

www.nextstepfitness.org

MEDICAL WAIVER

(To be completed by physician)

This form must be submitted from the physician's office by fax or email. Date of applicant's last examination is not to exceed 30 days from his/her initial evaluation at NextStep.

Client/Participant's Name		
Date participant was last examined		
Diagnosis (list all)		
List impairments Cognitive + Physical (ex; Hemiparesis,	etc.)	
Sex Height Pulse Blood Pressure		
Physical ExamNormalAbnormal Explanation of Abnormalities		
	Pressure Sore:	
	None	
15.74 14 4	Stage 1	
	Stage 2	
	Stage 3	
	Stage 4	
	Other Stage	

Recent Bone Density Study: Results (T-Z Score, Brief Summary, Date)____

Specify any particular issues/area of concern – to include (Head/Neck, Eyes/Vision, Ears/Hearing, Heart/Lung, G.U., C.N.S., Skin, Orthopedic Exam, ROM Loss/Contractures, Joint Laxity/Instability, Other, etc.)

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

List Surgeries and Dates				
Dates of hospitalization in the past two years with admitting diagnosis				
Significant ABNORMAL test	s (EKG, X-Ray, Lab)			
By checking below, you auth	orize client to participate in	the following programs offered at NextStep Fitness:		
Rigorous Physical Ex UE Program LE Program Trunk Circuit Training Whole Body Vibratio		Loading/Weight Bearing Activities Balance Functional Electrical Stimulation* Neuromuscular Electrical Stimulation* Locomotor Training* Other:		
Comments/Restrictions:				
Physician's Name (please prin	nt)			
Phone	_ Fax	Email		
Address				
City	State	_Zip		
Physician's Signature		Date		

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Mail original forms to:	
NextStep Fitness, Inc.	
Attention: Joel Wenger	Tel: 310-546-5666
4447 Redondo Beach Boulevard	Fax: 310-542-8868
Lawndale, CA 90260	Email: joelw@nextstepfitness.org

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 therapy, provides high frequency, wide pulse width, task specific stimulation to generate a motor output while increasing the central state of excitability 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.

