Sonic Dx
Simple and Intuitive online results

Hospital/Ward
Application for Sonic Dx

Sullivan Nicolaides PATHOLOGY
Quality is in our DNA

PLEASE COMPLETE ALL FIELDS FOR THE APPLICATION TO BE PROCESSED.

Hospital and Ward details:

Name: _____   Ward: _____

Address: _____

Ward phone: _____   Mobile number: _____   IP Address: ____ • ____ • ____ • ____

Unsure of the IP address? Please go to www.whatismyip.com

Email address (required): _____

Infection Control: ☐ Yes   ☐ No

Staff Details:

Please list the staff who will be the contacts for the account. A single, generic account will be issued for use by multiple staff in the clinic/ward.

Primary contact (please print name)	Mother's maiden name	Date of birth
_____	_____	_____
Signature		
_____		
Additional contact (please print name)	Mother's maiden name	Date of birth
_____	_____	_____
Signature		
_____		
Additional contact (please print name)	Mother's maiden name	Date of birth
_____	_____	_____
Signature		
_____		

Declaration:

We accept full responsibility for maintaining the confidentiality of the information supplied to us by Sullivan Nicolaides Pathology and acknowledge that this information will be used only for ongoing patient care. We acknowledge that this account may be audited regularly for evidence that it is not being used by staff in the clinic to access either their own results or those persons known to them. Should this occur, the account will be immediately deactivated. All incidents of breaches of privacy will be notified to the commissioner.

Nurse Unit Manager Authorisation

Name _____

Signature _____

Date _____

When any authorised contacts or nurse unit manager leave this clinic, a new application is required.
Please keep a copy of this agreement.

Please complete the form and return to:
Doctor IT Services
Sullivan Nicolaides Pathology
A: PO Box 2014, Fortitude Valley Qld 4006
E: sonicdx@snp.com.au
F: +61 7 3318 7404

Upon acceptance of the application, a unique username and password will be issued to access the service. An email containing the username will be sent to the nominated email address from sonicdx@snp.com.au and an SMS will be sent with the password to the nominated mobile number.

For security reasons we are unable to send the password via email.