



Queensland
Government

Rural & Remote Palliative Care Telehealth Service

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

Facility:

Please complete all sections of this referral and submit via:

Fax : (07) 5687 2119 or

Email: GCsparta@health.qld.gov.au

If not already determined, please phone 1300 618 486 to arrange the details of the telehealth consult including an agreed time of the consult and details of which local clinician (e.g. GP, community nurse etc) will be present with the patient.

This referral may be completed by any clinician but must be signed by a Doctor or Nurse Practitioner and include their provider number.

Referral Details:

Referrer Name:

Address & contact details:

Date: / /

Patient Details:

Patient name:

Date of birth:

Address:

Phone number:

Medicare number: expiry date: / /

Next of Kin name and contact details:

GP Name and Practice Name:

Treating Practitioner (if different from GP):

Please include the following with this referral:

- Current medication and allergy list
- Specialist correspondence
- Relevant Radiology Results
- Relevant Pathology Results
- Please attach copies of any of the following: EPOA, AHD, ARP, Statement of Choices

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SW1041

RURAL & REMOTE PALLIATIVE CARE TELEHEALTH SERVICE



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Telehealth Consult Details

Which clinician will be physically present with the patient at the planned telehealth consult?

- Community nurse
- Outpatient nurse
- Nursing home nurse
- Medical practitioner (GP or another doctor)
- Other clinician:

Name of Clinician:

Clinician's mobile phone number:

Contact phone number of admin staff helping arrange:

Contact email of admin staff helping arrange:

What is the location of the planned telehealth consult?

- A residential aged care facility (RACF)
- At home or another private residential address
- At a GP surgery / medical centre
- In an outpatient department or local hospital
- At another site:

Land-line phone number at this site:

Preferred method of telehealth consult:

QH Cisco telehealth number or address. Dial-in details:

(*Please note: Gold Coast have a CMR number that can be utilised)

Web-browser link:

Please advise email address of clinician:

Skype – advise Skype username:

Microsoft Teams – advise Queensland Health email:

Facetime – advise iPhone number or iCloud address:

Expected wireless or mobile coverage:

- Mobile coverage – is there mobile phone coverage at the consult site?
- 4G coverage – is there 4G coverage at the consult site?
- Broadband – is there wireless or ethernet broadband access at the consult site?

**Are there any risks or hazards to be aware of for the clinician who will be present with the patient?

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