Blood Glucose Test Strip Six Month Approval

The National Diabetes Services Scheme (NDSS) is an initiative of the Australian Government administered with the assistance of Diabetes Australia.

This form allows access to additional subsidised blood glucose test strips after the initial six month period provided by the Scheme.

Your details
1. Given name(s)
2. Family name
3. Date of birth
   - Day
   - Month
   - Year
   If person named in Q1 & Q2 is under 15 years old, the “Guardian or carer” section must also be completed.
4. Medicare card (preferred) or DVA file number
5. NDSS card number (Optional)
6. By signing here, you are confirming that the information you have provided on this form is true and complete, and that you agree to the collection, use and disclosure of your information for the purposes set out in this form.

Guardian or carer
If the person named in Q1 & Q2 is under 15 years old, or is an adult receiving ongoing care, this section must be completed by a primary guardian or carer.

7. Given name(s)
8. Family name
9. By signing here, you are confirming that:
   - you are a primary guardian or carer for the person named in Q1 and Q2; and
   - the information you and the person named in Q1 & Q2 have provided is true and complete; and
   - both you and the person named in Q1 & Q2 agree to the collection, use and disclosure of your information for the purposes set out in this form.

Certifier
Only to be completed by a registered medical practitioner, nurse practitioner, or credentialled diabetes educator (CDE).

10. Main reason for extension (Choose one only):
   - Inter-current illness
   - Medication affecting blood glucose
   - Clinical need for self-monitoring
   - Diabetes management change
   - Diabetes management not stable

11. Which are you? (Choose one only):
   - CDE
   - Endocrinologist
   - GP
   - Nurse practitioner

Other registered medical practitioner Describe:

12. Your full contact details OK to use stamp
   - Your name
   - Medicare provider number/CDE number
   - Address line 1
   - Address line 2
   - Suburb
   - State
   - Postcode
   - Phone number
   - Fax number

13. By signing here, you are confirming the person named in Q1 and Q2 needs additional access to subsidised blood glucose test strips, for the reason given in Q10.

Lodge this form in person at your local NDSS access point

Need help with this form?
Call 1300 136 588 or visit ndss.com.au
TTY: 133 677  Speak and Listen: 1300 555 727
Translation: 131 450  Internet Relay: iprelay.com.au

Your information is protected by Commonwealth laws including the Privacy Act 1988. Diabetes Australia and our Agents are committed to protecting your privacy. For our privacy policy visit ndss.com.au or call 1300 136 588.