

**PEP Retreat**  
**October 28-29, 2017**  
**Physician Medical Release Form**

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

Doctor's Name: \_\_\_\_\_

Your patient, \_\_\_\_\_, DOB \_\_\_\_\_

wishes to participate in the **P**arkinson's **E**xercise **P**rescription Retreat (PEP Retreat) that will be held October 28<sup>th</sup> and 29<sup>th</sup>, 2017 in Oriental, North Carolina.

The PEP retreat is going to offer sample sessions of several physical activity/exercise programs that the current scientific evidence has found beneficial for people with Parkinson's Disease. The (abbreviated) sample sessions that will be professionally guided over the two-day period will include:

- **LSVT- Big:** an amplitude of movement therapy led by a physical therapist certified in LSVT
- **Rock Steady Boxing:** led by certified RSB coach currently teaching this PD specific program
- **Dance for PD:** led by professional dance instructor currently teaching PD-specific classes
- **Yoga for PD:** led by physical therapist who is a therapeutic yoga instructor with PD experience
- **PWR!** (Parkinson's Wellness and Recovery): a **functional** therapeutic exercise class led by a physical therapist certified in this technique
- **Tandem Cycling:** stationary tandems are used to safely assist people with PD achieve a cadence that is proving to be more neuroprotective than when cycling at self-selected speeds
- **Nordic Walking (w/ poles):** guided instruction will be given on how to use these assistive devices to increase stability, trunk mobility, balance, speed, stride length, and endurance.

The various activity sessions may involve cardiovascular training (such as jumping rope, running, punching heavy bags, riding stationary tandem bikes at up to 90 RPM), flexibility instruction (such as stretching and getting up and down off the floor), balance challenges (such as walking on narrow and or uneven surfaces), resistance and/or weight training and/or core strengthening techniques.

Participant MAY be involved in up to four different (30 minute) activity sessions per day (although they will be encouraged to rest frequently and/or sit out and simply observe the sessions if they feel the activities are beyond their physical ability). The objective, however, is to encourage the participant to start increasing their current activity level and, in doing so, it may stress their cardiopulmonary and/or musculoskeletal systems.

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The PEP Retreat is therefore requiring each participant to be medically cleared by their physician. Please fill out the following, giving your recommendation(s) for \_\_\_\_\_.  
(participant's name)

**PHYSICIAN'S RECOMMENDATION:**

I am not aware of any restrictions to participate in this program.

I believe the patient can participate but would urge caution (*Please explain*):

\_\_\_\_\_

\_\_\_\_\_

Patient should not engage in the following activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If your patient is taking medications that will affect their heart rate response to exercise, please indicate the manner of the effect (raises, lowers or has no effect on rate response during exercise):

\_\_\_\_\_

\_\_\_\_\_

**PHYSICIAN COMPLETES:**

\_\_\_\_\_ (patient's name) has my approval to attend and participate in the PEP Retreat sessions with the recommendations and/or restrictions stated above.

Printed name: \_\_\_\_\_

Phone: \_\_\_\_\_ and/or

Email or fax: \_\_\_\_\_

Signature: \_\_\_\_\_

**Return to:**  
PEP Retreat  
c/o Village Health and Fitness  
PO Box 769, Oriental, NC 28571  
Phone: 252-249-1869 Fax: 252-249-0112