

Simpson Desert Bike Challenge Medical Questionnaire

Welcome to Five Days in Hell!

Remote desert travel is challenging and exhilarating. It also poses very significant risks if participants become ill or injured. Medical retrieval from the desert can take many hours and our capacity to provide care is limited. As Medical Director it is my job to keep everyone healthy and ensure we have planned and prepared for most, if not all eventualities.

Please complete the following questionnaire and email to <u>dr.suyin.tan@gmail.com</u>.

We can assess how best to keep you safe all the way to Birdsville. If you have any queries or concerns please contact me on mobile 0410002876 or via email <u>dr.suyin.tan@gmail.com</u>.

Confidentiality:

All information provided by you will be kept confidential and only disclosed to other parties in the event of you requiring emergency care. Questionnaires will be deleted once the event has finished.

Name:	DOB:	Age:
		U

Height: Weight:

A. Have you ever had any of the following medical conditions?

Please circle your response and provide details if relevant.

1. Fits.	Yes	No	Unsure

- 2. Stroke. Yes No Unsure
- 3. Asthma / Emphysema / COPD / breathing problems

Yes No Unsure



4. GORD/ stomach ulcers / bleeding from the bowel

	Yes	No	l	Unsure
5. High blood pres	sure	Yes	No	Unsure
6. Heart attack / angina / coronary stents / heart surgery / atrial fibrillation (AF)				

	Yes	Νο	Unsure
7. Diabetes.	Yes	Νο	Unsure
8. Cancer.	Yes	No	Unsure

9. Immunosupresssion (from steroids, cancer treatment or immune disease)

Yes	Νο	Unsure
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10. Kidney or liver problems (kidney stones/hepatitis etc)

Yes. No Unsure

B. Please list all your current medications including inhalers and patches or attach a separate list.



C. Please list any allergies.

D. Do you smoke ? Includes tobacco, cannabis and vapes.

Yes No

E. Do you drink more than 20 standard drinks a week?

Yes No Unsure

F. Can you walk up 2 flights of stairs without stopping?

Yes No Unsure

G. When was your last covid vaccination or covid infection?

H. Could you be pregnant at the time of the race?

Yes No Unsure

I. Is there anything else you would like to add?



Once your questionnaire is submitted it will be reviewed and I will contact you if there are any queries or concerns.

Thank you for taking the time to complete the questionnaire. Looking forward to seeing you at the race!

Dr Suyin Tan

Medical Director SDBC

May 2023.