

{INCLUDETEXT "C:\\Users\\NeilB\\OneDrive - PRACCTICE LTD\\Documents\\OspreyOfficeGateway\\header.doc"}

Our Ref: { MERGEFIELD MATTER_FEE_EARNER_ID }/{ MERGEFIELD client_no }/{ MERGEFIELD matter_no }

{ QUOTE { DATE \@ "d MMMM yyyy" } }

The Practice Manager

{ MERGEFIELD FW_CN_DEF1_FW_CN_D1_GP_SUR_name }
{ MERGEFIELD FW_CN_DEF1_FW_CN_D1_GP_SUR_address }

Dear Sirs

Our Client: { MERGEFIELD LINKNAME_TITLE_1 } { MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD CLI1_ADD_INFO_FW_CLI1_MNAME } { MERGEFIELD LINKNAME_SURNAME_1 }
Address: { MERGEFIELD CALCULATION_ADDRESS }
DOB: { MERGEFIELD CLI1_ADD_INFO_FW_CLI1_DOB }
NHS Number: { MERGEFIELD FW_CN_CLI_INFO_FW_CN_NHS_NUM }

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 { IF { MERGEFIELD CLI1_ADD_INFO_FW_CLI1_GENDER } = "Male" "his" "her" } medical treatment.

We enclose herewith our client's authorisation under the Clinical Negligence Protocol for disclosure of { IF { MERGEFIELD CLI1_ADD_INFO_FW_CLI1_GENDER } = "Male" "his" "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

{ MERGEFIELD CALCULATION_FEE_EARNER_DESCRIPTION }
{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME*UPPER }

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