

Hunts Ave Family Practice

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Dr Bruce Kinghorn MB BS (Syd) FRACGP
Dr Elvira Morey MB BS (Syd)
Dr Julian Pierre BM BS (Adelaide) FRACGP DCH
Dr Cheng Lim MB BS FRACGP DCH
Dr Lesley McKay MB CHB DRCOG MRCGP
Dr Ray Silins MB BS (Syd) FRACGP

Date _____

To _____

Dear Doctor,

Request for Transfer of a COPY of the Medical Record please

Re _____ D.O.B. _____

_____ D.O.B. _____

_____ D.O.B. _____

The above patient(s) is/are now attending this practice. Please forward all medical records and any relevant information which may help with the ongoing care of the patient.

As this is a fully computerised practice, we would appreciate if you could forward files on a CD. If you are using Best Practice or MD2/MD3, please forward in XML format, or otherwise use HTML.

Please do not send any original paperwork as we operate as a paperless practice.

The patient's signature below authorises a copy of the records to be transferred.

Kind regards,

Patients Signature Authorising transfer

Print name & date.
