1. My physical activity at this time

A Physical activity during a normal week

Compare your physical activity with the recommendation. How well did \mathbf{C} vou meet the recommendation?

Comple-MON TUE WED THU FRI SAT SUN Not tely or Partly Mostly FLEXIBILITY, BALANCE TRAINING, MUSCLE STRENGTHENING ACTIVITIES at all exceeded • • . . times **VIGOROUS PHYSICAL ACTIVITY** OR ••• (\cdot) $(\cdot \cdot)$ MODERATE PHYSICAL ACTIVITY h min total

B Light physical activity, breaks in sedentary behaviour, and sleep on a normal day

LIGHT PHYSICAL ACTIVITY		,		Not at all	Partly	Mostly	Comple- tely or exceeded
				•	()	()	G
BREAKS IN SEDENTARY BEHAVIOUR							
				•	•	C	e
RESTORATIVE SLEEP							
					•	•	e
Physical activity recommendation form for older adults	Name		Date		🕕 UKK Institute		

over the age of 65

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2. This is how I intend to be physically active



Physical activity recommendation form for older adults over the age of 65

Name

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