



Kilsyth
Doctors

471 Mt Dandenong Road, Kilsyth, Victoria 3137
Phone: (03) 9725 5444 Fax: (03) 9723 5265

Dr. Inam Khan
Provider No. 239815YA

Dr. Blesson Abraham
Provider No. 4540117L

REQUEST FOR RECORDS

Dear Doctor: _____

Clinic: _____

Specifically: _____

The following patient is now attending our surgery and has requested that their medical records be forwarded to us at your earliest convenience.

We would appreciate if history is sent in XML (for Best Practice) or PDF format. We accept discs however please do not send HTML files.

Please email the files to us at reception@kilsythdoctors.com

Patient Name: _____

Date of Birth: ____ / ____ / ____

Address: _____

Thank you for your assistance.

Yours sincerely,



Patient Authorisation

I, _____ authorise the release of my medical records to Kilsyth Doctors at the above address.

Signed: _____

Date: ____ / ____ / ____