



HEALTH PROVIDER REGISTRY (HPRy)
Consent Form
Allied Health Professional Contact Details



Personal Details

Title: ___ First Name: _____ Middle Initial* _____ Surname _____

Gender: Female Male Mobile: _____

Personal E-Mail: _____

Type _____ Subtypes : _____
(see reverse side of this page for a list of types)

Name of Professional Association: _____

Location Details private providers only

Primary Location

Location Name: _____

#Street Address: _____

Suburb: _____ State: _____ Postcode: _____

#Postal Address: (If different above) _____

Suburb: _____ State: _____ Postcode: _____

Phone: _____ Fax: _____ Provider No:* _____
(mandatory – if applicable)

Location E-Mail (organisation email): _____

Preferred mode of contact: Fax Location E-Mail Post

(if you have more than one location please photocopy)

Location Access Details (to receive a logon to the HPRy for the above location)

Please complete once per location only;

Username (organisation's email address) : _____

Password (minimum 8 characters) : _____

I _____ (full name) wish to apply for a free subscription to the HPRy on behalf of the above stated organisation and agree to the conditions of use as stated on the reverse of this page.

Signature : _____

Date : _____

note : a confirmation fax will be sent to confirm your log on details.

I give the Health Provider Registry (HPRy) permission to use the above details for the purposes stated in the HPRy Information Brochure.

Signature

Date

Please fax back to: 1800 00 11 40 (FREE FAX)

Please retain these pages for future reference. Enquiries Phone (08) 8271 8988

* used for identification and referral purposes only

| TYPES | SUB-TYPES |
|------------------------|---|
| Audiologist | |
| Chiropractor | |
| Diabetes Educator | |
| Dietitian | Aged care dietitian, Allergy and food sensitivity, Bone and joint conditions, Cancer, Cardiac care and hyperlipidaemias, Coeliac disease, Diabetes dietitian, Eating disorders, Genetic and metabolic disorders, Indigenous health, Infant feeding, Paediatrics dietitian, Polycystic ovarian syndrome, Renal disease, Vegetarian eating, Weight management, Women's health |
| Exercise Physiologist | Comcare, Department of Veterans Affairs, Group sessions, Medicare EPC items, Physical activity in the ageing, Private health insurance, Type 2 diabetes, WorkCover SA |
| Occupational Therapist | Acute, Aged care OT, Community Health, Disability - other than physical, Disability - physical, Driving, Hand and upper limb OT, Medico-legal, Mental health, Neurology OT, Occupational health, Paediatrics OT, Palliative care, Rehabilitation |
| Osteopath | |
| Physiotherapist | Acupuncture and dry needling, Amputees, Aquatic, Burns, Cardiorespiratory, Clinical Pilates, Continence and women's health, Feldenkrais, Gerontology, Hand Therapy, Lymphoedema, Men's health, Musculoskeletal, Neurology, Occupational Health, Orthopaedics, Paediatrics, Pain management, Pre and Post Natal, Sports, Temporo-Mandibular Joint, Vertigo Vestibular Rehabilitation |
| Podiatrist | Children, Diabetes podiatrist, Home visits, Nail surgery, Nursing homes, Sports injuries |
| Psychologist | Clinical psychologist, Educational and developmental, Organisational psychologist, Counselling psychologist, Sport psychologist, Child psychologist, Clinical neuropsychologist, Forensic psychologist, Health psychologist |
| Social Worker | Adult stroke, Child & family, Couple/relationship counselling, DVA, Disability other than physical, Grief and trauma counselling, Medicare EPC items, Mental health, optimising mental health, Parent/infant relationships, Post natal depression, Psychotherapy, Sexual concerns, Workplace conflict |
| Speech Pathologist | Adult: acquired head injury, augmentative communication, fluency, progressive neurologic disease, specific learning difficulty, stroke, swallowing, voice Child: augmentative communication, feeding, fluency, language, specific learning difficulty, speech and articulation, voice |

Practice Access - Conditions of use:

- Information on the Health Provider Registry (HPRy) can only be used for direct patient care. It cannot be used for general mail outs or notifications. This is deemed as the purpose.**
- The subscriber is permitted to share the supplied username and password between staff within the above stated location (concurrent access allowed).
- The subscriber must ensure that all online access and paper copies are maintained securely within the organisation and that the subscriber shall implement processes whereby passwords and user names are kept confidential and whereby their use is restricted to the purpose.
- The HPRy contains a seed record to track inappropriate use as per purpose i.e. a fictitious doctor and location has been entered on the HPRy.
- The subscriber must advise GPSA immediately if there is reason to suspect that the HPRy is being used contrary to the purpose.
- The data and intellectual property of the HPRy and all printed versions at all times remain the property of GPSA.
- GPSA reserves the right to withdraw a subscriber's access.
- The subscriber must not sub-licence, assign, share, sell, rent, lease or otherwise transfer its right to use or access the HPRy without the prior consent of GPSA.
- The HPRy can only be accessed through the HPRy website www.healthproviders.com.au
- The organisation agrees to advise the Health Provider Registry of any data quality issues by contacting hpry@gpsa.org.au.
- GPSA does not warrant, guarantee or make any representation regarding the use, or the results of the use, of the HPRy in terms of correctness, accuracy, reliability, functionality or otherwise.
- GPSA or its employees will not be responsible for any loss, damage, cost or expense suffered or incurred by the subscriber as a result of or arising from the subscriber's failure to access the HPRy or the quality of data contained within.
- GPSA will add an organisation's email address (as stated in the above username field) to a mailing list in order to keep subscribers informed of updates to the service.
- A full privacy policy can be viewed at www.gpsa.org.au/hpry