

## HEALTH AND WELLNESS CLINIC GP REFERRAL FORM

Group education and exercise programs focusing on chronic disease prevention and management; and healthy ageing and falls prevention. Programs are delivered at no cost by an interprofessional health team.

PATIENT INFORMATION		REFERRER INFORMATION	
Full Name		Referring Doctor	
Date of Birth		Medical Clinic	
Address			
Phone Number			
Email		Clinic Phone Number	

Please select relevant inclusion criteria below:

HEALTHY LIFESTYLES	STRENGTH & BALANCE	EXCLUSION CRITERIA (both programs)
Over the age of 18 years with <b>one or more</b> of the following: AUSDRISK score 6+ (intermediate/high risk) Not meeting Australian Physical Activity Guidelines Current/past high blood sugar inc. gestational diabetes Current/past high blood pressure, inc. taking blood pressure medication Waist measurement $\geq 94$ cm (male) or $\geq 80$ cm (female)	Over the age of 50 years with <b>one or more</b> of the following: A recent fall – in the last 12 months Fearful of falling Desire to improve balance	<b>Any</b> of the following: <ul style="list-style-type: none"> <li>Blood pressure <math>&gt;180/110</math>mmHg</li> <li>Acute change in function</li> <li>Symptom acuity impacting on capacity to engage in program</li> <li>Significant cognitive impairment</li> <li>Unable to participate in a group environment</li> <li>Unable to safely independently mobilise (with/without mobility aids)</li> <li>Any condition that may require 1:1 supervision during exercise/sessions</li> <li>Pregnancy</li> </ul>

Patient information relevant to their capacity to participate in a group exercise and education program:  
e.g. mental/physical conditions or issues under investigation

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<b>This patient is able to engage in exercise:</b>	With restrictions (please specify): Without restrictions
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Please attach the following:

- PATIENT HEALTH SUMMARY**
- MEDICATIONS LIST**
- RECENT PATHOLOGY**

If your practice uses Medical Objects please send referral documents to:  
**SQRH Health and Wellness Clinic**  
ID: HS 435 00 00 51



\* Referrals will **not** be considered unless all information is included \*

### A COLLABORATION BETWEEN: