

# STEP 1

- IF YOU HAVE NEVER REGISTERED ON THIS SITE BEFORE THEN CLICK THE ONLINE FORM BUTTON - SEE RED ARROW

User name:

Password:

[Login](#) [Forgot Password?](#)

Patients with no username/password who have a code please click below:

[Online form](#) 

# STEP 2

- ENTER THE EXACT CODE YOUR DOCTOR HAS PROVIDED - INCLUDING CAPITAL LETTERS ( BLUE ARROW) .
- THEN PRESS GO

## Questionnaire for anaesthetic services by your doctor

Please enter the access code given by your anaesthetic doctor below to access the questionnaire:



Code:

**i** **IMPORTANT:**

**Access code needs to be exactly as given to you. Including capital letters.**

# STEP 3

- CHOOSE A DATE FOR YOUR SURGERY - IT SHOULD THEN AUTOMATICALLY GO TO THE REGISTRATION PAGE .
- TRY USING THE CALENDAR IF YOU HAVE ANY TROUBLE

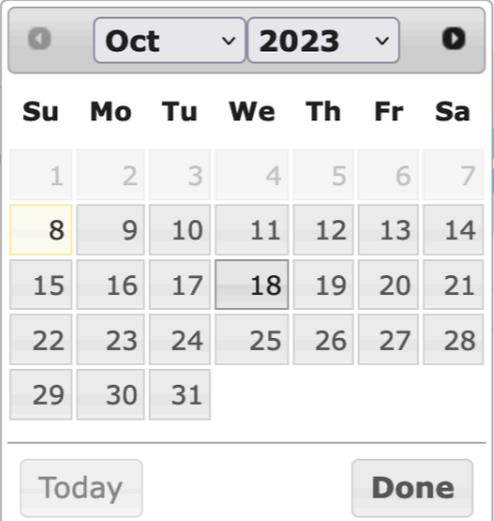
### Anaesthetic Questionnaire

To assist **Dr Pedram Mohammadi** in providing anaesthetic at your up coming surgery and calculating any out of pocket costs for this service please complete this form.

**\*Required**

provide surgery date

dd/mm/yyyy  (If no date has been chosen yet, please tick the box. )



Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

# STEP 4

- SELECT USERNAME / PASSWORD. WRITE THIS DOWN FOR FUTURE ACCESS. THEN PRESS REGISTER

## New Registration

**\*Required**

**Username\***

**Password\***

[Register](#)

***i* REMINDER:**

If you have registered before, press login [Login](#)

If you need to go back to "Providing surgery date page", press go back [Go Back](#)

# STEP 5

- COMPLETE THE MEDICAL QUESTIONNAIRE.
- AT ANY POINT IF THERE SEEMS TO BE AN ERROR WITHOUT A MESSAGE TO TELL YOU WHY , TRY THE REFRESH BUTTON ON YOUR WEB BROWSER
- OTHERWISE CONTACT THE PROVIDER WHO SENT YOU THE SMS/EMAIL