

Date:

Member Number:

Member Name:

Address:

Dear Patient

### REGISTRATION FORM FOR CHRONIC DISEASE LIST (CDL) MANAGEMENT

This form is for members who need help and support in managing their CDL chronic conditions through healthy lifestyle changes and improved compliance.

**You may register telephonically by contacting your Disease Management Wellness Nurse directly on 0860 00 00 46 or you may complete the registration form below.**

Once you are registered, our Wellness Nurse will ask a few questions about your health your chronic condition and medical history to enable us to assess your needs and discuss your care plan.

<b>Member Number</b>		<b>Date of Birth (dd/mm/yyyy)</b>	
<b>Patient's First Name</b>		<b>Benefit Option</b>	
<b>Patient's Surname</b>		<b>Preferred Name</b>	
<b>Please provide us with your contact details in the spaces below so that we can keep in touch.</b>			
Home phone			
Work phone			
Department or extension number			
Cell phone			
Fax number			
E-mail			
Postal address			
Residential address			
<b>Other information</b>			
When is the best time to call?			
Preferred telephone number for Confidentiality.			
Would you like to receive information via SMS			
Confirm the cell number			

Registered Chronic Disease List Condition (CDL)	YES ( v )	NO (x)
Addison's disease		
Asthma		
Bronchiectasis		
Cardiac failure		
Cardiomyopathy		
Chronic obstructive pulmonary disorder		
Chronic renal disease		
Diabetes insipidus		
Diabetes mellitus types 1 & 2		
Dysrhythmias		
Epilepsy		
Glaucoma		
Haemophilia		
Hyperlipidaemia		
Hypertension		
Hypothyroidism		
Multiple sclerosis		
Parkinson's disease		
Rheumatoid arthritis		
Schizophrenia		
Systemic lupus erythematosus		
Ulcerative colitis		
Bipolar Mood Disorder		

<b>Treating Doctor's Name and Phone Number</b>		
<b>May we contact your doctor directly for information?</b>	YES	NO
<b>Please sign here:</b>		

Please forward the completed forms and additional requirements to our **CONFIDENTIAL** contact details as below.

E-Mail	<a href="mailto:chronic@HosmedAuth.co.za">chronic@HosmedAuth.co.za</a>
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**You can also contact one of our Wellness Nurses telephonically on 0860 00 00 48.**

Yours sincerely

**Hosmed Medical Scheme  
CDL Disease Management Team**