



Title	First name	Last name	
DOB	<input type="text"/>	Preferred name	
Home phone	Mobile phone	Work phone	
Address	Suburb		Post code
Email address	Who referred you to this practice?		
Emergency contact	Relationship		

Health History Information

Do you take blood thinners e.g Aspirin or Warfarin?

Have you received medications to strengthen your bones? (e.g Fosamax)

Current medications (Please attach a list if more than four)

Do you have any allergies?

Females, could you be pregnant?

Yes

Weeks? _____

Health History Information (continued)

Please tick where appropriate

Heart problems or heart surgery

Rheumatic fever

High Blood pressure

Diabetes - Type 1 or 2

Bone disease (e.g. osteoporosis)

Infectious disease - e.g Hepatitis

Excessive bleeding or bruising

Cancer (Chemotherapy or radiation)

Stroke - year _____

Thyroid disorder

Asthma/lung disorders

Hayfever/Sinusitis

Stomach ulcers or reflux

Liver or kidney disease

Epilepsy or fainting

Current or former smoker

Please provide details

Medical practitioner:

Phone number

Please sign _____

Dated _____

Practice privacy policy

Our practice is committed to providing quality dental care for its patients. As a fundamental part of this commitment, the dentist(s) and staff of the practice recognise the importance of protecting the privacy and confidentiality of the information that we collect about you and your health and the advice and treatment we provide to you.

As well as being an important professional commitment to you, our practice is required to comply with applicable Commonwealth, State and Territory privacy laws. The Commonwealth privacy law is the Privacy Act 1988 and the State/Territory law is the [insert applicable law either Health Records and Information Privacy Act 2002 (NSW) [or] Health Records (Privacy and Access) Act 1997 (ACT)]. Under these laws, we are required to comply with a set of privacy Principles.

If you have any questions about our Privacy Policy please do not hesitate to ask your dentist or our reception staff.

Financial policy

Payment is required on the day of treatment unless prior arrangements have been made. You can pay by credit card, eftpos, cheque or cash. You may be entitled to a health fund rebate for your treatment but the value of this rebate varies and is out of our control. You can contact your health fund prior to treatment to determine your rebate.