



**FORM A - APPLICATION & CONSENT FOR RELEASE OF MEDICAL INFORMATION**

**INSTRUCTIONS**

- As a general rule, application can only be made by the patient. (Please refer to notes 1-5 for exceptions and details). This is in accordance to the Personal Data Protection Act (No.26 of 2012) in the absence of a Legally Appointed Representative.
- Scanned copies / photocopies of patient's and applicant's NRIC and all relevant documents (e.g. birth certificate, marriage certificate, grant of probate, lasting power of attorney) as proof of the applicant's relationship to patient are required. (Please refer to note 7 for details)
- For deceased patient, scanned copy / photocopy of the death certificate is required.
- The release of the medical information is subject to official approval by Singapore General Hospital
- Refer to the attached Notes on Application for the Release of Medical Information for full details.

**PATIENT'S PARTICULARS**

Name : \_\_\_\_\_ NRIC / HRN : \_\_\_\_\_  
Address : \_\_\_\_\_ Contact No : \_\_\_\_\_  
Date of Hospital Attendance : \_\_\_\_\_ Clinical Department: \_\_\_\_\_

**DECLARATION**

I, \_\_\_\_\_ of NRIC No: \_\_\_\_\_, am the above named Patient / Parent / Next of Kin / Administrator of Estate / Donee/ Deputy\* of the abovenamed Patient. I hereby authorise Singapore General Hospital to furnish and release the below stated report:

\*Please refer to Notes for details and definitions. If patient is deceased or lacks mental capacity, please complete Form C.

TO: Name of Company or Person : \_\_\_\_\_  
Address of Company or Person : \_\_\_\_\_

**TYPE OF REQUEST:**

Please tick	Format of Report	Fee (including GST)	Attendance Date	Clinical Department
	Ordinary Medical Report	\$100.00		
	Completion of Insurance Form	\$100.00		
	Ordinary Medical Report - Psychiatric	\$256.80		PSY
	Completion of Insurance Form - Psychiatric	\$256.80		
	MOM Work Injury Compensation Form	\$100.00		
	Specialist Medical Report (excludes SOC consultation charges)	\$200.00		
	Specialist Medical Report – Psychiatric	\$473.80		PSY
	Admin Fee for Duplication of Medical Certificate / Medical Report	\$13.91		
	Admin Fee for Duplication of Investigation Results / Referral Letter / Day Surgery Report / Inpatient Discharge Summary	\$10.70		
	Duplication Of Radiological Images In CD Format (General)	\$52.75		
	Duplication Of Radiological Images In CD Format (Specialised)	\$76.29		
	Others (pls specify)			

**FOR THE PURPOSE OF:**

- Third Party Claim
- Continuation of Care
- Insurance Claims / Proposal
- Legal Proceedings
- Others

Details:

Besides the medical report fee, I undertake to pay any additional charges such as consultation fees, radiological procedures and laboratory investigation charges that may be incurred in the preparation of the report.

**MODE OF DELIVERY**

- I will personally collect the report once it is ready. **I am aware that I will need to furnish my NRIC upon collection and that the medical report cannot be released if I am unable to do so.** My contact number is \_\_\_\_\_.
- Mail to the address indicated above.
- The reports will be collected by my representative. **I am aware that an authorisation letter with the representative's name and NRIC no and a copy of my NRIC has to be furnished upon collection and that the medical report cannot be released if I am unable to do so. (Please complete Form B)**

By signing on the consent below, I acknowledge that I have read and understood the Notes on Application for the Release of Medical Information.

Signature of Patient & Date

Signature of Applicant & Date

Relationship to Patient

**APPLICATION & CONSENT FOR RELEASE OF MEDICAL INFORMATION (Form A)**

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## APPLICATION & CONSENT FOR RELEASE OF MEDICAL INFORMATION (Form A)

- These notes are to be retained by the Applicant –

### NOTES ON APPLICATION FOR THE RELEASE OF MEDICAL INFORMATION

1. In accordance to the Personal Data Protection Act (No.26 of 2012), the application can only be made by the patient,
  - a. except if the patient is
    - i. A minor.
    - ii. Deceased.
    - iii. Mentally incapacitated.
  - b. Or if the report is for workman compensation.
    - i. Workman Compensation reports can be applied by the patient or his / her employer. The completed report will be given directly to the Ministry of Manpower.
2. If the patient is a minor, the application is to be made by both of the patient's parents or legal guardian. A copy of the patient's birth certificate is required. A minor is someone who is below 21 years old, who is not an active National Serviceman, and who is not married or a widower or widow.
3. If the patient is deceased,
  - a. The application is to be made by the Legally Appointed Representative of the Estate. This is either an executor of the deceased's "Will" who has been granted probate, or a person who has been appointed as an administrator of the deceased's estate by the Singapore Court.
  - b. If the deceased does not have a Legally Appointed Representative of the Estate, then the application is to be made by all the deceased's Next-of-Kin (who is living and has the mental capacity to do).
  - c. The nearest relative is the individual first listed below:
    - i. Spouse.
    - ii. Child.
    - iii. Parent.
    - iv. Sibling.
    - v. Other relation.
4. If the patient lacks mental capacity, and in accordance to the Mental Capacity Act (Cap 177A),
  - a. the application is to be made by the Legally Appointed Representative, who is a Donee of a Lasting Power of Attorney granted by the patient, or by a Deputy appointed for the patient by the court.
  - b. If the deceased does not have a Legally Appointed Representative of the Estate, then the application is to be made by all the deceased's Next-of-Kin (who is living and has the mental capacity to do).
  - c. The nearest relative is the individual first listed below:
    - i. Spouse.
    - ii. Child.
    - iii. Parent.
    - iv. Sibling.
    - v. Other relation.
5. An application that has a blank insurance form to be completed by a doctor can be submitted by the patient or a representative on behalf, provided that the "Application & Consent for Release of Medical Information" (i.e. "Form A") is signed by the patient.
6. Forms and supporting documents required are:
  - a. Copy of the completed "Application & Consent for Release of Medical Information" (i.e. "Form A").
  - b. Scanned copies / photocopies of the patient's NRIC (or appropriate identification documents), both front and back views.
  - c. Scanned copies / photocopies of the applicant's NRIC (or appropriate identification documents), both front and back views.
  - d. Scanned copies / photocopies of all relevant documents (e.g. Birth Certificate, Marriage Certificate, Grant of Probate, Letter of Administration, Lasting Power of Attorney, Order of the Court (Appointment of Deputy) as proof of the applicant's relationship to patient, if the applicant is not the patient.
  - e. For deceased patient, scanned copy / photocopy of the death certificate.

## APPLICATION & CONSENT FOR RELEASE OF MEDICAL INFORMATION (Form A)

In addition for deceased or patient who lacks mental capacity, and for whom the applicant is the Next-of-Kin:

- f. Copy of the "Letter of Undertaking" (i.e. "Form C"). The form is to be filled by all living spouse(s) / children / siblings of the deceased patient, (other than the Applicant), if the Applicant is not the only living spouse(s) / children / siblings. Scanned copies / photocopies of the relevant verification documents (e.g., marriage certificates, birth certificates) are to be provided by each declarant (i.e. spouses / children / siblings) as proof of relationship to the deceased patient.
- g. Scanned copies / photocopies of the relevant verification documents (e.g. marriage certificates, birth certificates) are to be provided by each declarant (i.e. spouses/ children/ siblings) as proof of relationship to the deceased patient.

### 7. Contact & Application Information

<p>Application in Person:</p> <p>Medical Reports Counter Block 3, Level 1 Singapore General Hospital</p> <p><u>Operating Hours:</u> Monday – Friday : 8.30 am – 5.30 pm Saturday : 8.30 am – 12.30 pm Closed on Sundays &amp; Public Holidays</p>
<p>Application by Mail:</p> <p>Send your completed consent form and cheque to: Health Information Management Services Singapore General Hospital Outram Road Singapore 169608</p>
<p>Application Online:</p> <p>Avoid the queue! Apply and pay online at <a href="http://www.sgh.com.sg/mro">www.sgh.com.sg/mro</a></p>
<p>Contact Details:</p> <p>Tel : 6326 6695 Fax : 6321 4785 Email : <a href="mailto:medicalreport@sgh.com.sg">medicalreport@sgh.com.sg</a></p>
<p>Mode of Payment:</p> <p>Cash, NETS, Credit Card (if application is made in person)</p> <ul style="list-style-type: none"><li>- Payment to be made at Medical Reports Counter</li></ul> <p>Cheque</p> <ul style="list-style-type: none"><li>- Cheque should be crossed and made payable to Singapore General Hospital</li><li>- Write the patient's full name and NRIC at the back of the cheque.</li></ul>

8. Singapore General Hospital can only process your application upon fulfilling the verifications and receipt of all necessary forms, supporting documents and payment.
9. As a general guide, the time required for processing medical reports is about six weeks, from the date of receiving the completed forms, or the date of medical appointment for assessment, whichever comes later.
10. CDs/films not collected within 3 months of request date will be destroyed and future similar requests will be chargeable.
11. Specialist consultation charges will be borne by the patient separately for medical reports that require an assessment and a review of the patient at the Specialist Outpatient Clinic. This is in addition to further tests such as radiological images or laboratory investigation procedures that are required for the completion of the medical report.
12. The release of the medical information is subjected to the official approval by Singapore General Hospital.
13. A refund of the payment will be made in the event that the medical information cannot be released.