



Australian Government

Department of Health

Medicare Health Assessment for Older Persons (75+)

Use of a specific form to record the results of the health assessment is not mandatory but the health assessment should cover the matters listed below.

Patient Details

Patient's Name
.....

Male Female DOB/...../..... or Age

Nationality

Current contact details

Address

Carer's name/s.....

Phone

Alternative contact details

Address

Phone

Consent – Patient and/or Carer

Explanation of health assessment given? Yes

Nurse Yes No

Consent for health assessment given? Yes

Other health professional Yes No

Consent given by? Patient Carer

If yes, please specify

Date consent was given/...../.....

.....

PATIENT'S OVERALL HEALTH STATUS

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.....
.....
.....
.....

HEALTH ISSUES IDENTIFIED AND DISCUSSED WITH PATIENT

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.....

TESTS UNDERTAKEN, RESULTS AND WHAT THEY MEAN (SOME RESULTS MAY NOT BE AVAILABLE)

Note: The assessment should not require diagnostic or pathology services unless the health assessment detects issues that necessitate clinically relevant diagnostic imaging or pathology services.

HEALTH ASSESSMENT

Check blood pressure

IDENTIFIED HEALTH ISSUES	ACTION

Check pulse rate and rhythm

IDENTIFIED HEALTH ISSUES	ACTION

Review medication

IDENTIFIED HEALTH ISSUES	ACTION

Assess continence

IDENTIFIED HEALTH ISSUES	ACTION

Assess psychological function including mood and cognition

IDENTIFIED HEALTH ISSUES	ACTION

Check immunisation status (Refer to the current Australian Standard Vaccination Schedule (NHMRC) for appropriate vaccination schedules).

Influenza

Tetanus

Pneumococcus

IDENTIFIED HEALTH ISSUES	ACTION

Assess patient's physical function

Activities of daily living

Falls in the last 3 months

IDENTIFIED HEALTH ISSUES	ACTION

Assess patient's social function

Availability/adequacy of paid and unpaid help

Whether the patient is responsible for caring for another person

IDENTIFIED HEALTH ISSUES	ACTION

OPTIONAL COMPONENTS as relevant to the patient

Multi system review

IDENTIFIED HEALTH ISSUES	ACTION

Assess alcohol consumption

IDENTIFIED HEALTH ISSUES	ACTION

Assess level of exercise

IDENTIFIED HEALTH ISSUES	ACTION

Assess fitness to drive

IDENTIFIED HEALTH ISSUES	ACTION

Assess foot care

IDENTIFIED HEALTH ISSUES	ACTION

Assess hearing

IDENTIFIED HEALTH ISSUES	ACTION

Assess vision

IDENTIFIED HEALTH ISSUES	ACTION

Assess weight, height, body mass index

IDENTIFIED HEALTH ISSUES	ACTION

Assess sleeping patterns

IDENTIFIED HEALTH ISSUES	ACTION

Assess need for community services

IDENTIFIED HEALTH ISSUES	ACTION

Assess home safety

IDENTIFIED HEALTH ISSUES	ACTION

Assess mobility

IDENTIFIED HEALTH ISSUES	ACTION

Assess diet and nutritional status

IDENTIFIED HEALTH ISSUES	ACTION

Assess cardiovascular risk factors

IDENTIFIED HEALTH ISSUES	ACTION

Assess postural hypotension

IDENTIFIED HEALTH ISSUES	ACTION

Assess oral health

IDENTIFIED HEALTH ISSUES	ACTION

Assess smoking status

IDENTIFIED HEALTH ISSUES	ACTION