EAST CALDER & RATHO MEDICAL PRACTICE

ACCESS TO MEDICAL RECORDS REQUEST

In line with Data Protection legislation, you are entitled to obtain copies of information held about you. In order of us to comply with your request please supply the following information: -

Full name
Date of birth
Address
Details of exactly what information is required
Signed Print Name
If you require copies in relation to legal, benefit or employment purposes you may not be aware there are longstanding processes in place to allow the appropriate agencies to obtain this information (with the appropriate consent) which avoids a direct request by the patient.
On receipt of the request and verification of ID, we have up to 30 days to provide the information.
PRACTICE USE ONLY
Date received
ID checked
Verified by
Passed to office
Dr I McLeod, Dr K Wild, Dr S Tybulewicz, Dr G Mackie, Dr A Dunlop, Dr P McMurtrie, Dr E Strachan, Dr G Fordham, Dr E Griffin, Dr A Barr, Dr C MacRae Practice Manager Hazel Dowling
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