

# FitScripts

## at Powell Wellness Center



## 9 Specialized Programs

**FitScripts** features fitness programs for individuals transitioning from or managing a medical condition or needing additional support to improve their level of physical activity.

**Aquatic Fitness** Improve cardiovascular fitness, balance, and range of motion in an environment that reduces impact on joints.

**Cancer Fitness** Improve muscle function, range of motion, fatigue, depression, lymphedema and more.

**Cardiac Fitness** A maintenance exercise program where individuals learn to self-manage their overall cardiovascular health.

**Diabetes Fitness** Manage Type I or Type II diabetes or pre-diabetic symptoms.

**Hypertension and Obesity** Control your blood pressure, manage your weight, strengthen your heart and manage your stress level.

**Kids Fitness (10-14 yrs old)** Develop life-long fitness habits to manage weight, increase self-esteem and decrease stress and anxiety.

**Orthopedic Fitness** for pre/post orthopedic surgery or to manage a reoccurring injury.

**Pre/Postnatal Fitness** More energy during pregnancy, reduced stress and anxiety, quicker recovery from birth, fewer complications in pregnancy, shorter labor time and increased self-esteem.

**Pulmonary Fitness** Optimize activities of daily living for those with pulmonary or respiratory conditions.

### All 8-week programs offer:

- Fitness Evaluations at beginning, and the end of the program
- Individualized exercise plan
- 2 training sessions per week in small groups with medical fitness experts
- A summary report provided to you and your physician
- Unlimited full access to the center and its amenities
- Transition to full membership with a discounted enrollment fee at the end of the 8 weeks

# Medical Fitness Referral

Referral from a healthcare provider is required to participate in a FitScripts fitness program.

## Patient Information

Patient name \_\_\_\_\_

Patient phone \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Provider Information

Provider name (print) \_\_\_\_\_

Provider fax \_\_\_\_\_

Patient is referred for (choose the most appropriate program):

- |   |  |
|---|--|
| <input type="checkbox"/> Aquatic Fitness          | <input type="checkbox"/> Kids Fitness          |
| <input type="checkbox"/> Cancer Fitness           | <input type="checkbox"/> Orthopedic Fitness    |
| <input type="checkbox"/> Cardiac Fitness          | <input type="checkbox"/> Pre/Postnatal Fitness |
| <input type="checkbox"/> Diabetes Fitness         | <input type="checkbox"/> Pulmonary Fitness     |
| <input type="checkbox"/> Hypertension and Obesity |  |

Please list any exercise restrictions or recommendations:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provider signature \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Submit completed form to Angie Thoreson by fax (540) 829.4750 or email at [athoreson@culpeperwellness.org](mailto:athoreson@culpeperwellness.org)

## About Us

Powell Wellness Center is a member of the Medical Fitness Association and uses best practices to achieve better health and wellness.

- Exercise plans address special instructions from your physician or healthcare provider
- Exercises are selected to meet your specific healthcare needs
- Exercise specialists have a health-related degree and are nationally certified



CULPEPER WELLNESS *foundation*  
Powell Wellness Center

(540) 829.4749  
(540) 829.4750 (fax)

www.powellwellnesscenter.org  
1005 Golf Drive Culpeper, VA 22701