

# Are you interested in ageing well?



**FITTEST Study**

AFN21-01

If yes, you may be eligible for the FITTEST Study! A study that aims to support people to participate in a frailty prevention program!

## Answer these questions to see if you are eligible for this study:

- Are you aged 65 years or older? 55 years or older if you identify as Aboriginal and/or Torres Strait Islander
- Are you living in the community? This includes your own home, with family or in a retirement village.
- Have you noticed yourself to be slowing down or needing a bit more help?
- Have you seen a geriatrician or GP for a health assessment in the last 12 months?
- Are you able to use an electronic device and travel to research activities within your local area?

**If you answered "yes," this study is for you!**

## What is involved if I participate?

- A program to optimise your exercise, nutrition, medication and social support based on latest research, with check-ins at 6 and 12 months.
- You will be randomly assigned to receive a self-directed program with online resources or a supported program (two exercise sessions each week with an exercise professional, one dietitian assessment, online group sessions and fortnightly health coach support).

## What do we want to find out in this study?

- We want to understand if the programs change frailty level, quality of life, physical function and activity, diet, medication plans, social support networks, and wellbeing.



**If you are interested in participating or want to learn more, you can contact us in one of the following ways:**

- Complete the form on the back of this sheet and hand it in at reception (if you are at a geriatrician clinic),
- Scan this QR code or visit **[fitteststudy.au](http://fitteststudy.au)** to complete the form online,
- Contact LEWIS via phone or SMS on 0416 930 723



Have you a 75+ health assessment with a general practitioner (GP) or have you seen a geriatrician in the past 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you aged 65 years of older, or 55 years or older if you are an Aboriginal and/or Torres Strait Islander person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently living in the community (i.e., you are NOT living in aged care or hospitalised)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you believe you are able to participate in a supervised or self-directed exercise, nutrition, social and medicines program for 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have access and ability to use a computer or other electronic device with internet service?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you:	
<ul style="list-style-type: none"> <li>• Able to travel to face-to-face assessments when you begin the study and at 6 and 12 months; AND <input type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>• Able to travel to exercise sessions within your local area if you are randomly assigned to the supervised program?</li> </ul>	
Name of your geriatrician or general practitioner (GP)	
Please provide additional information about your geriatrician e.g., suburb, hospital or health service, post code.	
Your residential postcode	
Please tick the location of your nearest study hub. <input type="checkbox"/> Prince Charles Hospital, Chermside, QLD <input type="checkbox"/> Ipswich Hospital, Ipswich, QLD <input type="checkbox"/> Bond University, Robina, QLD <input type="checkbox"/> Warrnambool Hospital, Warrnambool, VIC <input type="checkbox"/> Austin Health, Ivanhoe, VIC <input type="checkbox"/> Liverpool Hospital, Liverpool, NSW	<input type="checkbox"/> Centre for STRONG Medicine, Pymble, NSW <input type="checkbox"/> Lismore Base Hospital, Lismore, NSW <input type="checkbox"/> Fiona Stanley Hospital, Perth, WA <input type="checkbox"/> Fremantle Hospital, Perth, WA <input type="checkbox"/> Bunbury Regional Hospital, Bunbury, WA <input type="checkbox"/> Busselton Hospital, Busselton, WA
Your name	
Please tell us the best ways to contact you. Select all that apply. <input type="checkbox"/> Landline <input type="checkbox"/> Mobile phone <input type="checkbox"/> Email	
Please provide your landline number	
Please provide your mobile number	
Please provide your email address	
If there is any additional information you would like to add (e.g., no calls before 0900) please note here.	
Today's date	

Ask reception to send this for to the Study Coordinating Centre at the University of Queensland. Alternatively, take a picture of the whole page with your phone camera and email it to: [fittest@uq.edu.au](mailto:fittest@uq.edu.au).

You can also post this form to the Centre for Health Services Research, UQ, Level 2, Building 33, PA Hospital, 199 Ipswich Road, Woolloongabba, QLD, 4102.

Once submitted, the research nurse will contact you within approx. 7 days to check your frailty rating over the phone (i.e., you can only be a little bit or mildly frail to be in the study).

The research team at the University of Queensland is collecting your personal information solely for the purpose of this research study. Your information will only be used by the research team to contact you about this study. The University has more information about privacy online, you can find this by searching 'http://governance-risk.uq.edu.au/functions-and-services/right-information-and-privacy/privacy/personal-information-register'