



Application for service medical report for patients released from HM forces whom have not previously consented to disclosure of their service medical history

Particular of Patient

Surname..... Forename (s)

Date of birth..... NHS number.....

Address.....
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Service from which released..... Service number.....

Rank at release..... Date of release.....

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Declaration by Doctor

I hereby apply for the Service Medical Report for the above named patient. It will be used by our surgery solely for the purpose of medical treatment.

Signature of Doctor.....

Address.....
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Declaration by patient

I hereby consent to the disclosure of my Service Medical History to my Doctor in civil life.

Signed..... Date.....