

Moreland Road Clinic Osteopathy Patient Information

What to expect from your consultation

First Visit (40-50mins)

Your initial consultation starts with a detailed case history, asking you about how we can help you and any relevant medical and family history.

Examination consists of various osteopathic, orthopaedic, neurological and other special tests. These are done to better understand what is causing your problem, and to ensure that you are safe to treat.

After the examination, a working diagnosis will be reached and a treatment plan discussed. This may or may not include osteopathic treatment at that time, for example if we want to talk to your GP about some of the issues raised (we will ask you if we can do this).

Osteopathic treatment consists of soft tissue techniques, such as stretching and massage; articulation, taking the joints through their ranges of movement; exercise management, both supervised and home programs; and some specialised techniques such as HVLA ('manipulation', as it is commonly known), MET (a type of resisted stretch), Counterstrain and others. Any techniques utilised during treatment will be discussed with you first.

Note: You will be asked to undress to your underwear for examination and treatment, so please wear appropriate underclothing. Towels will be used to cover areas of the body not undergoing treatment. Please let us know if you have any concerns about this, and we can discuss alternative options.

Follow-up visits (30-40mins)

These start with a brief review of progress and examination of the previously identified key areas, followed by further treatment.

As part of your management plan, you may be asked to perform a home exercise regime. Appointments that include exercise prescription or review may last a little longer, around 45 minutes.

Potential risks and side-effects to treatment

As in the practice of any form of medicine, in the practice of osteopathy there are risks and side-effects to treatment. While these are in the great majority of cases confined to post-treatment muscle and joint soreness, which settles rapidly, they include (but are not limited to) muscle strains, joint sprains, fractures, disc injuries, nerve injury, nausea, dizziness, bleeding, breaking loose of blood clots, tears in blood vessels or strokes, bruising, inflammation, or exacerbation or aggravation of my presenting or other pre-existing conditions. The more severe of these are extremely unlikely, but materially possible. For example, the incidence of stroke or stroke-like episodes associated with manipulative treatment of the neck is estimated to be 1-2 per 1,000,000 manipulations performed.

Confidentiality and ethics

Your osteopath will keep notes on your treatment. By undergoing treatment you agree to a record being kept of your visits. You may request a copy of your patient file at any time (an administration fee will apply).

Your treatment notes will be kept in a locked filing cabinet at all times, and any electronic records are digitally protected.

We may want to contact your GP or other healthcare professionals during the course of your treatment, to gain a clearer picture of your health history or to organise further investigations or treatment. Please indicate on the consent form at the end if you would not like us to do this.

Fees

Standard

<i>Initial Consultation</i>	\$115
<i>Extended Consultation</i>	\$105
<i>Follow-Up Consultation</i>	\$95

Concession (Healthcare card, Pension, Student)*

<i>Initial Consultation</i>	\$95
<i>Extended Consultation</i>	\$85
<i>Follow-Up Consultation</i>	\$75

Off-Peak (9am – 4pm weekdays)

**only available during off-peak hours*

<i>Initial Consultation</i>	\$105
<i>Extended Consultation</i>	\$95
<i>Follow-Up Consultation</i>	\$85

You do not need a referral to see an osteopath, however patients with a valid Medicare EPC referral from your GP are eligible for up to five sessions per calendar year for you to use for your osteopath and other healthcare providers (e.g., dietician, podiatrist).

Medicare CDM/EPC, TAC, Workcover and Veterans Affairs all accepted with GP referral, and concession card-holders will be bulk-billed during off-peak hours on weekdays. However, you are still ultimately responsible for the settling of any accounts in cases where the relevant body will not cover the cost of treatment. You may be asked to cover the cost of sessions until you can provide written authorisation from the relevant body (Worksafe Victoria, TAC etc.)

Please note that after 4pm and weekends the full fee will apply, i.e. no bulk-billing, no concession rates.

Cancellations policy

Cancellations must be made at least twenty-four hours prior to the appointment time. If you have provided us with a mobile number or email address you will receive a reminder a day or two before your consultation. Please let us know if you will be unable to attend within 24 hours. This is a courtesy to other patients who are in pain and need treatment as soon as possible.

Moreland Road Clinic charges an administration fee of \$50 for cancellations within 24 hours. Missing an appointment will incur the full cost as a fee. To cancel, please leave a message on the work landline or mobile.

Please note that Medicare, TAC, DVA etc. will not pay any fees for missed appointments or late cancellations. You will be responsible for such accounts.

What you need to do in preparation for your consultation

- Read through the above information carefully. If you have any questions please write them down and bring them to your consultation.
- Fill out the following form as completely and accurately as you can. If you have had any scans or tests done, please bring those to the appointment with you.
- There are two (2) copies of the consent form attached. These state that you have fully read all the above information about what to expect from your consultation, fees, potential risks of treatment, and ethics & confidentiality.
- Please *do not* sign the consent form until you have had a chance to discuss the contents of this pack with your osteopath. One copy of the consent form, plus the information at the start of the pack, is for you to keep. The other copy, plus your health history, is for our records.
- Please arrive a few minutes early for your appointment to allow time for any discussion of the above points.
- For receiving the Medicare rebate into your bank account, please ensure your current bank account details are registered with Medicare. You can find the form for this in the 'Downloads' section of our website, or they are available at reception.

Informed Consent to osteopathic care – patient copy (you do not need to sign this)

When performed by a qualified osteopath, osteopathic treatment is an effective and extremely safe form of treatment for many painful conditions.

There are however risks associated with any form of treatment, and I am required to inform you of these. Please read all the material accompanying this form and the following carefully, and write down any questions you may have:

Please do not sign the form until you have seen your osteopath and you have had a chance to ask any questions you may have.

I have read the above section regarding potential risks and side-effects to treatment. Furthermore, I understand, and am informed that, I do not expect the osteopath to be able to anticipate and explain all possible complications and risks at all times, and I wish to rely on the osteopath to exercise his/her clinical judgement in carrying out the course of treatment which the osteopath feels, at that time, based on the facts then known, is in my best interests.

I give permission for records to be kept of my treatment, such notes to be kept confidential unless authorised by myself.

Should further information be required, I give my permission to ask the respective nominated health care provider (such as your GP), who may release the pertinent information. I accept that it is my responsibility to and will notify my osteopath of any changes in my health status or medication regime as soon as possible.

I have read the above section regarding fees, and cancellations.

I understand that results are not guaranteed.

I have had the opportunity to ask questions about the nature and purpose of osteopathic treatment, and the above content.

I hereby request and consent to the performance of osteopathic treatment on me by Dr. Edmund Bruce-Gardner, and/or any other osteopaths working in this clinic authorised by Dr. Bruce-Gardner.

I understand that I can withdraw my consent to treatment at any time, and that my osteopath will gain ongoing verbal consent from me over the course of treatment.

I certify that all information that I have provided is true and accurate to the best of my knowledge, and do not hold any practitioner or the practice liable for any decisions made on the basis of inaccurate or missing information.

Patient Signature

Date

Practitioner Signature

Date

New Patient Registration

Name _____ Date of Birth _____

Phone _____ Mobile _____

Email _____

Occupation _____

Employer _____

Hobbies/Sports/Leisure activities _____

Address _____

Emergency Contact _____

Medicare Number
(if applicable) _____

Claim Number
e.g. TAC, Workcover (if applicable) _____

How did you hear about us?
e.g. friend, Google, GP referral
Please put the name of the friend who referred you so they can get a discount off their next treatment!

Please indicate if you would NOT like to receive our newsletter via email
Don't worry! Emails will be infrequent, and we will never share your
details with anyone else without your permission.

Please turn over and give us further details about why you are here.

What is the main reason for your visit here today?

Have you seen another healthcare professional about this matter
(GP, specialist, physiotherapist, chiropractor, osteopath or other)?

What is your GP's name and address?

Have you had any tests or investigations
(X-ray, MRI, CT scan, blood tests, ultrasound, bone scan, or other)?

General health – do you feel well in yourself? How are you sleeping?

Please provide any further details of your presenting complaint:

Please list any history of serious illnesses, surgeries/hospitalisations, fractures, car crashes etc.

Are you on any medications at the moment? (Including dietary supplements and the contraceptive pill)

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I certify that all information that I have provided is true and accurate to the best of my knowledge, and do not hold any practitioner or the practice liable for any decisions made on the basis of inaccurate or missing information.

QUESTIONS ABOUT THE ABOVE? WRITE THEM HERE:

Patient Signature

Date

Practitioner Signature

Date