

Referral for Private Midwifery Care

GP (who provides obstetric services)

A referral is required in order for women to be able to access Medicare rebates for antenatal and postnatal appointments with a Medicare participating midwife.

Client: _____

Reason for referral:

- Antenatal care
- Postnatal care (up to 6 weeks postpartum)

Date:
Dr. Name:
Medicare Provider Number:
Signature:
Practice Address:
Contact Number:

Kylie Cole - Midwife Reg.: NMW0001056975
ABN: 52554215861 Provider No: 5205891A
PH: 0458 294 257

Lynne Pyke - Midwife Reg.: NMW0001012040
ABN: 92662498261 Provider No: 5019611X
PH: 0409 952 533

Pia Croft - Midwife Reg.: NMW0001103634
ABN: 25198684503 Provider No: 4678851T
PH: 0413 633 649

Judy Van Dreven - Midwife Reg.: NMW0001081673
ABN: 42250246397 Provider No: 4950751X
PH: 0401 052 506

Melissa McFarlane - Midwife Reg.: NMW0002010816
ABN: 84887544548
PH: 0423 155 460

Leisa Gittings - Midwife Reg.: NMW0001036050
ABN: 71361959082 Provider No. A: 5300301B
PH: 0425 787 046 Provider No. B: 5300302L