

SELF Referral Form – General

PATIENTS: You must bring this referral form with you to your appointment with the Exercise Physiologist for your initial consultation. Phone the Lifestyle Clinic on (02) 9385 3352 to arrange your appointment as soon as possible...**OR GP:** Please fax this referral from to (02) 9385 3195 after completing the information below.

Patient's surname: _____ First name: _____

Address: _____

Phone (work): _____ (A/H or Mobile): _____ Gender: M / F DOB: _____

Please send a report to my treating doctor

GP TO COMPLETE THIS SECTION:

1. MEDICATIONS:

Please list or attach a list of all current medications (can be printed from patient management software) :

2. HISTORY:

Does the patient have a history of any of the following?

- | | |
|--|---|
| <input type="checkbox"/> Coronary artery (heart) disease | <input type="checkbox"/> Peripheral vascular disease (claudication) |
| <input type="checkbox"/> Cerebrovascular disease (TIA, stroke) | <input type="checkbox"/> Foot problems (poor circulation, ulcer, etc) |
| <input type="checkbox"/> Nerve disease (peripheral/autonomic neuropathy) | <input type="checkbox"/> Eye Disease (Retinopathy / Maculopathy) |
| <input type="checkbox"/> Other (please provide details): _____ | |

Date of most recent bloods test: ____ / ____ / ____ FPG¹ / RPG²: _____ Triglycerides: _____

Total Cholesterol: _____ HDL: _____ LDL: _____ Blood Pressure: ____ / ____

1. FPG – Fasting Plasma Glucose 2. RPG – Random Plasma Glucose (Please circle)

GP's Name: _____ GP's Signature: _____

Phone: _____ Email: _____ Date: _____

For clarification on any matter please contact the Lifestyle Clinic on: (02) 9385 3352

EXCLUSION CRITERIA:

Cardiac: Uncontrolled hypertension (eg BP 170/100 or higher) • Recent onset/unstable angina pectoris • Recent unexplained or uninvestigated chest pain or exertional dyspnoea • Aortic stenosis or uninvestigated systolic murmurs • Moderate or severe CCF • Postural hypotension >20mmHg • Uncontrolled arrhythmia • Uncontrolled sinus tachycardia (>120 beats/min) • 3^o heart block (without pacemaker) • Active pericarditis or myocarditis • Myocardial infarction or coronary intervention (eg stenting or CABG <3mths ago) • Cardiomyopathy - suggest inclusion only on consultation with cardiologist • Other Pacemaker or valve replacement patients - on advice of cardiologist only.

Other: End-stage renal failure • Acute systemic illness or fever • Recent pulmonary embolism (<6mths since diagnosis) • Thrombophlebitis • Uncontrolled diabetes (random BSL's consistently >20) • Orthopaedic conditions that would prohibit exercise • Acute Metabolic disorders eg acute thyroiditis, hypokalaemia, hypovolaemia, hyperkalaemia • Stroke or TIA <3 mths ago.

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