



Shop T11, 90 Vineyard Rd, Sunbury 3429

P: 8722-9999 | F: 8798-8399

NEW PATIENT FORM

PLEASE WRITE DETAILS CLEARLY

Title: _____ Name: _____ DOB: _____

Ethnicity/Nationality/Background: (i.e. Italian/Indian/Sudanese/Australian) _____

Aboriginal: YES / NO _____ Torres Strait Islander: YES / NO _____ Both ATSI: YES / NO _____

Address: _____ Suburb: _____

Phone: (H) _____ (M) _____

Email Address: _____

Medicare Card Number: _____ Ref (No. Next to Name) _____

Expiry: _____

Pension/Healthcare Card Number: _____ Exp: _____

DVA Number: _____ Colour of Card: _____

Next of Kin Name: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Occupation: _____

Allergies: _____

Alcohol Consumption: Drinks per Day _____ Drinks Per Week: _____

Cigarettes Per Day: _____ Are you an ex smoker, if so what year did you quit? _____

Height: _____ cm _____ Current Weight: _____ kg

Female Patients – When was your last Cervical Smear? _____

Do you have any significant family history we need to know about? _____

Where did you hear about us? _____

RESULTS - It is the policy of this surgery not to inform or acknowledge any of your results over the phone (unless it is a telehealth consult). Please see your GP to discuss your results. Urgent matters and reminders will be dealt with in accordance to our recall and reminder policies.

YOUR PRIVACY IS OUR CONCERN - In accordance with the Privacy Act, all information collected in this practice is treated as confidential information. To protect your privacy, this practice operates in accordance with this Act. You can collect our clinics Privacy Policy from our Reception. Please note that your clinical file remains the property of Resolve Medical. You can access your file with your GP at any time. Should you wish to transfer your file to another clinic of choice, a small administration fee will be payable.

I have read and understood all the above information.

Signed: _____ Date: _____

Please tick this box if you wish to opt OUT of our recall and reminder process: