



# Energise Exercise Referral Form

To be completed by the Referring Doctor or designated Health Professional

Please print clearly.

Patient Details			
Name:			
Address:			
Postcode:	DOB:	Age:	
Contact numbers:	Email:	Mob:	Home:

Referrer Details	
Name & Profession:	
Surgery/Department:	
Address:	
Postcode:	
Tel No:	

Cancer Diagnoses and Relevant Treatments			
Is patient still on active treatment?	Has patient finished active treatment?		
<input type="checkbox"/>	<input type="checkbox"/>		
Special Considerations e.g. cording, metastatic disease esp. bone/ brain/ lung mets			
Does the Patient suffer with any of the following cancer-related symptoms?			
Fatigue: <input type="checkbox"/>	Pain: <input type="checkbox"/>	Breathlessness: <input type="checkbox"/>	Lymphoedema: <input type="checkbox"/>



Past Medical History			
Chronic Heart Disease		CVA/Neuro problems	
Myocardial Infarction (If yes, was it in last 3/12)		Claudication	
Chronic Lung Disease		Hypertension	
Musculoskeletal problems ie OA/RA		Epilepsy	
Diabetes		Other: Details	

Current Medication			
BP		Resting HR	

Preference for Location of Exercise Class?		
a)	Everyone Active Stadium, Clevedon (Wednesday drop-in 2:00 – 4:00 pm)	
b)	Horfield Leisure Centre (Tuesday & Friday 11.00 am – 12.00 pm)	

Important Notice	
	The patient exhibits no contraindications to exercise.
	The patient is clinically stable.
	The patient is compliant with medication.
<b>Referrer's Signature:</b>	
<b>Print Name:</b>	<b>Date:</b>

Patient Informed Consent	
I agree for the above information to be passed onto the Exercise Instructor. I understand that I am responsible for monitoring my own responses during exercise and I will inform the instructor of any new or unusual symptoms. I will also inform the Instructor of any changes in my medication, or the results of any investigations or treatment.	
<b>Patient's Signature:</b>	
<b>Print Name:</b>	<b>Date:</b>

Please send completed referrals to one of the following addresses:

Energise Cancer Rehab,  
c/o Tracy Charles,

**Horfield Leisure Centre,**  
Dorian Road,  
Horfield,  
BS7 0XW

For all Energise enquiries please call: 07825 033741

[alistairmacfarlane@everyoneactive.com](mailto:alistairmacfarlane@everyoneactive.com)

Energise Cancer Rehab,  
c/o Alistair Macfarlane

**Everyone Active Stadium,**  
Davis Lane,  
Clevedon,  
BS21 6TG