03 Choose and write the questions in Exercise 2 that are similar to the ones below.

1. What is your birthdate? ----► .....
2. Could you spell it, please? ----► .....
3. May I have your name? ----► .....

04 1.T02 a. Listen to the dialogue, and circle the correct word.

1. The patient lives in **Australia / Austria**.
2. She was born in **1980 / 1983**.
3. Her mobile is **55-326-096 / 55- 346-096**.

05 1.T02 b. Listen to the dialogue again and fill in the form.

PATIENT INFORMATION

Name: _____ Date: 12.09.2022

Address: _____

_____ City: _____ Country: _____

Birthdate: _____

Gender: M F (please circle)

Weight: _____

Height: _____

Home phone: _____ Work phone: _____

Mobile: _____

E-mail: _____

Are you Single ☐ Married ☐ Divorced ☐ Seperated ☐ Widowed ☐

Person to contact in case of emergency: _____

Relationship to patient: _____

Home phone: _____ Mobile: _____

Education: ☐Grade School ☐Jr. High School ☐High School
☐College (2-4 years) ☐Degree

Health insurance ☐Yes _____ ☐No

Signature: _____