



Use this form for requesting 3 month trials of the following equipment:

- AP31 - Knee Walker and Scooter - Trial
- AV18 - Stationary Exercise Bike Trial.

If your client requires the equipment for **longer than 3 months** please complete **RAP Mobility and Functional Support Products** - D0992 order form available from

<https://www.dva.gov.au/about-us/dva-forms/mobility-functional-support-mfs-products-order-form>

Privacy notice – Personal information is protected by law, including the *Privacy Act 1988*. Personal information may be collected by the Department of Veterans' Affairs (DVA) for the delivery of government programs for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

[Read more: How DVA manages personal information](#)

No duplication of government funded services

It is the responsibility of the requesting health provider to check the client is not accessing the same service/aid/appliance or home modification through more than one government service e.g. National Disability Insurance Scheme (NDIS), Commonwealth Home Care packages and RAP.

Prescriber's details

1 Prescriber type	Physiotherapist <input type="checkbox"/>	Exercise Physiologist <input type="checkbox"/>	Chiropractor <input type="checkbox"/>
	Osteopath <input type="checkbox"/>	LMO <input type="checkbox"/>	
	Specialist <input type="checkbox"/>	▶ Please specify	
		<input type="text"/>	
2 Provider's name	<input type="text"/>		
3 Provider number	<input type="text"/>		
4 Provider's organisation	<input type="text"/>		
5 Address	<input type="text"/>	POSTCODE	<input type="text"/>
	<input type="text"/>		
6 Contact number	[<input type="text"/>]	Mobile	<input type="text"/>
7 Email	<input type="text"/>		

Client's details

8 Surname	<input type="text"/>
9 Given name(s)	<input type="text"/>
10 Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
11 DVA file number	<input type="text"/>
12 Veteran Card type	Gold <input type="checkbox"/>
	White <input type="checkbox"/>
	▶ Please contact DVA on 1800 550 457 or RAPGeneralEnquiries@dva.gov.au to check eligibility under the client's Accepted Disability(ies).

Prescription

13 Equipment required

14 List the clinical needs to be addressed by the equipment requested

15 Outline the functional goals that have been achieved to date

16 Outline the functional goals that you expect to be achieved with the equipment.

Note: DVA does not fund equipment for general fitness or general reconditioning. If an exercise bike is required for weight loss there should be a referral from a bariatric specialist who continues to monitor the program.

17 Supplier choice

Aidacare

Allianz

BrightSky

Country Care Group

Safety

18 Knee walker/scooters

Can the client use the equipment safely?

No Yes

Is the client at risk of skin tears?

No Yes

19 Exercise bikes

Can the client independently mount the exercise bike safely?

No Yes

Is the client at risk of skin tears?

No Yes

Can the client reliably monitor level of exertion whilst exercising?

No Yes

Is the client using the exercise bike safely?

No Yes

Do your records contain the mandatory medical certificate from the client's GP/Specialist stating that it is medically safe for the client to use an exercise bike as part of an independent home exercise program?

No Yes


This certificate is mandatory and should include:

1. The client's current and past medical conditions and medications.
2. A statement from the GP/Specialist as follows - "I certify that (insert client's name) has a stable cardiovascular system and is medically safe to undertake an independent exercise program using an exercise bike".

Signature

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20 Prescriber's signature



Date

DVA Rehabilitation Appliances Program
Contracted Suppliers of Trial Equipment

<i>Supplier</i>	<i>Phone</i>	<i>FAX - General</i>	<i>Email</i>
Aidacare	1300 888 052	1300 787 052	dva@aidacare.com.au
Allianz Global Assistance	1800 857 715	1800 653 556	mfs@allianz-assistance.com.au
BrightSky	1300 799 243	1300 799 253	mfs.orders@brightsky.com.au
The Country Care Group	1800 727 382	1800 329 382	dva@country-care.com.au

Prescribers are reminded that the choice of supplier is theirs.

The alphabetical listing above is for administrative ease only.

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