

Medicare Health Assessment for Older Persons (75+)

Use of a specific form to record the results of the health assessment is not mandatory but the health assessment should cover the matters listed below.

Patient Details			
Patient's Name	Male □ Female □ DOB/ or Age		
	Nationality		
Current contact details			
Address	Carer's name/s		
Phone	Alternative contact details		
	Address		
	Phone		
Consent – Patient and/or Carer	Consent given for information to be collected by:		
Explanation of health assessment given? Yes	Nurse Yes □ No □		
Consent for health assessment given? Yes □			
Consent given by? Patient □ Carer □	Other health professional Yes □ No □		
Date consent was given/	If yes, please specify		
PATIENT'S OVERALL HEALTH STATUS			
HEALTH ISSUES IDENTIFIED AND DISCUSSED V	VITH PATIENT		

TESTS UNDERTAKEN, RESULTS AND WHAT THEY MEAN (SOME RESULTS MAY NOT BE AVAILABLE)

Note: The assessment should not require diagnostic or pathology services unless the health assessment detects issues that necessitate clinically relevant diagnostic imaging or pathology services.

		AVAILABLE RESULTS AND WHAT THEY MEAN
RECOMMENDED ACTION		
ACTION TO BE TAKEN BY DATIENT	F AND/OR CARER	
ACTION TO BE TAKEN BY PATIENT	AND/OR CARER	
lext medical review due:	Date//	
lext Health Assessment due:	Date//	
GP Dr	GP's signature	Date/
PATIENT HISTORY		
	ability service	
Government-provided or funded disa	ability service	
Government-provided or funded disa Previous presentations	ability service	
Government-provided or funded disa	ability service	
Government-provided or funded disa Previous presentations	ability service	
Government-provided or funded disa Previous presentations Family relationships	ability service	
Government-provided or funded disa Previous presentations Family relationships Care arrangements		CURRENT RISK FACTORS
Government-provided or funded disa Previous presentations Family relationships		
Government-provided or funded disa Previous presentations Family relationships Care arrangements		
Government-provided or funded disa Previous presentations Family relationships Care arrangements		
Government-provided or funded disa Previous presentations Family relationships Care arrangements		

HEALTH ASSESSMENT

Check blood pressure		
IDENTIFIED HEALTH ISSUES	ACTION	
Check pulse rate and rhythm		
IDENTIFIED HEALTH ISSUES	ACTION	
Review medication		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess continence		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess psychological function including mood	and cognition	
IDENTIFIED HEALTH ISSUES	ACTION	
IDENTIFIED FIEAETH 1000E0	Action	
Check immunisation status (Refer to the current of (NHMRC) for appropriate vaccination schedules).	Australian Standard Vaccination Schedule	
Influenza		
Tetanus		
Pneumococcus		
IDENTIFIED HEALTH ISSUES	ACTION	

Assess patient's physical function	
Activities of daily living	
Falls in the last 3 months	
IDENTIFIED HEALTH ISSUES	ACTION
Assess patient's social function	
Availability/adequacy of paid and unpaid help	
Whether the patient is responsible for caring for another person	
IDENTIFIED HEALTH ISSUES	ACTION
IONAL COMPONENTS as relevant to the patient	
IONAL COMPONENTS as relevant to the patient Multi system review	
	ACTION
Multi system review	ACTION
Multi system review IDENTIFIED HEALTH ISSUES	ACTION
Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption	
Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption	
Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption	
Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption IDENTIFIED HEALTH ISSUES Assess level of exercise	ACTION
Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption IDENTIFIED HEALTH ISSUES	
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Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption IDENTIFIED HEALTH ISSUES Assess level of exercise IDENTIFIED HEALTH ISSUES Assess fitness to drive	ACTION
Multi system review IDENTIFIED HEALTH ISSUES Assess alcohol consumption IDENTIFIED HEALTH ISSUES Assess level of exercise IDENTIFIED HEALTH ISSUES	ACTION

Assess foot care		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess hearing		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess vision		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess weight, height, body mass index		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess sleeping patterns		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess need for community services		
IDENTIFIED HEALTH ISSUES	ACTION	
Assess home safety		
IDENTIFIED HEALTH ISSUES	ACTION	

Assess mobility	
IDENTIFIED HEALTH ISSUES	ACTION
Assess diet and nutritional status	
IDENTIFIED HEALTH ISSUES	ACTION
Assess cardiovascular risk factors	
IDENTIFIED HEALTH ISSUES	ACTION
Assess postural hypotension	
IDENTIFIED HEALTH ISSUES	ACTION
Assess oral health	
IDENTIFIED HEALTH ISSUES	ACTION
Assess smoking status	
IDENTIFIED HEALTH ISSUES	ACTION