

Patient Name

Phone #

Date

Address

D.O.B.

Phase III Cardiac & Pulmonary Rehabilitation / Adult Fitness/Maintenance is a program of the Center for Cardiopulmonary Fitness & Wellness. This program includes cardiovascular conditioning, weight training and education. A physician referral is required for participation in this program.

1. Please check if you are treating the patient for any of the following conditions:

- Checkboxes for conditions: V45.81 CABG, 413.9 Stable Angina, 428.0 CHF, 425.4 Cardiomyopathy, 491.9 Chronic Bronchitis, 436 CVA, 401.9 Hypertension, 440.20 PAD, 780.53 Sleep Apnea, Other; V45.82 PTCA/STENT, 410.90 MI, V42.2 Valve Transplant, 492.8 Emphysema, 493.20 Asthma, 250.0 Diabetes, 278.00 Obesity, 443.9 PVD, 496 COPD.

2. STRESS TEST: He/she [ ] does, [ ] does not, need a stress test prior to starting this program.

3. Refer to Nutrition Services as indicated.

4. Based on patient's health status, you:

- Find that he/she should be able to safely participate in an exercise program administered at the Cardio-Pulmonary Fitness & Wellness Center at UM Shore Regional Health.
Participation is advised, but with the following constraints:

Blank lines for notes.

Physician's Name (Please Print)

Signature of Referring Physician

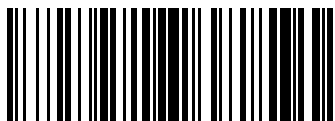
Date/Time

Physician's Phone Number

Physician's Fax Number

Check appropriate facility:

- UM SMC at Chestertown, UM SMC at Dorchester, UM SMC at Easton. Includes addresses and phone/fax numbers for each location.



CIM.763909

PHASE III CARDIAC & PULMONARY REHABILITATION / ADULT FITNESS PHYSICIAN REFERRAL

