

CHARLESLAND MEDICAL CENTRE

Unit 3, The Charlesland Centre, Greystones, Co. Wicklow

Phone 01 201 6665

www.charleslandmedicalcentre.ie

Dr. Siobhan O'Dwyer MB BCh MICGP (IMC 014512)

Dr. Deirdre McCarthy MC BCh MICGP (IMC 406569)

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Dr Sarah McGowan MB BA BAO BCh MRCGP (IMC 23994)

HEALTHMAIL ADDRESS: siobhan.odwyer@healthmail.ie

Dear Doctor,

The below patient wishes to register with this practice. I would be grateful if you could kindly send us a copy of their medical records. They have given written consent below in accordance with the Data Protection Acts.

Many Thanks

To (Previous GP Name and Address):

Your Name:

D.O.B

Address:

Any other family members (under 18yrs) also requiring files to be transferred:

Name: _____

D.O.B _____

Name: _____

D.O.B _____

Name: _____

D.O.B _____

Name: _____

D.O.B _____

I _____ (Print Name) consent to the transfer of my medical records (and any other family members as named above), to Charlesland Medical Centre, Greystones, Co Wicklow.

Signed: _____

Date: _____

HEALTHMAIL ADDRESS: siobhan.odwyer@healthmail.ie