

Personal Training by Robert J. Bovee

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EVALUATING CHEST PAIN

Usually, the main symptom of a heart attack is a heavy, squeezing, constricting, burning pain or discomfort occurring in the center of the chest. This pain may sometimes radiate down the left arm, across the left shoulder and upper back, or up to the neck and lower jaw. Anxiety, profuse sweating, nausea and vomiting, shortness of breath and fainting may also be present. In most cases, the pain or discomfort is severe enough to cause an individual to seek medical attention. In some instances however, the pain lasts for only an hour or less and the individual mistakenly believes that the chest pain is simply due to indigestion or skeletal muscle spasms. The following questions can be useful to help individuals differentiate cardiac chest pain from non-cardiac chest pain:

- Does the pain/discomfort get better or worse when changing body position? **Cardiac chest pain is not influenced by changes in position.**
- Is the pain/discomfort better or worse with respirations? **Cardiac chest pain is not exacerbated by respiration.**
- Is the pain/discomfort intense, dull or knifelike? **Cardiac chest pain is usually described as a dull ache or heaviness. It is seldom characterized as being sharp or stabbing.**
- Is the pain/discomfort deep or close to the surface? **Cardiac chest pain is deep, not superficial.**

If you or a client experiences chest pain, with or without other warning signs or symptoms, seek medical assistance immediately. **Do not wait to see if the symptoms subside!** Individuals have nothing to lose (except perhaps a little time and money) by going to the hospital on a false alarm, and it may **save a life.**

For more information, please contact Robert J. Bovee at (585) 330-0614.