

Dr. Kristjan Mytting MD, CCFP – New Patient Application Form

Dr. Kristjan Mytting at the Mcleod Medical Clinic is currently taking new patients on a first come, first served basis. As an operating Family Medicine practice current patients take priority and new patients are taken on when and if feasible. As such there may be some wait before patient applications are reviewed and potentially accepted. We ask that you please bear with us and have patience during that process.

Patient Information

First Name: _____ Last Name: _____

Date of Birth(DD/MM/YYYY): _____

Gender(leave blank if you prefer not to answer): _____

Home Address:

Street: _____

City: _____ Province: _____

Postal Code: _____

Email Address: _____

Phone Number(s):

Home: _____ Work: _____

Cell: _____

Marital Status: _____ Occupation: _____

Health Care Number (PHN): _____

Date of Application(DD/MM/YYYY): _____

Preferred Method of Communication: _____

Once your application has been reviewed, if you are accepted we will contact you at your above preferred method with further information.

Thank you.

Sincerely,

Dr. Kristjan Mytting, MD, CCFP