



TMS Referral Form

MEDICAL OBJECTS PREFERRED REFERRAL METHOD

Alternatively please send to E tms@nsqld.com.au F (07) 3839 3588

Patient Information Patient Insurance Information

Name Medicare #

DOB Is the patient being referred under **DVA scheme**?

Phone YES NO

Email

Reason for Referral

Treatment resistant depression

Other* (specify)

*Other indications will be opened up soon. Patients can still be referred for MDD that do not meet criteria for TRD but will not qualify for any rebates.

Relevant history (incl any history of seizure, neurological infection, head/brain trauma, alcohol/substance use, suicide)

Please attach full medical history and current medications list to this referral.

Treatment Resistant Depression Eligibility for Medicare Rebate (due for release in Nov 2021)

over 18yrs

formally diagnosed with major depressive episode

failed to receive satisfactory improvement despite trialling at least two different classes of antidepressant medications

undertaken psychological therapy

have not received TMS treatment previously

TMS requires daily appointments, Monday to Friday, for 20 sessions.

Patients can still be referred for MDD that do not meet criteria for TRD but will not qualify for any rebates.

Referring Doctor Information

Name Signature

Provider # Date

Phone

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Queensland Neurostimulation Centre part of Neurosciences Queensland

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