AusFive PSYCHOLOGY

# Psychology Referral

Telehealth, Australia-wide, appointments within days

## PATIENT

Name

Date of birth

Phone

Email

## REASON FOR REFERRAL

## SERVICES REQUESTED

- [ ] Individual therapy (Medicare, MHTP)
- [ ] Couples / family therapy
- [ ] WorkCover / TAC
- [ ] Mental Health Treatment Plan attached
- [ ] ADHD assessment
- [ ] NDIS (self- or plan-managed)
- [ ] Other

## REFERRING PRACTITIONER

Doctor

Provider No.

Practice

Signature

Date

**Send this referral**

**Fax 03 9072 1973** · referrals@ausfivepsychology.com.au

Every referral is confirmed with your practice within one business day.

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**PATIENT: BOOK ONLINE**