

		www.oval.care
		medicalclearance@oval.care
		5650 Greenwood Plaza Blvd. Ste 107 Greenwood Village, Colorado 80111
Your patient participate in an employer-funded, sub- exercise prescription program at (facilitated by OVAL). OVAL is a metabo		at
	intensities and durations for steady state and progressive interval training within a user-based application on their phone or tablet. We	
	have all participants complete a brief health history questionnaire, and based on his/her responses, your patient needs to obtain medical clearance prior to participating in our exercise testing program. Once this form is completed and signed by you, your patient can return this clearance form to us.	
	If you have any questions regarding our testing protocols, please email us at medicalclearance@oval.care	
	Thank you,	
	Please check one of the followings:	
	<ul> <li>☐ Cleared to participate in exercise testing and prescription at this facility.</li> <li>☐ Not cleared to participate in exercise testing and prescription at this facility.</li> </ul>	
	Medical Provider Name:	
	Medical Provider Name:  Medical Provider Signature:	
	Date:	
	Phone number:	