

Client Full Name: \_\_\_\_\_

## ROAD BICYCLE FIT INTAKE FORM

**Thank you for choosing Stride Physio for your bike fitting needs.** A bike fit will help you achieve your optimal position on the bike while reducing inefficiency stresses and strains on your body. Bike fitting is a unique process with a physical therapist and may require multiple visits to achieve your desired cycling goals. With appropriate exercise prescription and movement pattern, we can retrain your body and, using the right tools, adjust your bike to meet your body's adaptations.

- You can choose to meet your physical therapist online or in person.
  - The therapist can meet you inside or outside your own home, taking care to observe all COVID-19 precautions: face masks, sanitizing surfaces/equipment, and hand-washing.
  - Virtual appointments will occur over the Zoom platform.
- Unless deemed medically necessary by one of our therapists or another medical professional, bike fits are the financial responsibility of the client, and payment is due at time of service. Sessions are billed at the following rates:
  - Initial session (1 hr): \$200.00
  - Follow-up (1 hr): \$160.00

We charge an additional \$50 for all in-person appointments to accommodate therapist travel.

## WHAT TO EXPECT FOR YOUR FIT:

### Your therapist will:

- Perform a brief musculoskeletal exam targeting trouble regions with cycling.
- Assess your existing on-bike ergonomics to identify pain sources
- Observe your postural and pedaling techniques from front, back and sides

### And implement any of the following as needed:

- Adjustments to cleats, saddle, handlebars, stem for optimal positioning.
- Prescription of exercises and stretches to perform off the bike.
- Discuss scheduling a shorter follow-up visit to make minor adjustments and advance your technique.

*Whatever it takes to meet your goals, improve comfort, and reduce risk of overuse injuries!*

## CLIENT CHECKLIST:

- Fill out and submit our questionnaire** on the next page via Rightsignature
  - Or email it to [admin@strideseattle.com](mailto:admin@strideseattle.com)
- Bring your bicycle in clean and in good working order.**
  - Fill tires with proper air pressure and wash any mud off the frame and tires.
- Wear the clothing and accessories you usually cycle in**, e.g. padded shorts, cycling gloves, backpack, etc. If using cleats, be prepared to change in and out of them for fitting.
- Bring any additional saddles or stems** you own that you may wish to have installed.
- Also pack any tools required to move the seat and handlebars (often not needed).



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**BIKE FIT QUESTIONNAIRE:**

1. Please list the primary goal for your bike fit: \_\_\_\_\_

2. Are you training for a race or event? \_\_\_\_\_

3. Have you had a fit on this bike in the past?  Yes  No

If yes, briefly describe: \_\_\_\_\_

4. Average mileage or time spent per week cycling: \_\_\_\_\_

5. Please check any of the symptoms you are experiencing associated with cycling:

- |   |   |
|---|---|
| <input type="checkbox"/> Hip pain                                     | <input type="checkbox"/> Lower back pain                      |
| <input type="checkbox"/> Knee pain                                    | <input type="checkbox"/> Mid-back pain                        |
| <input type="checkbox"/> Ankle pain                                   | <input type="checkbox"/> Shoulder pain                        |
| <input type="checkbox"/> Foot pain/ numbness                          | <input type="checkbox"/> Elbow pain                           |
| <input type="checkbox"/> Numbness or pain in saddle region            | <input type="checkbox"/> Hand/wrist pain                      |
| <input type="checkbox"/> Difficulty with urination holding or voiding | <input type="checkbox"/> Symptoms radiating into legs or arms |
| <input type="checkbox"/> Sexual dysfunction                           | <input type="checkbox"/> Numbness in arms or fingers          |
|   | <input type="checkbox"/> Other: _____                         |

6. When did these symptoms start? \_\_\_\_\_

7. How long do these symptoms persist after a ride?  < 3 hrs  1 or more days  more than 3 days.

If more than 3 days, list what daily activities are affected: \_\_\_\_\_

8. List any recent part or equipment changes, e.g. new shoes, saddle, changes in handlebar height:

\_\_\_\_\_

9. Additional questions/comments:

\_\_\_\_\_

*Note:* You should expect to have at least one follow-up visit; cash-pay clients may want to consider booking a 2-hour initial time slot.

If you have any additional questions prior to your appointment, please feel free to contact us at 206-547-7445. We look forward to meeting you and helping you get the most out of your cycling experience.

\_\_\_\_\_ Client Signature \_\_\_\_\_ DOB

\_\_\_\_\_ Today's Date