

45 - 49 year old Health Check (MBS Items 701, 703, 705 & 707)

Date:

Patient Details:	GP Details:	<p>Patient agreement for Health Check to Proceed My GP has explained the purpose of this assessment and I/my carer give permission to discuss my medical history/diagnosis with other service providers as appropriate. All information will be confidential.</p> <p>..... Patient signature Date (Consent may be verbal and noted by GP in patient record)</p>
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Assessment		Advice and planned actions	Resources
Smoking		Lifescrpts smoking prescription: YES NO	Quitline: 131 848
Diet/Nutrition <small>eg. Number of portions of fruit and vegetables eaten per day and the types of fat eaten.</small>		Lifescrpts nutrition prescription: YES NO	HeartLine: 1300 36 27 87
Alcohol		Lifescrpts alcohol prescription: YES NO	DirectLine: 1800 888 236 - 24 hour phone counselling, information and referral service
Physical Activity		Lifescrpts physical activity prescription: YES NO	HeartLine: 1300 36 27 87 Go For Your Life Info Line: 1300 73 98 99
Depression			Beyond Blue: 1300 789 978
Osteoporosis			

Examination	Assessment	Advice & planned actions	Resources
Body weight/BMI		Lifescrpts weight management prescription: YES NO	
Blood pressure			
Skin cancer			
Tests	Assessment	Advice & planned actions	Resources
Lipids			
Diabetes			
Cervical cancer			
Prostate			
Other as appropriate (e.g. colorectal cancer, breast cancer)			

Patient nameGP name:

Medical History:

Family History:

Social history:

Current Progress Notes:

General Recommendations (if any)

Patient nameGP name: