



Torquay Doctors
 418 The Esplanade Torquay Q 4655
 P: 4125 2422 F: 4125 5846
 Email: reception@torquaydoctors.com.au

Craignish Doctors
 Shop 3. 1 Karraschs Rd, Craignish Q 4655
 P: 4305 9500 F: 4125 5846
 Email: reception@torquaydoctors.com.au

REQUEST TO TRANSFER MEDICAL RECORDS

Request to:.....	
Address:.....	
Phone:.....	Email/Fax:.....

The following patient is now attending this medical centre. We would be grateful if you could forward the following:-

- Complete medical records
- Health Summary
- Other.....

Patients Full Name	Date of Birth

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Dr Chris Woollard | <input type="checkbox"/> Dr Nick Yim | <input type="checkbox"/> Dr Flor Rodriguez | <input type="checkbox"/> Dr Mitch Davis |
| <input type="checkbox"/> Dr Sida Hou | <input type="checkbox"/> Dr Kay Myo | <input type="checkbox"/> Dr Roshanie Ratnayake | <input type="checkbox"/> Dr Winnie Lee |
| <input type="checkbox"/> Dr Tobias Wade | <input type="checkbox"/> Dr Chrissy Halliday | | |

I, hereby request and authorise you to release details of my medical records as requested.

Signed:..... Date:/...../.....

Our practice uses Best Practice and would appreciate receiving records in XML format or Medical Objects.

These records may be sent to reception@torquaydoctors.com.au or copied to a CD or USB and sent by mail

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