PULMONARY REHABILITATION/RESPIRATORY CARE—please check diagnosis

- COPD Gold Stage I (Mild)
  Stage I: FEV1/FVC < 0.70; FEV1 ≥ 80% normal (post bronchodilator)

- COPD Gold Stage II–IV (Moderate–Very Severe)
  Stage II: FEV1/FVC < 0.70; FEV1 50–79% normal (post bronchodilator)
  Stage III: FEV1/FVC < 0.70; FEV1 30–49% normal (post bronchodilator)
  Stage IV: FEV1/FVC < 0.70; FEV1 < 30% normal (post bronchodilator)

- Asthma

- Pre Lung Transplant

- Sarcoidosis

- Pulmonary Hypertension

- Bronchiectasis

- Pulmonary Fibrosis

- Extrinsic Allergic Alveolitis

- Cystic Fibrosis

- Post Lung Transplant

- Heart Failure (NYHA Class I symptoms) *If Class II–IV, refer patient to cardiac rehabilitation

- Other: ________________________________

Physician Statement and Plan of Treatment

Frequency: 2–3 days per week
Duration: Pulmonary Rehabilitation (G0424) 1 hr per session up to 2 sessions per day
Duration: Respiratory Care (G0237–G0239) As indicated

- I have examined the above patient and have determined admission into pulmonary rehabilitation/respiratory care services is medically necessary. Patient’s exercise program will be established, reviewed and updated by the Medical Director and staff. Discharge is dependent upon progress and completion of established goals; an outcomes assessment will then be completed. After discharge, I agree with patient’s participation in the maintenance program.

- I understand the program will consist of an individualized exercise plan (aerobic and resistance training), nutritional assessment and counseling, psychosocial assessment (counseling if necessary), smoking cessation (if necessary) and vocational rehabilitation (if necessary) to achieve individualized goals.

- I understand the patient may receive education and training on the following but not limited to: self-care/ADLs, disease management, home exercise, inhaler, peak flow meter, spirometry, nebulizer, pursed-lip and diaphragmatic breathing, bronchial hygiene, energy conservation, cough technique and relaxation exercises. The program may also include therapeutic procedures to improve respiratory function and increase strength or endurance of respiratory muscles. Patient will be monitored with continuous electrocardiography and/or pulse oximetry (intermittent or continuous). A six minute fitness test along with various balance and strength tests to be done depending on the severity of the disease.

- I understand patient will self-report glucose values and staff to use hospital glucometer during emergencies or if patient doesn’t have or bring their own glucometer. PFT’s may be performed if none available or updated results needed.

______________________________
Physician Signature (MD or DO only)  ________________________________
Date/Time

______________________________
Printed Name

Return Fax Number: 910-897-5902