

# Six Minute Walk Test Results Record

Patient Name:

Date:

Age:

MR #:

Medications:

Diagnoses:

FEV<sub>1</sub>:

FVC:

Predicted HRmax (220-age):

**Test #1**

Date:

Time:

Bronchodilator / time since last dose:

**Test #2**

Date:

Time:

Bronchodilator / time since last dose:

BP	Supplemental Oxygen	Gait Aid
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BP	Supplemental Oxygen	Gait Aid
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Time mins	SpO <sub>2</sub>	HR	Dyspnea	Rests
Rest				
1				
2				
3				
4				
5				
6				
Recovery 1				
2				

Time mins	SpO <sub>2</sub>	HR	Dyspnea	Rests
Rest				
1				
2				
3				
4				
5				
6				
Recovery 1				
2				

Distance walked:

Distance walked:

Limiting factor(s) to the test:

- SOB                       Low SpO<sub>2</sub>  
 Leg fatigue  
 Other (explain): \_\_\_\_\_

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- SOB                       Low SpO<sub>2</sub>  
 Leg fatigue  
 Other (explain): \_\_\_\_\_

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## Final Assessment

FEV<sub>1</sub>:

FVC:

## Walk 1

Date:

Time:

Bronchodilator / time since last dose:

BP	Supplemental Oxygen	Gait Aid
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Time mins	SpO <sub>2</sub>	HR	Dyspnea	Rests
Rest				
1				
2				
3				
4				
5				
6				
Recovery 1				
2				

Distance walked:

Limiting factor(s) to the test:

SOB       Low SpO<sub>2</sub>

Leg fatigue

Other (explain): \_\_\_\_\_