

**Medical Fitness Pros**  
21938 Royal Montreal Dr  
Katy, TX 77450

Name: \_\_\_\_\_  
Condition: \_\_\_\_\_

**Exercise Recommendations**

Check off the appropriate recommendations:

- |  |   |
|--|---|
| <input type="checkbox"/> FITSCREEN Assessment/Reassessment | <input type="checkbox"/> Flexibility Training |
| <input type="checkbox"/> Cardiovascular Training           | <input type="checkbox"/> Weight Reduction     |
| <input type="checkbox"/> Strength Training                 | <input type="checkbox"/> Diabetes Exercise    |
| <input type="checkbox"/> Hypertension Exercise             | <input type="checkbox"/> Functional Training  |
| <input type="checkbox"/> Spinal Stabilization              | <input type="checkbox"/> Aquatic Exercise     |
| <input type="checkbox"/> Back/Neck Exercise                | <input type="checkbox"/> Functional ADL's     |

Duration: \_\_\_\_\_ Frequency \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Referral Signature

\_\_\_\_\_  
Date