

Quiz Policies

Eligibility

The NCSF online quizzes are open to any currently certified fitness professional, 18 years or older.

Deadlines

Course completion deadlines correspond with the NCSF Certified Professionals certification expiration date. Students can obtain their expiration dates by reviewing either their certification diploma or certification ID card.

Cancellation/Refund

All NCSF continued education course studies are non-refundable.

General Quiz Rules

- You may not have your quiz back after sending it in.
- Individuals can only take a specific quiz once for continued education units.
- Impersonation of another candidate will result in disqualification from the program without refund.

Disqualification

If disqualified for any of the above-mentioned reasons you may appeal the decision in writing within two weeks of the disqualification date.

Reporting Policy

You will receive your scores within 4 weeks following the quiz. If you do not receive the results after 4 weeks please contact the NCSF Certifying Agency.

Re-testing Procedure

Students who do not successfully pass an online quiz have the option of re-taking. The fees associated with this procedure total \$15 (U.S) per request. There are no limits as to the number of times a student may re-test.

Special Needs

If special needs are required to take the quiz please contact the NCSF so that appropriate measures can be taken for your consideration.

Quiz Rules

What Do I Mail Back to the NCSF?

Students are required to submit the quiz answer form.

What do I Need to Score on the Quiz?

In order to gain the .5 NCSF continued education units students need to score 80% (8 out of 10) or greater on the CEU quiz.

Where Do I Mail My Quiz Answer Form?

You will mail your completed answer form to:

NCSF
Attn: Dept of Continuing Education
P.O. Box 163908
Miami, FL 33116

How Many CEUs Will I Gain?

Professionals who successfully complete the any continuing education quiz will gain .5 NCSF CEUs per quiz.

How Much does each quiz cost?

Each quiz costs the student \$15.00.

What Will I Receive When The Course Is Completed?

Students who successfully pass any of the NCSF online quizzes will receive their exam scores, and a confirmation letter.

How Many Times Can I Take The Quizzes For CEUs?

Individuals can take each NCSF quiz once for continuing education credits.

Stature Weight Indexing, Central Adiposity, and Risk for Disease

A variety of different techniques and calculations are available for personal trainers when the appropriateness of a client's body weight is being assessed. One of the more popular and easy to calculate measurements is known as Body Mass Index, or BMI as it is more commonly referred to in the fitness industry. One reason for its popularity is its ease of use. The most commonly used BMI technique is known as the Quetelet index. To calculate BMI using this technique all that is necessary is an individual's height and weight. BMI can be calculated using one of two formulas. If the height and weight is available in meters and kilograms, BMI is calculated by dividing a person's weight in kilograms by their height in meters squared. Or, if the height and weight are expressed in inches and pounds, the alternate formula can be utilized for BMI calculation: the quotient of weight in pounds divided by height in inches squared multiplied by 703. Either of these formulas will give an accurate BMI value.

$$\begin{array}{l} \text{Weight in kg.} \\ \text{-----} \\ \text{Height in meters}^2 \end{array} \quad \begin{array}{l} \text{Weight in lbs.} \\ \text{-----} \times 703 \\ \text{Height in inches}^2 \end{array}$$

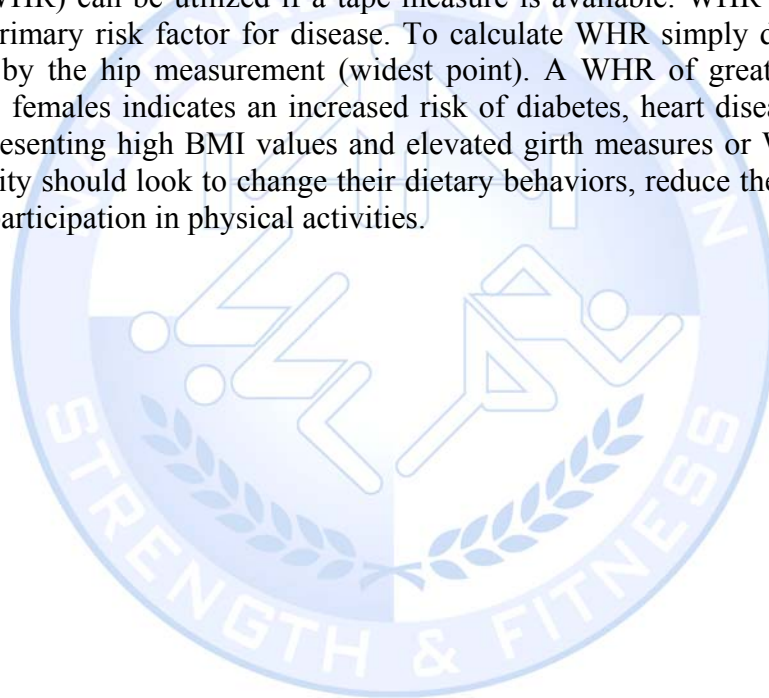
Once the BMI has been calculated, the information needs to be properly interpreted. Before the BMI of your client is compared with the normative data, you must first understand what BMI is and what it is used for. Many people misinterpret BMI as a measure of body fatness. BMI is not a body composition measurement. BMI values do have a relationship with body fatness with a standard estimation of error of 5%. This means that an individual with a body fatness of 15% could be reported to have a body fatness of between 10% and 20%, not a very accurate assessment. BMI does not take into account specific tissue composition or the relationship between fat mass and fat-free mass.

BMI is actually much more reliable and accurate when used as a predictive value of relative risk for disease based upon normative data. Individuals who are heavy in weight for their height often have an elevated risk for disease due to body fatness. Certain populations such as athletes and body builders will have a high BMI, indicating an increased risk for disease (false positive), while it is fairly well received that these individuals are often in excellent physical fitness. The primary reason for a high BMI in these populations is their body weight is elevated due to larger quantities of lean mass. For example, a football player who is 6 ft. 3 in. and weighs 225 lbs. would have a BMI of 28, placing him in the overweight category and having an increased risk for disease. However, that same individual may have a healthy or even low body fat percentage.

When used within the correct populations, BMI can present a very accurate interpretation of the relationship between height and weight, much more so than traditional height/weight charts. The healthy, targeted range for BMI is between 18.5 and 24.9. BMI values between 25 and 29.9 classify individuals as overweight, with a BMI values above 30 categorized as obese. BMI has become more relevant to trainers in recent years as many doctors now use BMI to determine the appropriateness of their

patient's weight. As a trainer explaining or calculating BMI, it is very important to understand and have the ability to disseminate the information about BMI and body fat percentage correctly to clients. Many clients often think that their BMI and their body fat percentage are one in the same. This is incorrect. And as is true with many values, BMI is only useful if employed and explained properly.

Those individuals classified as moderate to high risk (27-30) should understand that these values suggest that they may prematurely develop metabolic or coronary heart disease and that appropriate steps to improve health should be considered. A qualifying test now used in conjunction with BMI is the waist or abdominal girth measurements. It has shown to be an excellent predictor of disease based on regional fat storage. Measured around the line of the umbilicus, values over 102 cm (40 inches) for males and 88 cm (35 inches) for females suggest elevated risk for metabolic disease. Additionally, Waist-to-Hip Ratios (WHR) can be utilized if a tape measure is available. WHR identify central adiposity, a primary risk factor for disease. To calculate WHR simply divide the waist measurement by the hip measurement (widest point). A WHR of greater than 1.0 for males and 0.8 females indicates an increased risk of diabetes, heart disease, and stroke. Individuals presenting high BMI values and elevated girth measures or WHR related to central adiposity should look to change their dietary behaviors, reduce their body fatness and increase participation in physical activities.



Quiz

1. What two individual factors are necessary for BMI calculations?
 1. Height & VO₂
 2. VO₂ & Body Fat %
 3. Weight & Body Fat %
 4. Height & Weight
2. For which population segment is BMI not a valid assessment tool?
 1. Athletes
 2. Elderly
 3. Adolescents
 4. Women
3. A healthy BMI is between:
 1. 12.5 – 18.5
 2. 18.5 – 24.9
 3. 25.0 – 29.9
 4. >30.0
4. BMI values higher than _____ are associated with increased risk for disease?
 1. 12
 2. 18
 3. 22
 4. 30
5. What is the BMI for a male who is 6 ft. and weighs 190 lbs.? (rounded to the nearest tenth)
 1. 20.4
 2. 22.8
 3. 25.8
 4. 28.4
6. Which BMI calculation technique is the most commonly used?
 1. Quetelet index
 2. Khosla-Lowe index
 3. Howley-Franks index
 4. None of the above
7. The Standard Estimation of Error (SEE) for body fatness prediction from BMI values is:
 1. 2%
 2. 5%
 3. 10%
 4. 15%

8. Individuals in the high risk category based upon BMI are more likely to develop which of the following diseases?

1. Metabolic Disease
2. Anorexia
3. Coronary Heart Disease
4. Both A & C are correct

9. What risk stratification category would you place a women who is 5 ft. 4 in. tall and weighs 120 lbs. based upon BMI?

1. Increased Risk
2. Healthy
3. High Risk
4. None of the above

10. A male with a waist measurement of 44 inches and a hip measurement is 38 inches will be classified as:

1. Healthy
2. Increased risk for disease
3. Need body weight to determine
4. Need height to determine

