

Pulmonary Rehabilitation Referral Form

Purpose

- The goals of pulmonary rehabilitation are to reduce symptoms, improve quality of life and increase participation in everyday activities.

Description

- Pulmonary Rehabilitation is an eight-week program that meets two times a week. It is designed to reduce symptoms, optimize functional status, increase participation, and reduce health care cost through stabilization or reversing systemic manifestations of the disease. The program includes patient assessment, exercise training, education and psychosocial support.

Patient Qualification

- Pulmonary Function Test (PFT) must be done within one year of starting pulmonary rehabilitation.
- PFT interpretation showing stage 2, 3, or 4 of COPD according to the GOLD standards.

Stage II: Moderate $FEV1 / FVC < 0.70$

$50\% \leq FEV1 < 80\%$ predicted

Stage III Severe $FEV1 / FVC < 0.70$

$30\% \leq FEV1 < 50\%$ predicted

Stage IV Very Severe $FEV1 / FVC < 0.70$

$FEV1 < 30\%$ predicted or

$FEV1 < 50\%$ predicted plus chronic respiratory failure

- Patient must be smoke-free during the duration of Pulmonary Rehabilitation.
- Patients with restrictive lung disease, i.e. pulmonary fibrosis, etc.

Patient Name: _____ DOB: _____ Phone: _____ day/evening

Diagnosis: _____

I refer the above patient to the Pulmonary Rehabilitation Program at Rutland Regional Medical Center.

(Please check the box to refer to Pulmonary Rehabilitation)

Date: _____ Time: _____ Physician Signature _____

Please fax this form to 802.747.6561 or mail to the address below. If you have any questions, please contact Lisa Taylor, Pulmonary Rehabilitation Coordinator at 802.772.2633.



Rutland Pulmonary Center

A Department of Rutland Regional Medical Center