

IMMIGRATION MEDICAL SERVICE

We offer the following services:

Service	Price
General Medical Certificate (With or without chest x-ray)	
Children 10 years of age and under (Exam only – NO blood tests / chest xray required)	\$270
Children 11-14 years of age (Exam / chest xray - NO blood test required)	\$270
All other ages over 15 years (Exam / chest xray / blood tests required)	\$595
Limited Medical Certificate (No chest x-ray or blood tests required if under 12 years)	\$270
Chest X-Ray Referral (Chest X-Ray only)	\$100
Additional Information – Extra requirement(s) requested by Immigration	\$100 - \$150
Additional Dr visits	\$100

(*All prices listed above are inclusive of GST)

If you require a chest x-ray, there will be a separate charge of **\$205** which is to be paid at Radiology at time of service.

Lab test costs are only included if you are applying for a General Medical, all other applications will incur an additional charge which is to be paid directly to Lab Tests.

Any additional lab testing, radiography, specialist consultations etc will also incur an additional fee which is to be paid directly to service provider at time of service being carried out.

IMPORTANT INFORMATION:

Please be aware, the form below must be completed in full and signed prior to us making the relevant appointment bookings. As an applicant, you will need to be aware of what type of medical you are needing and which type of visa you are applying for in order to complete these forms. If you are unsure, you will need to contact Immigration New Zealand directly or refer to their website for further information www.immigration.govt.nz
Ph: 0508 558 855 or (09) 914 4100 (Auckland)

Please ensure you bring a copy of your current passport with you, or a verified copy if you do not have one. Please note: It may delay processing as we will have to advise Immigration NZ, we could not fully confirm your identity during application process. If your passport has expired, we will be unable to initiate and or process your application.

If you have difficulty speaking or understanding English, please ensure you bring someone with you who can translate. We may be able to organise an interpreter for you, but this can delay the process as availabilities and times can be limited and may incur a fee.

Your medical examination and investigations are only valid for 3 months. This means that you need to have all the relevant information your application requires available to you within 3 months of having your medical examination, in particular police reports from your home country as these can take some time. If your completed application is not lodged with the Immigration Service within 3 months of the medical examination, it will need to be repeated at full cost.

PAYMENT & BANK DETAILS:

Payment must be made in full when booking appointment(s) – this can be done online via direct credit or at reception via cash/efpos or credit (Please note, we do not accept American Express or payments over the phone).

Bank: ASB Pukekohe

Name of Account: Pukekohe Family Health Care Limited

Account Number: 12-3403-0005141-00

(Please use Immigration as code and surname as reference)

APPOINTMENT PROCESS:**1. Administration Initial (30 minute) appointment**

This will be to start administration process and create a case through e-Medical. This appointment is required regardless of application/service.

2. Nurse appointment (30 minutes) General & Limited applications only

A nurse will take relevant observations required - this depends on age of applicant and type of medical you are applying for.

Once you have been assessed by a nurse, you will go directly to Lab Tests and or Radiology (if testing is required) which are both located in the same building on the ground floor.

3. Doctor appointment (15-30 minutes) General & Limited applications only

One of our Immigration panel doctors will go through recent test results and questions in relation to your medical history and perform a physical examination. This will need to be booked at least 48 hours after blood tests/x-ray to ensure results have come through.

- Once this appointment has been completed, we can finish the e-Medical process and submit your case directly to Immigration New Zealand. In some circumstances, if you have any significant abnormal test results, medical history, or current conditions, you may require a referral to specialist or repeat testing prior to submission – as this is additional information there will be an additional charge of \$80 - \$110.

Once details have been finalised and your application has been submitted, a copy of your e-Medical Health Case will be sent to you via email for your reference. Please complete the form below and email back to immigration@pukekohehealth.co.nz or bring into our reception staff who will assist.

BOOKING FORM

*Full Name:	First	Middle	Last
*DOB:		*Gender (as stated on passport):	
*Country of Birth:			
*Address:			
*NZ Contact Number:		*Email:	
*Passport Number:		*Passport Issuing Country:	
*Passport date of issue:		*Passport expiry date:	

PAYMENT

☐	Online Banking – on confirmation of payment your appointments will then be booked
☐	In person – on payment your appointments will then be booked

EXAM REQUIRED

☐	General Medical with Chest X-Ray
☐	General Medical without Chest X-Ray
☐	Limited Medical with Chest X-Ray
☐	Limited Medical without Chest X-Ray
☐	Chest X-Ray only
☐	Additional Information/Testing required (Please provide NZER or HR Reference):

*Please choose from one of the following options

☐ Temporary	OR	☐ Residence	OR	☐ Work to Residence
☐ Visitor ☐ Student ☐ Worker with Job offer ☐ Worker without Job offer		☐ Skilled Business ☐ Pacific Categories ☐ Family ☐ Humanitarian UNHCR ☐ Humanitarian Other ☐ Christchurch Response (2019) ☐ 2021 Resident Visa ☐ Straight to Residence ☐ Business/Investor		☐ Worker ☐ Family of Worker
If Temporary – how long do you intend to stay in New Zealand? ☐ Less than 6 Months ☐ 6-12 Months ☐ 12-24 Months ☐ More than 24 Months				

What is your intended occupation in New Zealand? (Only valid if applying for work type visa)

I acknowledge that I have supplied Pukekohe Family Health Care with the correct information and application details in order to create an e-Medical Immigration case and that, should the information I supply be incorrect and incur additional costs or delays, this is my own responsibility, not Pukekohe Family Health Care's.

Date:	
Name:	
Signature:	

If emailing this completed form to immigration@pukekohehealth.co.nz include a copy of your passport and a screenshot of your online payment.

Thank you for choosing Pukekohe Family Health Care for your Immigration Medical Application, we will be in contact with you to make your appointment asap.