veteran’s cardiorespiratory symptoms do not predictably occur at a certain level of effort
* The veteran is prevented from maximal exertion by non-cardiorespiratory conditions (e.g. osteoarthritis, obesity)
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| **Example of activities in METS level 1** |[ ] [ ] [ ] [ ]
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| * Symptoms regularly occur at rest
 | * Sitting
 | * Lying down
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| **Example of activities in METS level 1–2** |[ ] [ ] [ ] [ ]
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| * Sedate activities while sitting down
* Passenger in a car
 | * Standing for a time
* Playing cards
 | * Clerical work (desk work)
* Strolling slowly
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| **Example of activities in METS level 2–3** |[ ] [ ] [ ] [ ]
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| * Cooking or preparing meals
* Playing sedentary musical instruments
* Light household duties
* Walking slowly (2-3 km/h)
 | * Light recreational sports (e.g. pool, lawn bowls, fishing, golf with power buggy)
* Dressing, showering
* Horseback riding at walk
 | * Clerical work involving moving around
* Using self-propelled mower
* Driving a car
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| **Example of activities in METS level 3–4** |[ ] [ ] [ ] [ ]
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| * Walking at average pace

(5 km/h)* Light gardening (e.g. weeding and watering)
 | * Sedate cycling (5-10 km/h)
* Regular household duties (e.g. vacuuming, making bed, laundry, cleaning car)
 | * Table tennis and golf (pulling buggy)
* Leisurely canoeing
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| **Example of activities in METS level 4–5** |[ ] [ ] [ ] [ ]
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| * Shopping and carrying groceries (10 kg)
* Golf (carrying bag)
* Cycling (10-15 km/h)
* Stacking firewood/shelves
 | * Moderate household duties (e.g. mopping, scrubbing floors, polishing furniture)
* Gentle swimming
 | * Tennis doubles (non-competitive)
* Painting and/or wallpapering of house
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| **Example of activities in METS level 5–6** |[ ] [ ] [ ] [ ]
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| * Brisk walking (6.5-7 km/h)
* Gardening (e.g. shovelling, pushing wheelbarrow and digging)
 | * Ice skating/ Roller-blading
* Swimming laps (non-competitive)
* Slowly climbing stairs
 | * Carpentry (e.g. using hand tools)
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| **Example of activities in METS level 6–7** |[ ] [ ] [ ] [ ]
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| * Rowing/Kayaking at pace
* Tennis (singles, non-competitive)
 | * Slow jogging
* Using a pick/shovel to dig trenches
 | * Hiking
* Water skiing
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| **Example of activities in METS level 7–8** |[ ] [ ] [ ] [ ]
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| * Carrying objects (30kg) on level ground
* Tennis (singles, competitive)
 | * Cycling (20-25 km/h)
* Jogging (8 km/h)
* Sawing hardwood with hand tools
 | * Horseback riding (galloping)
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| **Example of activities in METS level 8–9** |[ ] [ ] [ ] [ ]
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| * Running (9 km/h)
* Calisthenics
 | * Skiing (cross-country)
* Squash
 | * Swimming fast laps
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| **Example of activities in METS level 10+** |[ ] [ ] [ ] [ ]
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| * Running quickly (10 km/h)
* Cycling quickly (30 km/h)
 | * Carrying loads (10 kg) up a gradient
 | * Football (any code)
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| Doctor's signature | Doctor's name | Date | Time to complete form |
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