

**SOUTHERNSUN Pathology**

Suite 6, 32 Florence St, Hornsby NSW 2077

Ph: 02 9482 1050 Fax: 02 9482 4512 www.hornsbypathology.com.au

PATHOLOGIST Dr. Ian Katz MBChB, FRCPA, APA

MEDICARE/VETERANS CARD NUMBER

MEDICARE REF NUMBER  
EXPIRY DATE**PATHOLOGY  
REQUEST**

PATIENT LAST NAME	GIVEN NAME (INCLUDING MIDDLE INITIAL)	SEX	DATE OF BIRTH	YOUR REFERENCE
PATIENT ADDRESS		POSTCODE	TEL (HOME)	TEL (BUS)

TESTS REQUESTED

**LABORATORY COPY**

CLINICAL NOTES

 SD Self Determine (APP requirement only)EMERGENCY  PHONE  FAX  BY TIME

PHONE/FAX No.:

PRIVATE  SCHEDULE  MEDICARE  SD **DOCTOR'S SIGNATURE AND REQUEST DATE**

X..... / .. / ..

COPY REPORTS TO:

REQUESTING DOCTOR (PROVIDER NUMBER, SURNAME, INITIALS, ADDRESS)

HOSPITAL / WARD

Hospital status of patient at specimen collection or date of service

	yes	no
Private patient in a private hospital or approved day hospital facility	<input type="checkbox"/>	<input type="checkbox"/>
Private patient in a recognised hospital	<input type="checkbox"/>	<input type="checkbox"/>
A public patient in a recognised hospital	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient of a recognised hospital	<input type="checkbox"/>	<input type="checkbox"/>

**PATIENT'S SIGNATURE AND DATE**

MEDICARE ASSIGNMENT (Section 20A of the Health Insurance Act 1973)

I offer to assign my right to benefits to the approved pathology practitioner who will render the requested pathology service(s) and any eligible pathologist determinable service(s) established as necessary by the practitioner.

Patient Signature ..... Date .. / .. / ..

**PRACTITIONER'S  
USE ONLY**

(Reason patient cannot sign)

- Please ensure both patient name and date of birth are complete prior to removing label.
- Remove label and attach to specimens.
- If more than three specimens, please record patient details directly on additional containers.

NAME:	NAME:	NAME:
D.O.B.:	D.O.B.:	D.O.B.:

PLEASE DO NOT USE LABELS ON GLASS SLIDES - BEND TO REMOVE LABEL

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