



Stanley House, 5 Discovery Lane,
Mt Pleasant Q 4740
PO Box 10164,
Mt Pleasant Q 4740
Phone: (07) 4965 6565
Fax: (07) 4965 6566
Email: admin@rituranamedical.com.au
www.rituranamedical.com.au

PATIENT PRIVACY IN OUR PRACTICE

We value the doctor-patient relationship. Patient privacy is vital to such a relationship. The Privacy Act 1988 and its recent amendments formalise the already existing and acknowledged privacy obligations of our practice.

Our doctors and staff collect information from patients primarily to provide proper care and treatment. We have a legal and ethical duty to protect patient information. Patient information may have to be disclosed to other doctors, nurses, therapists, and medical technicians so that health care is not compromised.

The doctor in this practice is a member of various medical and professional bodies including the medical defence organisation. These organisations provide valuable services to their members. They require their members to provide information in relation to their medical practice, which may include patient information.

Patients who wish to look at their information held by this practice or who have other queries about privacy of information are welcome to discuss these matters with the treating doctor.

PATIENT CONSENT

I consent for personal information to be shared with other professional individuals or companies with whom Ritu Rana Medical Pty Ltd deem appropriate to be privileged to such information.

PATIENT INFORMATION FORM

Title First Name Surname

Date of Birth Age Occupation

Health Fund and Medicare Details:

Medicare Card No..... Ref No..... Expiry Date.....

Private Health Insurance Membership No.....

Contact Details:

Residential Address.....

Postal Address.....

Contact Phone No. - Home Work..... Mobile.....

Email.....

Next of Kin/Emergency Contact:

Name..... Relationship..... Best Contact No.....

Reason for Consultation: (Please circle) Obstetrics / Gynaecology / Fertility.....

Signature **Date** **Checked By**

Please Turn Over

PELVIC ULTRASOUND PATIENT INFORMATION

What is Ultrasound?

Ultrasound uses sound waves to produce images. The sound waves are transmitted into your body from a small handpiece that is called an ultrasound probe. Some of these waves are reflected and are processed by the ultrasound machine to form pictures that are shown on a TV screen and recorded.

Is Ultrasound Safe?

Ultrasound has been around for about 60 years now and numerous studies on patients and children, who had been examined before birth, have shown that it is a safe technique with no harmful side effects.

The trans-vaginal ultrasound procedure

The standard technique for looking at the female pelvis, especially before and during IVF or other fertility treatment cycles is by performing an internal trans-vaginal scan. The procedure will only take about 2 minutes. With your consent, asked to remove the bottom half of your clothing and lie down on a couch with a sheet covering you. You will be treated with dignity and your privacy always protected. The Doctor or Nurse will explain in detail what is involved and why it is important to have this scan done this way and how it gives clearer images. The examination will be performed by a Doctor.

This procedure involves a sterilised probe with some gel-like lubricant covered by a protective sheath being inserted into the vagina and manipulated very gently to show the anatomy of the pelvis. This probe is usually inserted by the examiner. This allows transmission of the sound waves into your body to allow a close look at your pelvic organs such as the uterus and the ovaries.

Results

Your scan will be read by the treating clinician and the results discussed with you. The Clinician will use this information to determine the next stage of your treatment.

SHARING OF INFORMATION CONSENT

Ritu Rana Medical will regularly send emails with attached documents (such as certificates, letters, appointment details, care, and treatment requests/request forms, procedural information, and quotes) that have not been encrypted with a password. Do you consent to Ritu Rana Medical sending an email with attached documents to your nominated email, GP practice, and any corresponding treating doctors?
YES / NO

Ritu Rana Medical will regularly send sms to your nominated mobile number. Information may include appointment reminders, urgent messages or unanswered calls messages. Do you consent to Ritu Rana Medical smsing you details regarding appointments and information regarding care and treatment?
YES / NO

PATIENT FULL NAME:

DOB:

PATIENT SIGNATURE:

DATE: