



MDU

Please return this sheet with your documents

Name:
Membership number:
File number:
Notification date:

Please let us know if the clinical records have already been disclosed to the solicitors **Yes/No**

Please send: Tick if enclosed

1. The solicitor's letter *or* request for compensation *or* Court documents
2. All records **in your control** relating to the patient which may include: -
 - (i) A **complete** photocopy of the original records on single sided A4 sheets (Please take care to copy both sides of every sheet and the folder itself)
 - (ii) Printout of computerised records
 - (iii) Copies of relevant entries in appointment book *or* message book
 - (iv) X-rays or scans
 - (v) Any other relevant records

Documents must not be altered or amended in any way.

3. A detailed and factual report of your personal involvement in the patient's management on a separate sheet from your covering letter. In many cases, a number of practitioners are criticised some of whom may not be MDU members. In order to gain an overall view of the case, we may wish to disclose your report to other indemnifying bodies on a reciprocal basis. Unless you advise us to the contrary in your covering letter, we will assume you agree to this.
4. A covering letter including: -
 - (i) Confirmation that you would like our assistance
 - (ii) Your consent to act on your behalf in this matter
 - (iii) The date on which you received the solicitor's letter *or* request for compensation *or* Court documents.
 - (iv) A statement formally confirming that you have sent photocopies of all the records in your possession *and* your consent that the MDU may disclose these records to the Claimant's solicitors, if appropriate
 - (v) Full details of any other practitioners or other persons involved in the sequence of events
5. Any other information that you feel may be of relevance