



Gold Coast Private Hospital

Suite 4, Ground Floor 14 Hill St
Southport, QLD 4215

P 07 5655 2156

F 07 5574 5783

E info@gceos.com.au

PATIENT REFERRAL

www.gceos.com.au

TO: DR TANI BROWN / DR SHARON MORRIS

(please circle if preference)

PATIENT INFORMATION:

TITLE: MR MS MRS MISS DR OCCUPATION: _____

FIRST NAME: _____ SURNAME: _____

DATE OF BIRTH: ____/____/____ HOME PHONE #: _____ MOBILE #: _____

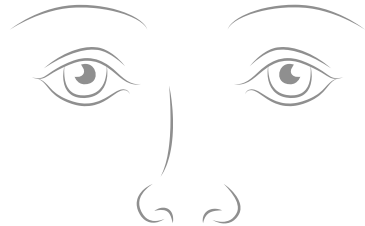
ADDRESS: _____

_____ SUBURB: _____ POSTCODE: _____

REASON FOR REFERRAL:

- Cataract Flashes and Floaters Watery Eyes / Nasolacrimal Other, please specify _____
- Glaucoma Sudden Visual Loss Eyelid Problem / Cancer _____
- Refractive Problem Uveitis Blepharitis / Itchy Eyes _____

(Please draw lesion site)



REFRACTION (if known):

VA unaided

BCVA

Near Vision

Right _____ / _____ X _____

Left _____ / _____ X _____

REFERRING DOCTOR / OPTOMETRIST :

NAME: _____ PROVIDER #: _____

ADDRESS : _____

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LOCATION MAP:



PLEASE REMEMBER:

- Bring this referral to allow you to claim your Medicare rebate.
- Please bring your current medication list, current spectacles and contact details of your optometrist, GP and other Specialists that you are still actively seeing.
- Please bring sunglasses for your eye comfort post your appointment
- Do not drive as your eyes may be dilated or you may require an in-rooms procedure.
- Payment on day is required. Gold Coast Eye and Oculoplastic Surgeons accept cash, EFTpos & major credit cards.
- Please allow 2-3 hours for your appointment.
- **IMPORTANT** - Bring any current blood or histology results or recent scans (CT/MRI) with you, if you have them available