

## DOCTOR CONSENT FORM TO BE COMPLETED BY PHYSICIAN

Client/Par	rticipant's Name _			
Diagnosis	s (list all)			
List impa	irments Cognitive	+ Physical (ex; Hemip	paresis, etc.)	
Sex	Height	Weight	Pulse	Blood Pressure
Date I La	st Examined Partic	cipant		_
Physical l	ExamNormal	Abnormal Expla	anation of Abnormaliti	ies
Recent Bo	one Density Study	: Results (T-Z Score,	Brief Summary, Date)	
Specify a	ny particular issue	s/area of concern – to i	include (Head/Neck, E	Eyes/Vision, Ears/Hearing, Heart/Lung, axity/Instability, Other, etc.)
List Surge	eries and Dates			
2100 2 012				
Dates of l	nospitalization in t	he past two years with	admitting diagnosis _	

## Medical Waiver Form (page 2) To be completed by Physician

Significant ABNORMAL tests (EKG, X-Ray, Lab)						
Please check (if any) programs you	1 DO NOT approve patie	ent to participate in:				
Rigorous Physical Exercise	e	Loading/Weight Bearing Activities				
UE Program		LE Program				
Trunk Stability		Balance				
Relaxation/Meditation		Weight Management				
Massage		Functional Electrical Stimulation				
Cardiopulmonary		Yoga				
Nutrition Nutrition		Locomotor Training*				
Circuit Training		Other:				
Whole Body Vibration						
*See back for more explana	ation					
Physician's Name (please print)						
Phone						
Address						
City	State	Zip				
Physician's Signature		Date				
Please return all forms to:  NextStep Atlanta, Inc.  Attention: Client Services						
1755 Grassland Pky. Ste B.	. Alpharetta. Ga. 30004	678-580-1404				
•	•	AN'S OFFICE EITHER BY FAX OR EMAIL				
Fax: (678)-580-1298 Email: adm		and a strict tribut by the one timet				
ORIGINAL INK FORM MUST A	1	LIPON START OF PROGRAM*				

\*(Original Ink Medical Waiver must be kept on file at Center – NextStep Atlantass, Inc.)

**FES Bicycle** - The Functional Electrical Stimulation (FES) Bicycle utilizes low voltage electrical simulation administered via electrode pads placed over specific muscle groups and sequenced through a microprocessor to fire the targeted muscle groups in the proper sequence to facilitate coordinated movements. The most common area is the quadriceps, hamstrings and gluteals to facilitate pedaling while in a seated position. The RT 300 FES also allows stimulation of trunk (abs and back extensors) and, with additional equipment, the upper extremities.

**Absolute contraindications**: cardiac demand pacemakers, unhealed fractures, pregnancy.

**Relative contraindications**: denervated muscles to be stimulated, severe spasticity, limited range of motion, severe osteoporosis, dysaesthetic pain syndrome, pressure sores or open wounds in areas to be stimulated, implanted hardware less than 3 months old.

Neuromuscular electrical stimulation (NMES), an activity-based pulse width, task specific stimulation to generate a motor output which in the spinal cord. Neuromuscular electrical stimulation is provided via the Restorative Therapies incorporated Sage unit with the use of 12 lead wires to 12 different muscle groups based on the targeted item from the Neuromuscular Recovery Scale. Tasks are performed with and without stimulation to transfer the improved neuromuscular capacity into the home and community environment.

**Locomotor Training (LT)** - Locomotor training utilizes a specialized un-weighting harness system positioned over an elevated treadmill. Two therapists/technicians are positioned in special seating next to each leg and a third stands behind the harnessed person to stabilize the hips.

The principle of locomotor training is to assist the stepping process by providing appropriate sensory cues to the flexor and extensor surfaces of the lower leg during locomotion. Partial weight bearing (and un-weighting) allows for freedom of movement and input through the feet. Neural retraining occurs as the nervous system relearns motor patterns associated with walking. Repetitive episodes increase overall fitness.

**Precautions/Considerations**: Since partial weight bearing is involved with LT, individuals at risk for osteoporosis may require bone density evaluation and gradual weight bearing intervention prior to participating in LT. Previous unstable joints (hip, knee, ankle) or joints with underlying conditions predisposing to injury may be problematic and may require evaluation. Individuals experiencing significant orthostatic hypotension may not be appropriate candidates.

