V: 2025.1

| | V. 2025.1 |
|---|--|
| Contra-indication to community exercise: | Definitions & other relevant |
| Exclusion criteria | information |
| Asthma/Respiratory | Where ventilatory limitation restrains |
| Problems/COPD | submaximal exercise; Grade 3-5 MRC |
| | Dyspnoea Scale |
| Claudication with Cardiac | , , |
| Dysfunction | |
| Cardiac Disease | Unstable or uncontrolled |
| Uncontrolled angina | Onstable of uncontrolled |
| Acute Coronary | |
| event/Intervention/Diagnosis | < 6 months since acute event (referral to |
| including: | Phase III only) |
| | Priase iii only) |
| Stable Angina, | EVCEDTION Poterrals are accepted of |
| Myocardial Infarction, | EXCEPTION – Referrals are accepted <6 months post event for clients NOT |
| • CABG, | • |
| Valve Replacement, | eligible for Phase III but are medically |
| Angioplasty, | stable and with consent from |
| • Stent, | GP/Cardiologist I.e Type 2 MI with no |
| Heart Failure, | CAD present. |
| Arrhythmia | |
| Unstable or acute heart failure | |
| Uncontrolled arrhythmia | |
| Severe stenotic or regurgitant valvular disease | |
| Hypertrophic obstructive cardiomyopathy | |
| Third degree heart block | |
| Acute aortic dissection | |
| Hypertension | Resting >180/110mmHg |
| | Resting >180/110mmig |
| Significant drop in Blood Pressure during exercise | |
| Acute myocarditis or pericarditis | |
| Acute pulmonary embolus or pulmonary infarction | |
| DVT | Within 6 months or more until thrombus |
| | has been clearly resolved on vascular |
| | imaging |
| Uncontrolled resting tachycardia | >100 beats per minute |
| Stroke/TIA | < 3 months since event |
| > 20% CVD risk in next 10 years | Multiple risk factors as defined by JBS2 |
| | guidelines |
| | |
| Uncontrolled visual or vestibular disturbances | |
| Uncontrolled Diabetes Type I or Type II (advanced) | With accompanying generalised |
| | neuropathy and untreated retinopathy |
| | |
| Recent injurious fall without medical assessment | Refer to Falls prevention programme: |
| | Falls Prevention - Healthy You |
| Orthostatic Hypotension | SBP falls more than 20mmHg or DBP |
| | more than 10mmHg within 3 minutes of |
| | standing. |
| Inability to maintain an upright posture in sitting | |
| position | |
| Position | |

Cambridge City Exercise referral service – Exclusion & Inclusion criteria for health professional referral

| I | V: 2025.1 |
|--|-----------------------|
| Psychiatric Illness/Cognitive Impairment/Dementia | AMT score less than 8 |
| | |
| | |
| | |
| | |
| Osteoporosis with one or more fractures associated | |
| with low impact trauma | |
| Febrile Illness | |

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| Exclusion criteria for exercise referral: | Definition |
|---|--|
| Inappropriate referral | |
| BMI <30 without an accompanying medical | Overweight not an appropriate reason for |
| condition | referral without an associated clinical diagnosis. |
| | For patients with a BMI 25-30 without an |
| | associated medical condition, refer to HEALTHY |
| | YOU: Tier 2 Weight Management Programme - |
| | Healthy You |
| General Fitness without an accompanying | Deconditioned without an associated clinical |
| medical condition | diagnosis is not an appropriate reason for |
| | exercise referral. For general fitness referrals, |
| | patients can self-refer to HEALTHY YOU <u>Healthy</u> |
| | You - improving health across Cambridgeshire |
| | and Peterborough |
| Under 18s | |
| Patients under the influence of drugs or | |
| alcohol | |
| Currently active | Meet the CMO guidelines of 150 minutes or |
| | more of moderate physical activity per week |

Cambridge City Exercise referral service – Exclusion & Inclusion criteria for health professional referral

V: 2025.1

| | V. 2025.1 |
|---|--|
| Inclusion criteria for exercise referral – Health | Definition |
| Professional referral always REQUIRED: | |
| | |
| Stable angina | 6 months post diagnosis |
| Myocardial infarction | 6 months post event |
| Coronary Heart Disease | |
| CABG, Valve Replacement, Angioplasty, Stent, | 6 months post-surgery/event/diagnosis |
| Heart Failure & Arrhythmia | |
| Stroke or TIA | 3-12 months post event |
| Rheumatoid Arthritis | |
| Osteoporosis | BMD 2.5-4 |
| Joint Replacement surgery | 3-12 months post-surgery |
| Chronic back pain | Requiring CURRENT or RE-CURRENT medical |
| | intervention/treatment Eg. Physiotherapy |
| Cancer diagnosis | Clinically stable & treatment within last 12 |
| - | months |
| Parkinsons Disease | |
| Multiple Sclerosis | |
| Dementia/Alzheimer's | |
| Spinal cord injury | |
| Brain injury or trauma | |
| Type 1 or Type 2 Diabetes | With poor self-management Eg. Frequent |
| | hypos or associated complications Eg. |
| | Neuropathy, Retinopathy, Kidney disease or |
| | foot problems |
| COPD or Severe Shortness of Breath (SOB) | |
| | |

For all other long-term medical conditions, a health professional referral is unlikely to be required.

If in doubt as to whether a patient requires a health professional referral or can self-refer, contact the Exercise Referral co-ordinator by e-mailing: startup@cambridge.gov.uk or calling: 01223 458613.