

GP registration form

1. Background information					
Date: Day Month Year - 2009		The patient's civil registration number:			
Service offered: Tick only one box Service 0101 No service 0101 the registration is finished if no service 0101		The patient is: Tick box if relevant ☐ Listed with another practice and is excluded - the registration is finished			
2. Problems presented					
Problem(s) presented in the current consultation: □ No symptoms					
☐ Symptoms which: Tick relevant boxes					
Cannot be attributed to a verifiable somatic disease or psychiatric disorder Please continue the registration Can be attributed somatic disease Diagnosis:		psychiatric disorder (excl. P75) □			
Diagnosis: Diagnosis:					
Type of consultation: Tick only one box □ New episode □ Recurrent episode □ Preplanned control					
Course of symptoms: Tick only one box ☐ Single episode (=<6 months) ☐ Recurrent (=<6 months) ☐ Long-lasting (>6 months)				nonths)	
4. Symptoms					
Symptoms presented in the current con that cannot be attributed to a verifiable	Symptoms witin the place been attributable to		ave not	Ī.	
Specification:	Or ICPC code	Specification:		Or ICPC co	de
1.		1.			
2.		2.			
3.		3.			
4.		4.			
5.		5.			
5. Classification					
Please tick the box below that best describes the patient's problem: Tick only one box ☐ A symptom diagnosis of 'multiple symptoms' ☐ at least 3 symptoms within the past 6 months ☐ the symptoms have not been attributable to a verifiable somatic disease or psychiatric disorder ☐ A symptom diagnosis of 'fear of a disease' (any A-Y chapter in the ICPC) ☐ the patient's problem is primarily fear of a disease and not the specific symptom ☐ Other symptom diagnoses (any A-Y chapter in the ICPC)					
 - single symptoms expected to resolve spontaneously - symptoms in need of further assessment □ A somatoform disorder (P75) - multiple, recurrent and changing somatic symptoms despite negative test results and doctor's reassurance - symptom duration >6 months 					