2024 The 38th Annual NISSAN CUP Kanagawa Triathlon

Medical Check Sheet for Participants

Please answer the following questions. Depending on the contents of your answer, you may make health consultation to a doctor or a nurse.

These questions and the health consultation are not guaranteeing your health. You must manage your condition during the race by oneself.

| Race No: | Name: | | |
|---------------------------------------|--------------|------|----------------------------|
| Body temperature at morning today | y: | | ${\mathbb C}$ |
| ■ Have you done heart trouble and t | ha athar h | 001 | y disaasas? |
| - Have you done heart trouble and t | | cav | |
| | Yes | * | No |
| ■ Are you diarrhea now? | | | |
| | Yes | * | No |
| ■ Are you visiting a hospital for tre | atment nov | w? | |
| | Yes | * | No |
| ■ Do you take any medicine now? | | | |
| Yes (a med | licine nam | e: |) * No |
| ■ Are you tired for this one week? | | | |
| | Yes | * | No |
| ■ Did you drink a lot of alcohol last | night? | | |
| | Yes | * | No |
| ■ Did you sleep enough last night? | | | |
| | Yes | * | No |
| ■ Can you finish the triathlon today | ? | | |
| | Yes | * | No |
| ■ Do you know what a sport in high | temperati | ire | and humidity is dangerous? |
| | Yes | * | No |
| ■ Do you abandon the race immedia | itely if you | ı be | come in bad condition? |
| | Yes | | No |