

**SECTION ONE – APPLICANT DETAILS** 

☐ Child or Sibling (>18 years of age)

☐ Spouse

☐ Guardian

## **Request Form to access to Patient Records**

ALL CALVARY SERVICES Function: Medical Records

Exercising enduring power of attorney

Intimate personal relationship with subject

Nominated by subject to be contacted in an emergency.

1. N	Name of Applicant:	
2. V	What is your relationship to the subject of th	e requested information?
□ Pa	arent $\Box$	Relative (> 18 years & member of subject's household)

3.	Reason for application to access documents

4.	Applicant's contact details:			
a)	Contact numbers:	(home)	(work)	

I acknowledge that there may be an administrative charge involved in processing my request and providing access to the requested information. I will be provided with an estimate of the administrative charge with is to be paid prior to access to the requested information

Date:	
	Signature of Applicant

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Approved by: Janell Fielding-Melders	Last review: 9th February 2016	Pages: 2
Custodian: Carole Portolesi	Next review: February 2017	Version: 2



ordinary mail.

## **Request Form to access to Patient Records**

ALL CALVARY SERVICES Function: Medical Records

## **SECTION TWO – DETAILS OF REQUEST** 1. Patient name and record number [if known]: 2. Please outline the specific nature of information requested: 3. Do you wish to receive a copy of the information or do you wish to review the information in the hospital? 4. If a copy of the requested information is requested, please nominate a recipient: a) Name of recipient: b) Relationship with recipient: c) Address:\_\_\_\_\_ \_\_\_\_\_\_ State \_\_\_\_\_\_ Postcode \_\_\_\_\_\_ 5. Please specify the preferred method of receiving a copy of the requested information: Mail □ Collection (by the applicant) ☐ Collection (by recipient nominated in Q4 above) Please note that if the copy of the requested information is to be collected in person, we will require photographic identification to validate the identity if the recipient. Please note that it is our usual practice to send the copy of the requested information by

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