



TELEHEALTH CONSULTATION

Welcome

To get you started with your Telehealth Consultation there are some important details & information we would like to collect so your follow up video call can be as thorough as possible and we can best help you with your ongoing care & management.

Please allow 15-20 mins to complete this 1st stage of your consult.

We have a series of questions about your injury or problem following that we ask you to please answer with as much information as possible.

Payment can be made via credit card over the phone, through our website booking system, or by EFT Transfer before your consult. A receipt will be issued to you to claim with your private health insurance*.

You will be bulk billed if you have:

- Current EPC/Care plan from your GP,
- Active claim through Workers Compensation/ MVA,
- DVA approved for physiotherapy
- Amity Health ICDC approval.

(* Please check what you are able to claim with your private health insurance as all companies differ in criteria.)

Please return this form to enquiries@earlstphysio.com.au before your booked telehealth appointment for your physiotherapist to check over.

If you are having any difficulties completing this Assessment please phone **08 9881 3799** & we are happy to help guide you along.

Full Name:

Date of Birth:

Mobile:

Gender:

Home:

Email

Your Occupation:

Describe any aspects we should know about your occupation & how it relates to your complaint:

What is your current address (this helps to give us an idea of your remoteness & your potential access to services & equipment you may need).

Q1 What is the main body part affected by your injury or problem you would like to discuss this consultation?

Select which side of your body is affected:

Left

Right

Both sides

Central

Both but more left

Both but more right

Other

Q3 Where is your pain/ issue located? Does it move anywhere else?

Q4 How do you think this issue started?

Q5 How long has this been an issue? Has it happened before? When?

Q6 What do YOU think is the issue? How do you perceive this will be treated/ managed?

Q7 Please describe your pain?

Constant	Comes & Goes	Other
Sharp	Dull	
Stabbing.	Burning	No Pain- only stiffness

Q8 Do you have any of the following

- Pins and Needles
- Tingling
- Numbness
- Altered Sensation
- Any Other unusual sensation

Q9 Is the issue getting better, worse or staying the same?

- Same
- Better
- Worse
- Other

Q10 What is your pain level on a scale 1-10?

Zero is no pain at all & 10 is the worst pain you could possibly imagine

At the Best

At the Worst

Most of the time (average)

Q11 Over the day- is there a time of day you are better/ worse?

Q12 Has your sleep been affected by this issue? Do you wake more? Trouble getting to sleep? Please briefly describe. (eg- how many times a night waking- how many nights/ week?)

Q13 Have you tried anything to make this issue better? Did it work?

Q14 What makes this issue better?

Q15 Do you have any ongoing health concerns? This included recent surgery or procedures or any diagnoses even if well controlled? Please list. (eg. High blood pressure/ diabetes)

Q16 Do you take any medications? Have you added any for this current issue?

Q17 Have you had any of the following?

Recent unexplained weight loss

Headaches

Gut Disturbance

Blurred vision

Nausea

Metallic Taste in Mouth

Loss of appetite

Dizziness

Shortness of Breath

Bladder/Bowel Problems/ Changes

If you have any further documents, pictures or videos that are relevant to your injury please remember to attach them when returning this form.

Thank you for filling in the above information. It is very important for us to have a thorough history to enable us to plan for our further assessment via telehealth and then most importantly plan your future management.

You should have received a link by now with details about booking your video call. Please contact us on **9881 3799** or **enquiries@earlstphysio.com.au** if you have not received this.

Telehealth Readiness Checklist

Switch off any distractions around you whilst your consultation is in progress.

For weaker internet signal turn off whatever else may be using wifi at the same time.

Wear suitable clothing for telehealth consults as you may need to show the area of concern.

Please set yourself up in an area where it is quiet & there is good lighting & space to allow us to get you to do certain movements as part of your assessment. You may need to lie down.

If you are using your computer for these consults, could you also have a mobile phone handy in case we need you to video from a position that is difficult to do from a computer.

Please have any relevant reports or scans close by for us to check if we haven't already received them or if we need to discuss anything with you regards them.