

Patient Registration

HAVE YOU SEEN DR. FISHER PREVIOUSLY? Yes or NO

WHERE? _____

MR /MRS/MISS/MS (please circle)SURNAME_____

GIVEN NAME_____

ADDRESS _____

SUBURB _____ POST CODE _____

DATE OF BIRTH _____ AGE _____

HOME PHONE _____ MOBILE _____

NEXT OF KIN _____ CONTACT NO_____

EMAIL _____

MEDICARE NUMBER _____ REF NO _____

PENSION NUMBER _____

HEALTHCARE CARD (HCC) NUMBER _____

DVA NUMBER (VETERAN AFFAIRS) _____ COLOUR_____

NAME OF HOSPITAL INSURANCE_____

MEMBERSHIP NUMBER _____

DOCTOR REFERRING YOU TO DR FISHER _____

YOUR REGULAR GP NAME _____

SUBURB _____ PHONE NUMBER _____

Consultation fees are as follows:

Initial Consultation	Private	\$220.00	(Medicare rebate \$130.20)
	Pensioners	\$155.00	
Subsequent Visit	Private	\$110.00	(Medicare rebate \$65.20)
	Pensioners	\$ 80.00	

It would be appreciated if the fees could be settled at the time of appointment. Payment can be made by cash or credit/ debit card. For your convenience, we can submit this to Medicare on your behalf.