



Fit & Strong!

Evidence Based Program

Medical Clearance Form

Dear Medical Provider:

Fit & Strong! is an evidence-based exercise and behavior change program for older adults with Osteoarthritis. The program consists of 60 minutes of stretching, low impact aerobics, fitness walking and strength training using ankle cuff weights and resistance bands. The exercise is followed by 30 minutes of group discussion and problem solving that helps participants maintain a safe and balanced physical activity program.

Some of the goals of this program are:

- **Benefits of physical activity**
- **How to manage arthritis**
- **How to exercise safely**
- **How to develop and maintain a healthier, more active lifestyle without pain**

The program is led by certified exercise instructors. Fit & Strong! has been shown to decrease joint pain and stiffness, improve function, reduce anxiety and depression in addition to promoting an active lifestyle.

Please complete the following:

I am not aware of any condition(s) that preclude the participation of _____ DOB _____
in the Fit & Strong! exercise class. (Patients Name)

Patient was examined on or last seen: _____

Are there any limitations for participation? Yes (please specify below) No

Types of medication taken, history of cardiovascular disorders, diabetes, orthopedic problems, respiratory problems, convulsive disorders, etc. that may affect the participation in the Fit & Strong! program?

(MD Signature)
Date
(MD printed name)

Address: _____

Phone: _____ Fax: _____

For more information/questions regarding Fit & Strong! Please contact Amy Chipman at VNA Public Health and Wellness, 508-957-7423. This form may be faxed to: 508-394-2109