

# Medical Report

## To the physician

The patient is an exchange student with AFS Intercultural Programs, Australia. AFS is ultimately responsible for his or her welfare in Australia. AFS is the link, through our office overseas, with his or her parents and will pay costs not covered by Overseas Student Health Cover (see exceptions below).

To enable AFS to carry out its responsibilities and to fulfill audit requirements for documentation of any bill paid, please complete the relevant sections below. If immediate communication and or authorisation is needed, telephone AFS 1800 023 982, including after hours.

## Medical costs which AFS will not pay

Medical costs which must be paid by the student and natural family are: any related to pre-existing conditions, routine dental or eye examinations or care, eye glasses, contact lenses, preventive medication or immunization, cosmetic or elective surgery.

Name of patient: \_\_\_\_\_

Symptoms or injuries: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Laboratory studies or x-rays or results: (attach a copy of any relevant report.)

Medical treatment: \_\_\_\_\_

Your name: \_\_\_\_\_ Signature: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

This form must accompany any request to AFS for payment or reimbursement of medical expenses. Send it, with documentation to this address.



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