



Expression of interest in Enrolling with the Health Hub Project
NEW PATIENT HEALTH CHECK AND WHAT YOU NEED TO KNOW

Thank you for your interest in becoming a member of our practice.

Once we have received your completed enrolment form we will register you as a patient at our practice and request your medical files from your previous medical provider.

- Transfer of notes can take up to 2 weeks

NEW PATIENT HEALTH CHECK

As part of our enrolment process all newly registered patients over 25 years of age are required to attend a “New Patient Health Check”.

- The fee for this one off appointment is \$22.00.

To complete the enrolment process it is important that you undertake and complete the New Patient Health Check.

WHY WE REQUIRE A NEW PATIENT HEALTH CHECK

The purpose of the new patient check is to:

1. Help us understand your current state of wellness,
2. List any health concerns you may have,
3. Is an opportunity for both you and us to update and ‘load’ relevant health care data onto your records, and
4. Start the planning process for your future wellness.

SPECIAL NOTE: As part of this process we might advise that you get updated blood tests. You do not have to have these tests; however, we will need the most up to date blood results for baseline data.

WHEN DOES THIS NEED TO HAPPEN

Prior to your first clinical team consultation appointment

WHAT HAPPENS IN THE PATIENT HEALTH CHECK PROCESS

In the new patient process check the following may take place:

- Measurement of height, weight and waist circumference
- Discussion about your general health and past medical history
- Check blood pressure
- If appropriate, offer advice on diet and physical activity,
- Record any other relevant health care data
- Request updated blood tests

Any questions you may have about your health, or how we operate are welcome.



Name of Patient: _____

Date of birth: _____

Please list any concerns in order of priority that you may wish to discuss with us _____

By signing this form you agree to having a new patient check as part of enrolment process

Signature of Applicant: _____ Date ____/____/____