



Australian Government
Department of Immigration and Citizenship

MEDICAL CERTIFICATE

For visitor visa applicants aged 70+ applying in London or who have applied online and are resident in the UK or Republic of Ireland.

Australian law requires that visitors to Australia meet a certain standard of health to be granted a visa. A medical certificate is required for all applicants aged 70 and over applying for a visitor visa for Australia.

Your doctor must complete the following report to the best of his/her knowledge, and based on your current state of health. Please note that any expense incurred in obtaining this report is your own responsibility

APPLICANT'S DETAILS

Family Name: _____

Given Name: _____

Date of birth: _____

Passport Number: _____

Duration of intended stay: _____

Firmly attach a recent photo of the applicant.

Doctor to certify in writing across the top of the photo (not across the image) **and running onto the page**, that it is a true likeness of the applicant.

MEDICAL HISTORY (Please tick appropriate box)

• Does the applicant currently have any significant medical conditions, or a history of significant medical conditions, including tuberculosis; dementia; severe cardiac or respiratory disease; or any condition that may require dialysis treatment, cancer treatment, or treatment involving the use of blood products?

Yes

No

If "yes", please provide details

PERSONAL CARE

• With whom does the applicant normally live? _____

• Does the applicant require assistance in day-to-day living?

Yes

No

If "yes", please describe:

people our business

Contact Centre, Migration Branch, Australian High Commission, London

Telephone: 09065 508 900 (cost of this service is £1 per minute from BT lines and charges may vary for other providers and mobile phone users)

E-mail: London.cc@dfat.gov.au

MOBILITY

• Is mobility limited by shortness of breath, joint pain, or musculoskeletal problems?

Yes No

MENTAL STATE AND COMMUNICATION

• Is the applicant confused or disoriented (including about proposed journey to, and length of stay in, Australia)?

Yes No

PHYSICAL EXAMINATION

• General appearance: _____

• BP: _____ • Heart rate: _____ • Respiratory rate: _____

• Respiratory rate within normal limits for age?

Yes No

• Cardiovascular system: _____

• If an ECG is indicated, are the results within normal limits for age?

Yes No

OPINION (Please circle)		
1. Do you consider the applicant fit to travel unaccompanied and without assistance to Australia, given it will involve several hours of exposure to a low oxygen environment on the flight, as well as the stress of the journey itself?	Yes	No
2. Do you consider the applicant functionally independent in personal care and mobility?	Yes	No
3. Do you consider the applicant is likely to remain as well as they are now for the duration of requested stay?	Yes	No
4. Do you consider that the applicant will stay fit enough to undertake the long, unaccompanied and unassisted journey home?	Yes	No
5. If you answered no to any of the above questions, please provide an explanation: _____ _____		

DOCTORS DETAILS

Signature: _____ Doctor's Name: _____ Date: _____

Medical qualifications: _____

Surgery address and contact number: _____