

Metro North Waitlist Audit

This quick reference guide explains what to expect if you receive a digital waitlist audit SMS from Metro North Health.

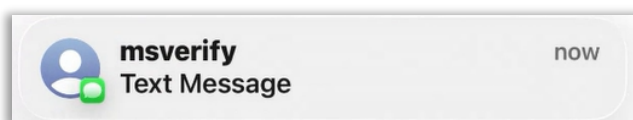
If you are on an outpatient waiting list at a Metro North Health facility you may receive an SMS asking you to complete a digital waitlist audit. The process is quick and easy.

It helps us ensure your details are up to date and confirms whether you still need your appointment.

Step 1) Click on the first link within the SMS sent from 'QLD Health' to complete the short online form.

Step 2) You will be asked to verify your identity. You can choose to get a code by SMS or verify by phone call.

- *If you choose SMS, the verification code will be sent from **msverify**.*



Step 3) Enter the verification code or follow the prompts provided during the phone call.

Step 4) Once verified, you will see an information and privacy page where you can choose to continue with the online form or request a paper form to be sent via mail. It will also ask you to have your Medicare Card, Next of Kin details, and NDIS number (if you have one) ready.

- *If you choose a paper form, you will be asked to confirm your address before exiting the survey.*
- *If you choose to continue, the next screen will display the speciality and hospital you are waiting to see.*

A screenshot of the Metro North Health Waitlist Audit verification screen. It features the Queensland Government and Metro North Health logos. The text asks the user to verify their number by sending a code via SMS or a call. It provides a phone number (XXX-XXX-9445) and two buttons: 'Send code by SMS' and 'Call me to verify number'.

If you can, please have your Medicare Card, Next of Kin and GP contact details, and NDIS number (if you have one) ready.

Your information is handled in line with the Information Privacy Act 2009, and won't be disclosed to third parties without your consent, unless required by law. For more information including how to access your information or making a complaint about a breach of the privacy principles, please refer to our [website](#).

Do you agree to completing this online check?

No, mail me a form

Yes, continue

Metro North Health's vision

Creating healthier futures together—where innovation and research meets compassionate care and community voices shape our services.

Metro North
Health



Queensland
Government

Step 5) You can choose to stay on the waitlist or be removed.

- If you choose to be removed from the list, we will ask you to provide a reason. Some clinics may also require clinical review prior to removal.
- If you choose to remain on the waitlist, we will ask you about your preferences including if you are happy to travel to another hospital, if you can come at short notice, if you prefer video appointments (telehealth) and if there are any dates that you are unavailable to attend.

Step 6) Review and update your personal information including your contact details, Medicare details, Next of Kin details, General Practitioner (GP) details, NDIS details (if applicable) and communication preferences.

- For privacy, your personal information will appear partially masked and will only need to be updated if they are incorrect.

Metro North Outpatient Clinic Waitlist Survey

You are on the waitlist for Paediatric Medicine outpatient clinic at RDH.

Waitlist Details - RBWH

Do you still wish to be on this waitlist?

☐ No, remove me

☒ Yes, stay on waitlist

This may mean you will be removed from the waiting list. Are you sure?

☐ No

☒ Yes

Why do you not wish to stay on this waitlist?

-- Please Select --



Please select a reason.

Step 7) Review your answers and update anything that is incorrect. When everything is correct, click *Submit*. A message will ask if you are sure. Click *Confirm Submit* to send your response.

Please update your details.

Some details are masked for privacy. Please verify the information shown and only make changes if any details are incorrect or out of date.

Permanent Address

Number/Street: 9**** R*** R***, U***
5****
Suburb/State/Postcode: HERSTON, 4006

Edit

Temporary Address

☐ Add Temporary address

Postal Address

Number/Street: 3**** N***** R***,
3**** N***** R***
Suburb/State/Postcode: GEEBUNG, 4020

Edit

Preferred Telephone Number

*****411

Edit

Wesleyan Methodist Church

Are you a NDIS (National Disability Insurance Scheme) participant?

No

Next of Kin

Name:

Phone:

Address:

Edit

General Practitioner

GP:

Practice:

Phone:

Address:

Edit

Do you consent to getting appointment details sent by SMS or email? Note: Most messages are sent by SMS or letter. Video call links may be sent by both SMS and email.

Email and SMS

Back

Submit

Confirm submission

Are you sure all the data you have filled in is correct? If you are unsure, please click cancel and review your responses. If you are sure, please click "confirm submit".

Cancel

Confirm submit