

activeMEDICAL

Trial Booking

Prescription Form



Form Information

Dealer Information

Date of Birth	/	/	Sales Rep	
Street Address			Email	
Suburb			Phone	
Postcode		State	Fax	

Client Information

Date	/	/	Full Name	
Contact			Street Address	
Funding Number			Suburb	
Plan Date - Start to Finish		to	Postcode	State
Plan Manager			Client Weight	kg

Funding Type

<input type="checkbox"/>	M.A.S.S.	<input type="checkbox"/>	NDIS	<input type="checkbox"/>	Homecare Package	<input type="checkbox"/>	Other: _____
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Support Coordinator Information

Date	/	/	Email	
Full Name			Street Address	
Organisation			Suburb	
Mobile			Postcode	State
Office Phone				

Comments

Trial Information

Does the equipment consultant need to be present?

Yes

No

Prescriber/Clinician Information

Full Name

Phone

Email

Availability for Trial - Week Day Only

Monday

Tuesday

Wednesday

Thursday

Friday

From

To

Location for Trial

Home

Showroom

Office Address

Access Details (Parking available, recommended access, Narrowest doorway, steep driveway, stairs ect)

Accessibility Details (Mobility aids used, transfer aids required eg hoist ect)

People Present at the trial (Client, OT, Carer, Family ect)

Equipment Request Details

Dimensions (mm), Specific clinical requirements & Details (of equipment you would like to trial)

Additional Equipment Required (If requesting hoist, check bed dimensions ect)

Current equipment in use and issues regarding it

Client Assessment Information

Client Goals & Requests (What do they want to achieve with our AT Equipment?)

Prognosis

Stable

Progressive

Rapid deterioration of condition

Communication Requirements

Verbal

Non Verbal

Hearing/ Vision Issues

Mobility Status

Mobile

Inmobile

Weight Bearing

Assisted Mobility

Client Assessment Information Cont.

Client Measurements

kg	Weight	mm	Height
mm	Lower Leg Length	mm	Coccyx to top of head
mm	Hip Width	mm	Upper Leg Length
mm	Popliteal Height		

Pressure Risk Information (existing pressure wound, prone to pressure injuries ect)

Comments

Save As

Print

Email

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P. 1800 267 267 | **F.** 07 3899 8825
E. hello@activemedicalsupplies.com.au

www.activemedicalsupplies.com.au