

# Bracken Ridge State High School GP Clinic



### New patient registration form

We need this information to provide the best quality care. This form complies with the RACGP Standards for General Practices. This means your personal health information is kept private and secure, as required by federal and state privacy laws. If you have concerns, please leave blank and discuss this with the GP.

Practice Name

#### Bracken Ridge State High School GP Clinic

#### Section A: Personal Details

Title Surname	Given names		
Date of Birth Gender			
Medicare No. Ref No.	Expiry		
Home Address			
Contact Number (Guardian – if applicab	le) Contact Number (Patient)		
Email Address (Guardian – if applicable)	Email Address (Patient)		
Who can we contact in an emergency?			
Name Rela	ationship to you		
Contact Number			

# Section B: Cultural Background

Are you of Aboriginal or Torres Strait Islander origin?		
No Yes, Aboriginal Yes, both Aboriginal and To		
Other cultural background	Country of birth	
Is English your first language?	If no, do you require an interpreter?	
Yes No		

## Section C: Allergies and medicines

Please detail below any allergies or intolerances to medicines

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Please detail below any current regular medications or medicines, and any medical conditions

#### Section D: Consent

Do you consent to being contacted via your provided email address in relation to your care?

Yes No

Do you consent to the General Practitioner contacting your guardian in relation to your care?

Yes		No
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It depends. Please ask for my consent as required.

Do you consent to the General Practitioner sharing relevant information about your care with relevant school personnel?

Guidance Officer	Yes	No
School-Based Youth Health Nurse	Yes	No
Other Wellbeing Member involved in my care	Yes	No

# Section E: Current Health Concerns

What is your initial appointment in relation to?

Mental health
Sexual health
Medical

Other

Please provide below any other information you wish your GP to know about your appointment

Thank you. Please present to the Wellbeing Hub 5 minutes prior to your appointment time and sign in at the reception desk. If you have any questions about your appointment, you can contact the school GP clinic at GP@brackenridgeshs.eq.edu.au