giPATHOLOGY

08 9388 7775
gipathology.com.au

Dr Tony Barham
Office 5, Level 1, 115 Cambridge St, West Leederville WA 6007
Fax: 08 9382 8748 | ABN: 52 629 758 470 | APA: 1196

Patient title: Patient surname: Patient given names: DOB: Sex: Phone #:

Private health insurance (no gap) ☐
Schedule fee ☐
Bulk bill ☐

Patient Address:

Medicare #: Health Fund #:

DVA #: Your reference:

Hospital status at the time of service or when specimen obtained:
- Private patient in a private hospital ☐
- Private patient in a recognised hospital ☐

Tests requested: Histopathology ☐ Other ☐ Specify:

Clinical notes

LABORATORY COPY

URGENT ☐ Phone ☐ Fax ☐ Phone / fax #: Result required by:

SD ☐

Copy reports to:

Requesting doctor
Name, initials, address, provider number

Requesting doctor's signature

Date:

Your doctor has recommended that you use GI Pathology. You are free to choose your own pathology provider. However, if your doctor has specified a particular pathologist on clinical grounds, a Medicare rebate will only be payable if that pathologist performs the service. You should discuss this with your doctor.

Medicare Assignment (Section 20A of the Health Insurance Act 1973)
I assign my right to benefits to the approved pathology practitioner who will render the requested pathology service(s).

Signed: Date: Practitioner use only (reason patient cannot sign):

giPATHOLOGY

08 9388 7775
gipathology.com.au

Dr Tony Barham
Office 5, Level 1, 115 Cambridge St, West Leederville WA 6007
Fax: 08 9382 8748 | ABN: 52 629 758 470 | APA: 1196

Patient title: Patient surname: Patient given names: DOB: Sex: Phone #:

Hospital status at the time of service or when specimen obtained:
- Private patient in a private hospital ☐
- Private patient in a recognised hospital ☐

Patient Address:

Medicare #: Health Fund #:

DVA #: Your reference:

Tests requested:

PATIENT COPY

PRIVACY NOTE: The information provided will be used to access any Medicare benefit payable for the services rendered and to facilitate the proper administration of government health programs, and may be used to update enrolement records. Its collection is authorised by the provisions of the Health Insurance Act 1973. The information may be disclosed to the Department of Health or to a person in the medical practice associated with this claim, or as authorised/required by law.

Medicare Assignment (Section 20A of the Health Insurance Act 1973)
I assign my right to benefits to the approved pathology practitioner who will render the requested pathology service(s).

Signed: Date:

Requesting doctor
Name, initials, address, provider number