DOCTOR REFERRAL LETTER

Dear **Living Longer Living Stronger Program™ Co-ordinator**,

I am recommending my patient/client undertake a monitored Living Longer Living Stronger™ strength training program that incorporates a progressive resistance format.

TYPES OF PROVIDERS:

Tier One - Exercise physiologists and physiotherapists
Tier Two - Fitness professionals who have completed the Living Longer Living Stronger™ advanced training course.

ELIGIBILITY FOR REFERRAL

Anyone over 50 years of age or those over 40 years of age with a disability.

INSTRUCTIONS FOR REFERRAL

1. Those who present with three or less low level risk factors please refer to a Tier Two Provider.
2. Those with chronic conditions, injury rehabilitation needs or four or more risk factors refer to Tier One Provider.

PARTICIPANT DETAILS

Title (Miss, Ms, Mrs, Mr): _____ Name: _____

Address: _____

Suburb: _____ Postcode: _____

Date of Birth: _____ Age: _____ Gender: ☐ Male ☐ Female

MEDICAL CONDITIONS

Please tick the appropriate box(es). Please elaborate in health history below if you ticked any of the following;

☐ Hypertension	☐ Surgery	☐ Vision impairment	☐ Heart allergies disease
☐ Arthritis	☐ Diabetes	☐ Brain/spinal injury	☐ Medicines
☐ Heart disease	☐ High cholesterol	☐ Muscular pain	☐ Neurological disorder
☐ Osteoporosis	☐ Epilepsy/seizures	☐ Broken bones	☐ Chronic fatigue
☐ Fall/Poor balance	☐ Cancer		

HEALTH HISTORY/CURRENT MEDICATIONS

Please attach a summary print out of the clients medical history and current medications

RECOMMENDATIONS

I Doctor_____ authorise _____

To undertake the Living Longer Living Stronger™ program.

Please consider the following when prescribing a training program:

1. _____

2. _____

3. _____

4. _____

5. _____

Please tick one of the following regarding your patient's progress:

☐ Yes, I do wish to be kept informed of the client/patient's progress

☐ No, I don't wish to be kept informed of the client/patient's progress

Signature: _____ Date: _____

REFERRAL TYPE (Please tick one box):

☐ **Tier One** - classes provided by Exercise Physiologists and Physiotherapists

☐ **Tier Two** - classes provided by Fitness Professionals who have completed the Living Longer Living Stronger™ advanced training course.

☐ **Working Seniors Tier** - for Seniors who need to attend outside class times during standard working hours. Patient must be capable of participating in Tier Two environments. Patient will receive personalised Tier Two level training program to undertake independently of supervised classes.

REFERRING ORGANISATION OR CENTRE DETAILS

Name of Medical Centre:
Address of referring Centre:
Name of person referring:
Contact numbers:
Fax number:
Email address:

FOR CLARIFICATION CONTACT

COTA (WA)
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