

Patient information

Resident's surname		Other names	
Resident's details (may be available from aged care home)			
Date of birth	Pension number	Medicare number	DVA number
New or existing resident			
Aged care home		Phone	
Next of kin/guardian			
Name		Phone	
Advance care directive (or similar?)		Enduring Medical Power of Attorney	
Yes	No	Yes	No
Has the resident had a previous CMA?			
Yes	No		
If yes: Date of last CMA	Consent for a CMA obtained?	Consent given by	Date consent was given
	Yes No	Resident Representative	

CMA service details

Provided by (doctor)		Phone	
Is this the resident's usual doctor?		Date/s of service	
Yes	No		
If doctor providing CMA is not the resident's usual doctor, has a report of the CMA been provided to the resident's usual doctor?		Yes No	

Diagnoses/problems

Principal diagnoses	Other significant health problems
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Immediate action

Cardiovascular system	Oral health	Respiratory system	Nutrition status
Pain	Dietary needs	Physical function	Falls
Skin integrity			
Other			

Allergies and medication intolerance

Current medication

(including prescribed and nonprescribed medication) (medication chart/Webster sheet can be attached)

Issues for consideration in medication management review

Other services required

EPC care plan		EPC case conference		Medication management review		Other
Yes	No	Yes	No	Yes	No	
Comments				GP's signature		
				Date		

Resident's relevant medical history

(May refer to current information from aged care home; information from resident's records can be attached)

Immunisation status

Influenza current Yes No Tetanus current Yes No Pneumococcus current Yes No

Comprehensive medical examination

Cardiovascular system

Normal Abnormal

Identified problems

Respiratory system

Normal Abnormal

Identified problems

Pain

Acute No Chronic No

If yes, cause of pain

Physical function including activities of daily living, eg. walking, eating, dressing, personal care (bathing, toilet).

Identified problems

Test/screening tool used (eg. MMSE)

Falls risk assessment Yes No

Identified problems

Psychological function cognition

Mood	Normal	Depressed	Impaired
Other			
Identified problems			

Oral health identified problems

Teeth	Dentures	Gums
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Nutrition status identified problems

Weight	Height	BMI
Dietary needs		
Identified problems		

Skin integrity identified problems

Normal	Abnormal (sores/lesions)	Other
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Continence: urinary (if indicated)

Faecal
Identified problems

Normal	Abnormal
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Normal	Abnormal
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Urine test

Normal	Abnormal
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Identified problems

Other medical examination as relevant to resident

Fitness to drive	Hearing
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Vision	Smoking
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Foot care	Sleep
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Cardiovascular risk factors	Alcohol use
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Other	Identified problems
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Source: Medicare Australia www.medicareaustralia.gov.au