

Pulmonary Rehabilitation Referral

For your referral to be accepted please complete all **highlighted** sections

Exclusion criteria for PR: Unstable Angina, Acute Heart Failure, MI within 6weeks, Resting BP ≥ 180 sys and/or 100dias, Moderate-Severe or Severe Aortic Stenosis, Severe Psychiatric Disorders, Lack of interest, Severe MSK limitations

| | |
|--|---|
| Patient Information: | GP Details: |
| Surname First Name Address Postcode Contact number NHS number Hospital number | Name Address Postcode Contact number Latest Spirometry results: Date: FEV ₁ FVC |
| Primary Respiratory Diagnosis: | Relevant PMH: |
| MRC: <input type="checkbox"/> 1 not troubled by breathlessness, except on strenuous exercise | Interpreter required: <input type="checkbox"/> YES, <input type="checkbox"/> NO If yes, what language: |
| <input type="checkbox"/> 2 Short of breath when hurrying on a level or when walking up a slight hill | Oxygen at home: <input type="checkbox"/> YES, <input type="checkbox"/> NO <input type="checkbox"/> LTOT (flow rate), <input type="checkbox"/> AOT (flow rate) |
| <input type="checkbox"/> 3 Walks slower than most people on the level, stops after a mile or after 15mins at own pace | Referrer Name: Designation Contact Number |
| <input type="checkbox"/> 4 Stops for breath after walking for 100yds (90m), or after a few minutes on level ground | |
| <input type="checkbox"/> 5 Too breathless to leave the house, or breathless when dressing or undressing | |

Information leaflet for patients can be downloaded from yourhealth.leicestershospitals.nhs.uk

Return referral to: pulmonaryrehabilitationreferrals@uhl-tr.nhs.uk

Alternatively, it can be posted to:

Pulmonary Rehabilitation Department, Glenfield Hospital, Groby Road, Leicester LE3 9QP

V10 May2024