



THE BAY SURGERY

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Dr Gideon Malherbe MBChB, FRACGP, FACGP
Dr Hannes Schnetler MBChB, FACRRM
Dr Lorna Barnes MBBCH, FACRRM
Dr Gordana Kostic MBBS FRACGP
Dr Gareth Davies BSc, MBChB, FACRRM, Rural Generalist
Dr Janice Vieira MBBS, Bachelor of Optometry

Provider No: 2178036J
Provider No: 2989415T
Provider No: 400482AH
Provider No: 2257597W
Provider No: 218735CA
Provider No: 469904BY

REQUEST TO TRANSFER MEDICAL RECORDS

Request to:
Address:
Phone: Email/Fax:

The following patient is now attending The Bay Surgery. We would be grateful if you could forward the following:

- ☐ Complete medical records
☐ Health Summary
☐ Other.....

Patients Name	Date of Birth

- | | | |
|---|--|---|
| <input type="checkbox"/> Dr Gideon Malherbe | <input type="checkbox"/> Dr Hannes Schnetler | <input type="checkbox"/> Dr Lorna Barnes |
| <input type="checkbox"/> Dr Gareth Davies | <input type="checkbox"/> Dr Gordana Kostic | <input type="checkbox"/> Dr Janice Vieira |

I, hereby request and authorise you to release details of my medical records as requested.

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

Our practice uses Best Practice and would appreciate receiving records in XML format or Medical Objects.

These records may be sent to reception@thebaysurgery.com.au or copied to a CD or USB and sent by mail

This facsimile message (and any attached files) is intended for the addressee named and may contain confidential or privileged information. If you are not the intended recipient, please delete it and notify the sender. Views expressed in this message are those of the individual sender, and not necessarily the views of The Bay Surgery. This email has been scanned for viruses but we cannot guarantee that either the message or attachments are free of viruses or other defects. Virus scanning is recommended and is the responsibility of the recipient. Please consider the environment before printing this e-mail.