



A free guide

Assess your fitness

3 home checks and the weekly minimum



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Please read

General education, not individual medical advice. Reading or using this guide does not create a doctor–patient relationship. Check with your doctor before starting any new exercise, supplement or treatment. Try anything in this guide only if it is safe for you, and stop if something feels wrong. In an emergency, call 911.



The 3 checks

Safety first. Check with your doctor before these checks or harder exercise if you have heart disease, diabetes or kidney disease; chest pain, fainting or unusual shortness of breath; joint or balance problems; or you're not sure. Stop any check if you feel pain, dizziness or chest discomfort.

In the studies I talk about in my video, “fit” meant heart-and-lung fitness: how hard your heart and lungs can work, measured on a treadmill test. You can't run that test at home, but a timed mile walk gets you a rough estimate. Strength and balance round out the picture. Write your numbers in the log on the last page, with the date. Your own trend over time matters most.

1. Heart-and-lung fitness: the mile walk

If you can walk a mile without stopping, do the mile walk. If a mile is too much, do the short walking-speed check instead. They measure different things, so don't compare one with the other.

Mile walk

Walk 1 mile as *fast as you can walk* (no running). Use a track, a measured route or your phone. Time it. Stop if you feel chest discomfort, dizziness or unusual breathlessness. If you're 30 to 69, turn your time into a fitness estimate on the next page.



The 3 checks *(continued)*

Short walk

Mark 13 feet (4 meters) on a flat, clear floor, with a few steps before the start line. Walk it at your normal pace and time it from the start line to the finish. Do it twice and keep the faster time.

2. Strength: chair stand (legs) and grip (hands)

Chair stand

Leg strength and endurance.

- Sturdy chair without arms (seat about 17 inches high), pushed against a wall.
- Sit in the middle, feet flat, arms crossed on your chest.
- Stand all the way up, then sit all the way down, as many times as you can in 30 seconds. If you're over halfway up at 30 seconds, count it.
- Stop if anything hurts or you feel unsteady.

The 3 checks *(continued)*

Grip (optional, needs a grip dynamometer)

A quick, simple measure of muscle strength. It adds to the chair stand; it doesn't replace it.

- Skip it if your hand, wrist or elbow hurts or had recent surgery, during an arthritis flare, if your blood pressure isn't under control, or if a doctor has told you to avoid straining (for example, after eye surgery).
- Sit in a chair *with* arms. Rest your forearm on the chair arm, wrist straight and just past the end, thumb on top. Set the handle so your fingers wrap it comfortably.
- Squeeze as hard as you can for about 3 to 5 seconds, until the number stops rising. Breathe out as you squeeze; don't hold your breath. Stop if anything hurts.
- Right hand, then left, 3 times each, switching hands. Write down the single highest of the 6.
- Use the same seated position and the same device every time.

About the device. A grip dynamometer measures squeeze force; exercise hand grippers don't. Clinics use the Jamar. One low-cost digital example is the Camry EH101 (roughly \$30 to \$40; prices change). In studies it read close to the Jamar on average, but a single reading can be a few kg off, so compare yourself with your own past results on the same device. Ignore any "weak," "normal" or "strong" label the device shows. We don't sell it and earn nothing from it.

The 3 checks *(continued)*

3. Balance: one-leg stand

- Skip this if you have balance problems, dizziness, or have fallen in the past year. Ideally have someone nearby.
- Barefoot, standing right next to a counter, close enough to catch yourself. Eyes open, arms crossed.
- Lift one foot and time how long you stay up. Stop at 45 seconds, when your foot touches down, when you uncross your arms or grab the counter, or if you feel dizzy.
- Best of 3 tries.

Our suggestion: re-check every 6 to 12 months and add each result to your log. One reading is noisy; your trend matters more than any single number. A big drop is worth mentioning to your doctor.



Your walk results: the mile-walk estimate and the short walk

Mile-walk fitness estimate (ages 30 to 69). Skip the estimate if you take a medicine that lowers your heart rate, you're outside 30 to 69, or anything in the safety box applies.

1. Right as you finish the mile, count your pulse for 15 seconds and multiply by 4. That's your heart rate.
2. Estimated VO₂max (liters/min) = $6.9652 + (0.0091 \times \text{weight in lb}) - (0.0257 \times \text{age}) + (0.5955 \text{ if you're a man, } 0 \text{ if a woman}) - (0.2240 \times \text{time in minutes}) - (0.0115 \times \text{heart rate})$
3. Multiply by 1,000, then divide by your weight in kg ($\text{lb} \div 2.2$). That's your estimate in mL/kg/min.

Or let a free calculator do the math: exrx.net/Calculators/Rockport. It uses the same formula. Compare your number with the bands below, not with the site's own rating.

Your walk results: the mile-walk estimate and the short walk *(continued)*

It's a rough estimate, about 4 to 5 points either way. Compare it with the bands below, and with your own retests.

Age	Men: lower than most (bottom quarter)	Men: middle half	Men: higher than most (top quarter)	Women: lower than most	Women: middle half	Women: higher than most
30–39	under 35.9	35.9–49.2	over 49.2	under 25.3	25.3–36.1	over 36.1
40–49	under 31.9	31.9–45.0	over 45.0	under 22.1	22.1–32.4	over 32.4
50–59	under 27.1	27.1–39.7	over 39.7	under 19.9	19.9–27.6	over 27.6
60–69	under 23.7	23.7–34.5	over 34.5	under 17.2	17.2–23.8	over 23.8

1 in 4 healthy people lands in the bottom quarter. These bands come from lab treadmill tests, not walk estimates, so treat your place in them as approximate.

Where “fit” starts. In the studies behind my video, “fit” meant not being in the least-fit 1 in 5 for your age and sex on a treadmill test. This table splits people into quarters, not fifths, so the bottom-quarter line is close to that cutoff, not the same. If your estimate sits near it, the weekly minimum page is where to start.



Your walk results: the mile-walk estimate and the short walk *(continued)*

Short walk: typical time for 13 feet (4 meters)

In healthy adults, walking at their normal pace.

Age	Men	Women
20–29	2.9 s	3.0 s
30–39	2.8 s	3.0 s
40–49	2.8 s	2.9 s
50–59	2.8 s	3.0 s
60–69	3.0 s	3.2 s
70–79	3.2 s	3.5 s
80–99	4.1 s	4.2 s

These are averages across many studies, not cut-offs. A slower time than the average isn’t a diagnosis.

Table sources: Kline et al. 1987 (Rockport walk, 343 adults aged 30 to 69) · Kaminsky et al. 2015 (FRIEND registry, 7,783 US treadmill tests) · Barry et al. 2014 and Weeldreyer et al. 2025 (how “fit” was defined) · Bohannon & Andrews 2011 (short walk; meta-analysis of healthy adults).



How people your age and sex compare: strength and balance

This is a comparison with other people, not a diagnosis.

Leg strength: 30-second chair stand

The CDC lists these numbers as below average for ages 60 and up.

Age	Men: below average if under	Women: below average if under
60–64	14	12
65–69	12	11
70–74	12	10
75–79	11	10
80–84	10	9
85–89	8	8
90–94	7	4

Under 60: we couldn't verify a full reference table. One study of healthy adults 19 to 35 averaged about 33 stands.



How people your age and sex compare: strength and balance *(continued)*

Grip: best of 6 squeezes, seated

Use the row closest to your age. Half of healthy people fall in the range shown. Under it is lower than most (bottom quarter); over it is higher than most (top quarter).

Age	Men: middle half	Women: middle half
20	35–46 kg (77–101 lb)	24–32 kg (53–71 lb)
30	44–58 kg (97–128 lb)	27–35 kg (60–77 lb)
40	44–57 kg (97–126 lb)	27–35 kg (60–77 lb)
50	41–54 kg (90–119 lb)	25–33 kg (55–73 lb)
60	39–51 kg (86–112 lb)	22–31 kg (49–68 lb)
70	34–44 kg (75–97 lb)	20–27 kg (44–60 lb)
80	27–37 kg (60–82 lb)	16–23 kg (35–51 lb)

1 in 4 healthy people lands in the bottom quarter. A standing, one-hand or averaged reading won't match this table.



How people your age and sex compare: strength and balance *(continued)*

Balance: one-leg stand, eyes open

Typical best of 3 in healthy adults (men and women were similar).

Age	18–39	40–49	50–59	60–69	70–79	80+
Typical time	about 45 s	42 s	41 s	32 s	22 s	9 s

Under 60, most people reach the 45-second cap.

Table sources: CDC STEADI 30-Second Chair Stand · Lein et al. 2022 (ages 19 to 35) · Dodds et al. 2014 (grip; 12 British studies, 49,964 people; most measured seated, most used a Jamar) · Roberts et al. 2011 (grip method) · Huang et al. 2022 and Sánchez-Aranda et al. 2025 (low-cost device checks) · Springer et al. 2007 (549 adults, US military medical center).



Build your fitness: the weekly minimum

For substantial health benefits, the US activity guidelines say adults should get:

- **Aerobic:** at least 150 to 300 minutes a week of moderate activity (like brisk walking), or 75 to 150 minutes of vigorous activity, or a mix.
- **Strength:** muscle-strengthening activities that work all major muscle groups, on 2 or more days a week.
- **Balance:** if you're 65 or over, add balance training to the mix.

This is a general target, not a plan made for you. Some activity is better than none. Benefits start before you hit the minimum, and before the scale moves.

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Aerobic (minutes)							
Strength (✓)							
Balance, 65+ (✓)							

Sources: *US Physical Activity Guidelines for Americans, 2nd ed. (HHS, 2018)* · *Riebe et al., Med Sci Sports Exerc 2015* · plus the table sources above.



My log

Re-check every 6 to 12 months. Write the date, then your result for each check you did.

Date	Mile walk (min:sec)	Fitness estimate (mL/kg/min)	Short walk (seconds)	Chair stand (stands)	Grip (best, kg or lb)	One-leg stand (seconds)