

# PATIENT PROFILE

FILE #

## CONTACT INFORMATION

FIRST NAME	LAST NAME	LAST NAME AT BIRTH	SEX	LANGUAGE
			H F E F	
ADDRESS		CITY	PROVINCE	POSTAL CODE
HOME PHONE NUMBER	WORK PHONE NUMBER	CELLULAR	OTHER	
HEALTH INSURANCE NUMBER	DATE OF BIRTH (YYYY/MM/DD)	E-MAIL FOR COMMUNICATION WITH YOUR PHYSIOTHERAPIST		

(FOR COMMUNICATION AND REPORTS WITH MD)

## OCCUPATION

OFFICE	TRANSPORTATION
CONSTRUCTION	FACTORY
TEACHER	SALES
STUDENT	UNEMPLOYED
LABOURER	PROFESSIONAL SERVICES
RETIREE	

## INFORMATIONS

REFERRING DOCTOR (IF APPLICABLE)			
AFFECTED BODY PART (ex. : neck, forearm, knee...)	DIAGNOSIS OF THE PHYSIOTHERAPIST		
	<input type="text"/>		
CATEGORY			
PRIVATE	CSST	SAAQ	WSIB
RCMP	DND	VETERANS	

## HOW DID YOU LEARN ABOUT OUR CLINIC ?

PHYSICIAN	EVENT	
DENTIST	CONFERENCE	
SECRETARY (MEDICAL CLINIC)	GOLF TOURNAMENT	
PHYSIOTHERAPIST	COMPETITION	
NAME	VEHICULE	
FORMER PATIENT	BUS	
FAMILY / FRIENDS	YELLOW PAGES	
WORD OF MOUTH	PUBLICATION	
SPORTS CLUB OR CENTER / TEAM	NEWSPAPER	BROCHURES
NAME	WEB SITE	
EMPLOYER	FACEBOOK	
NAME	TELEVISION	
SIGNAGE	RADIO	
EXTERIOR	ARENA	

DATE OF INCIDENT (YYYY/MM/DD)	
NAME OF AGENT (IF APPLICABLE)	PHONE NUMBER OF AGENT
FILE # CSST, SAAQ WSIB	CLAIM FORM COMPLETED
	YES NO

## SPECIFIC INTERESTS

SPORTS
ART AND CULTURE
GAMES AND LEISURE

## DID YOU KNOW ...

That the "Ordre Professionnel de la Physiothérapie du Québec" (OPPQ) recommends a billing of 30% of the consultation fees for each patient absence.

That your physiotherapist is paid per consultation and therefore is not compensated for missed appointments. That organizations such as CSST, WSIB, SAAQ do not pay for missed appointments; but, require that they be declared. Furthermore, it is their policy to terminate patient services in the event of repeated absences.

I accept that a fee of 25\$ will be charged to me if I fail to give 24 hours notice in advance of my appointment.

Signature \_\_\_\_\_

