



Heart Health Program MEDICAL RE-EVALUATION FORM

Dear Doctor,

Your client has currently been enrolled for 12 months in the Heart Health Program for Veterans: A free 12 month Health and Wellbeing Program provided by the Department of Veteran Affairs (DVA) and administered by Corporate Health Management (CHM) nationally.

The tailored program supported by a telephonic health coach assists participants to exercise regularly and includes health education on a range of topics covering goal setting, nutrition, diabetes, CVD prevention, backcare, stress management, alcohol, sleep and smoking cessation.

Regular medical assessments assist the participant in monitoring their progress towards their health and wellbeing goals.

Please re-evaluate your client today and include biometric measurements on this form.

Participant Name

Address

Phone

Participant's Details:

Blood Pressure:

Cholesterol: mmol/L

..... TC HDL

..... LDL Trig.

Blood Glucose: mmol/L

Weight: kg

Height: cm

Hip: cm

Waist: cm

Smoking Status: ☐ No ☐ Yes No. / day

Participant's Current Medications

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Participant's Medical Condition:

The participant currently suffers from the following conditions:

The following restrictions (if any) apply:

Participant should exercise at: (please tick)

☐ Low intensity

☐ Moderate intensity

☐ No limitations

Doctor's Signature:

Phone number:

Date: / /

Return via post to:
Heart Health Program Co-ordinator | Corporate Health Management | Reply Paid 91825, TULLAMARINE VIC 3043
Return via email to:
hearthealth@chm.com.au