



64 Murray Street (PO Box 94) KINGSCOTE SA 5223  
Phone: 08 8553 2037 Fax: 08 8553 2437  
email: admin@kimedical.com.au Argus: argusreports@kimedical.com.au

## Request for Personal Health Information

### 1. Patient details

Full name: \_\_\_\_\_  
Address: \_\_\_\_\_  
DOB: \_\_\_\_\_

### 2. Applicant (if not the patient) – please include written patient authority

Full Name: \_\_\_\_\_  
Relationship to patient: \_\_\_\_\_

### 3. Health Information Required (please tick):

- Pathology Results specify date/s : \_\_\_\_\_
- X-Ray Results specify dates/s: \_\_\_\_\_
- Other Test Results Please specify: \_\_\_\_\_
- A Summary of My Health Record
- Full Health Record – detailed
- Current medications
- Correspondence on file Please specify: \_\_\_\_\_
- Other – please give specific details including type of information required and relevant dates : \_\_\_\_\_

### 4. How would you like to receive this information:

- Collect a copy from reception
- Receive by mail to my address above
- Receive by fax – fax number: \_\_\_\_\_

**Note:** Privacy requirements allow the doctor in certain circumstances to restrict the release of medical records.

Charging policy - Fees may be charged for access. Please request information about our charging policy. Your doctor may request that you attend for an appointment to access your records.

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

<i>Office Use Only- staff to initial each entry</i>	
<input type="checkbox"/> Date request received _____ <input type="checkbox"/> Identification verified licence/passport/other; _____ <input type="checkbox"/> Doctor authorised release <input type="checkbox"/> Noted in patient record <input type="checkbox"/> Record checked & ready for patient <input type="checkbox"/> Fax: View/View & Dr/Copy & collect/Copy & send _____ <input type="checkbox"/> Fee Charged (at Dr request only)? Y/N Amount \$ _____ (excl GST) Fee received \$ _____ <input type="checkbox"/> Access process complete (collected/faxed/sent) Date _____	Doctor authority to release information (please initial):