

VALENTINE MEDICAL CENTRE

2 Smethurst Street Blackley, Manchester M9 8PP

Phone: 0844 8151573 Fax: 0161 202 4202

Data Protection act Request for Copies of my Medical Records

Section 1 - Your details			
Title	Forenames	Surname	
Address			
Post code			
Date of Birth			
Telephone Number			
Section 2 - Information you require. Please complete 1, 2 or 3			
1	Please provide me with copies of my medical records for the following period		
	From (date)	To (date)	
2	Please provide me with copies of information about the following accident/event		
3	Please provide me with copies of my entire medical records from my date of birth to (date).		
Signature of requester			
Date			
There is a charge of £10.00 for access to medical records.			
If photocopies are required there is a charge of 35p per copy up to a maximum of £50.00			
Please enclose payment with request. Date received at Valentine Medical Centre			
Date received at valentine includa centre			