

HEALTH RISK ASSESSMENT

Name _____ D.O.B. _____
 Organisation/Region _____ Mobile _____
 Cobas code _____ KYND Code _____
 Email address _____

BMI

Weight (kgs) ____ Height (cm) ____ Waist circumference (cm) ____ BMI Calculation (kg/m²) ____ (Weight [kg]/height [m²])

Do you Smoke? (tick one) Never smoked Ex-smoker (last smoke <10 yrs)
 Ex-smoker (last smoke >10 yrs) Current smoker

Alcohol standard drinks per week _____

Blood Pressure

Systolic _____ Diastolic _____ Are you taking anti-hypersensitive meds? Yes No

Resting Heart Rate _____ Do you have hypertension? Yes No

Lung Function

Lung function (% and FEV1) _____ Have you ever had asthma? Yes No

Cholesterol

Total cholesterol _____ HDL _____ LDL _____ Triglycerides _____ Ratio _____

Are you taking cholesterol lowering meds? Yes No

Diabetes

HbA1c _____ Do you have diabetes? Yes No

Recommended actions for sub-optimal results _____

OUTPUTS

BMI	WC		SMOKING	ALCOHOL		BP (S)	BP (D)	RHR	LUNG FUNCTION	TC	HDL	LDL	TG	RATIO	HBA1C
	F	M		F	M										
<30	<80	<94	Never/Last cig. >10 years	0 stand. drinks/week	0 stand. drinks/week	<=120	<=90	<65	>80%	<5	>1.5	<2	<1.5	<4	<40
30-35	80-86	94-100	Last cig. < 10 years	>0, <=14/week	>0, <= 21/week	120-140	90-100	65-100	50-80%	5-6	1-1.5	2-3	1.5-2	4-5	40-49
>=35	>=86	>=100	Current smoker	>14/week	>21/week	>=140	>=100	>=100	<50%	>6	<1.0	>3	>2	>5	>=50

HEARING AND SIGHT

(Attach Occupational Audiometry Record form if completed)

Annual hearing and sight tests are mandatory for employees who work in the forest as part of their duties.

HEARING TEST RESULTS		VISION TEST RESULTS	
Initial Baseline Test		Forgot Glasses	
Normal Hearing		Near Vision Good	
Other Loss (medical or injury)		Distant Vision Good	
Historical NIHL		Colour Vision Good	
Pattern of NIHL		Colour Vision Normal	
NIHL		Colour Vision Deficient	
NIHL (after deterioration)		Visual Fatigue Related to Work	
Notifiable NIHL		Referred to an Optometrist for Possible Lens Correction	
New Notifiable NIHL (after deterioration)		Notes (actions relating to sub-optimal results to be noted below) _____ _____ _____ _____ _____ _____ _____ _____	
Notifiable Deterioration 15db plus Since Baseline			
New Notifiable Deterioration 15db plus Since Baseline			
Further Notifiable Deterioration 15db plus Since Baseline			
Predict Interpretation – New Outside Normal Range			
Predict Interpretation – Normal			
Predict Interpretation – Existing Outside Normal Range			
Manual Deterioration			
Refer to GP			

Vision Results Normal Sub-optimal

Hearing Results Normal Sub-optimal

Recommended treatment for sub-optimal results: _____

To be completed by Assessor

Assessed by _____ Company name _____

Signature _____ Date _____