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Our Ref: «MATTER_FEE_EARNER_ID»/«client_no»/«matter_no»

25 March 2022

The Practice Manager

«FW_CN_DEF1_FW_CN_D1_GP_SUR_name»

«FW_CN_DEF1_FW_CN_D1_GP_SUR_address»

Dear Sirs

Client: «CLI1_ADD_INFO_FW_CLI1_MNAME» «LINKNAME_SURNAME_1»

<u>Address:</u> «CALCULATION_ADDRESS»

DOB: «CLI1_ADD_INFO_FW_CLI1_DOB»

NHS «FW_CN_CLI_INFO_FW_CN_NHS_NUM»

Number:

We have been instructed by the above-named, who is contemplating a claim for compensation for personal injuries suffered as a result of negligence in her medical treatment.

We enclose herewith our client's authorisation under the Clinical Negligence Protocol for disclosure of her medical records under the Access to Health Records Act 1990 and confirm that we are prepared to be responsible for your reasonable fees.

We would also please request any relevant guidelines, analyses, protocols or policies as well as any documents created in relation to any adverse incident, notifiable safety incident or complaint.

We look forward to receiving our client's records from yourselves as soon as is possible, and in any event within the 40 days provided for under the above Act.

Please note that no action is contemplated against you, your servants or agents at the present time.

Yours Faithfully

«CALCULATION FEE EARNER DESCRIPTION»

$\ \ {\bf ``PRACTICEINFO_PRACTICE_NAME"}$