

## Healthcare Provider Exercise Referral

The CENTRE
Rolla's Health & Recreation Complex
1200 Holloway St., Rolla, MO 65401
573.341.2386
rollacentre.org/MyFitRx

Section A: Patient to complete
Patient Name
DOB
Phone
Section B: Provider to complete
The patient noted above has requested to enroll in the MyFitRx program at The CENTRE, Rolla's Health & Recreation Complex, which requires a healthcare provider exercise referral.
Based on the patient's responses to the Pre-Activity Health Screening, the most recent guidelines from the American College of Sports Medicine® (ACSM) recommend requesting an acknowledgement from their healthcare provider prior to engaging in and/ or resuming an exercise program.
Please check one of the following statements:
☐ <b>I DO NOT RECOMMEND</b> this member's participation in any exercise at this time. This member should undergo further evaluation or testing outside of The CENTRE before initiating an exercise program.
$\square$ <b>I RECOMMEND</b> this member's participation
in an exercise program, beginning with light
to moderate intensity exercise, with gradual progression, as tolerated, following ACSM
guidelines.

Date
Exercise Restrictions or
Recommendations: (If applicable)
Provider Name
Provider Signature
Date
Please return or fax completed referral to

I give consent to The CENTRE, Rolla's Health & Recreation Complex to send my healthcare provider this

information for an exercise recommendation.

Provider Name

Patient Signature \_\_\_\_\_



The CENTRE, Rolla's Health & Recreation Complex.

NOTE: THIS INFORMATION IS CONFIDENTIAL and intended ONLY for the purpose of receipt and review by the patient and healthcare provider named on this form and by The CENTRE, Rolla's Health & Recreation Complex. If you wrongly receive this information, please telephone and return the material to the sender immediately; any expenses incurred in such a return will be fully reimbursed. Any efforts made toward wrongful review or disclosure of this information may result

Fax: 573.341.2381

in prosecution.



☐ Functional Fitness

☐ Orthopedic Fitness

☐ Pulmonary Fitness

☐ Weight Management

☐ Transitional Care

MyFitRx Pathway:

☐ Cancer Fitness

☐ Cardiac Fitness

☐ Cognitive Health

 $\square$  Diabetes Fitness

☐ Fit for Surgery