

## Patient file request form

For access to medical information regarding a patient's health

*In accordance with article L1111-7 of the Public health code, "every individual has access to all information regarding his or her health that is held, for whatever reason, by healthcare professionals and facilities, that have been formally recorded or communicated in written between healthcare professionals, particularly test results, consultation, intervention, exploration or hospitalization reports, protocols and therapeutic prescriptions that were implemented, monitoring records and correspondence between healthcare professionals, with the exception of information noted as having been collected by a third party not involved in treatment or regarding such a third party."*

### **What are the main components of the file?**

- Document indicating the reason or reasons for hospitalization
- Hospitalization report
- Surgical report
- Documents related to anesthesia
- Prescriptions
- Nursing care documents
- Depending on the case, other important elements: copies of imaging scans, etc.

### **Who can request information from the file?**

The request can be made by:

- The patient, his or her legal representative (if a minor or incapacitated) or his or her next of kin (if deceased), with the expectation in this case that medical confidentiality will be maintained,
- The doctor chosen by the patient to act as an intermediary.

### **Special case: some minors**

Minors do not have an individual right to access their medical data. In principle, and in the majority of cases, his or her file may be seen by his or her parent(s). However, in exceptional cases where a minor has obtained medical care without the knowledge of his or her parents, he or she can refuse for information regarding the treatment or medical intervention that he or she received to be communicated to one (or both) individuals with parental authority.

### **Special case: a deceased individual's next of kin**

A deceased individual's next of kin has access, unless expressly prohibited by the patient prior to his or her death, to the information needed for the following:

- ⇒ to learn the causes of death,
- ⇒ to protect the memory of the deceased,
- ⇒ to exercise his or her rights.

Access to this information cannot be refused without reason, and a copy of the death certificate can always be requested.

## How soon the file will be delivered after the request is made



The information must be communicated within **eight days** following receipt of the **complete request**, after a processing period of 48 hours. If the information is more than five years old, this time period is extended to **two months**.

## How to view the file

The file can be viewed **at the facility**, and a copy of the documents can be taken with you.

You can also ask to be **sent copies** of the documents, which can only be done by registered mail with delivery confirmation.

While the file can be viewed at the facility for free, you will be charged for copies and mailing costs.

If the information contained in the file may affect you, the doctor can recommend that you bring a third party with you to view the file at the facility. In this case, you must understand that the third party will then be aware of strictly confidential information about your health. Thus, it is advisable that this third party be informed that he or she is legally required to respect the confidentiality of your medical information. In healthcare facilities, medical support is offered free of charge. However, you can decline this support: and this refusal will not prevent you from viewing the documents.

## How do you make a request?



You must contact:

The doctor who oversaw your care at the facility or the facility's legal representative. The Patient file request form must be sent by registered mail with delivery confirmation (accompanied by supporting evidence) to the following address:

### For the Ambroise Paré and Pierre Cherest SMC:

Mrs. Dominique Boulangé

President, A. Paré, P. Cherest, Hartmann SMC

25-27 bd Victor Hugo

92200 NEUILLY-SUR-SEINE

### For the Hartmann Clinic:

Mr. Eric Journeaux

Director, Hartmann Clinic

26 bd Victor Hugo

92200 NEUILLY-SUR-SEINE

## Supporting evidence:

Patient	→	Copy of identification card or passport
Intermediary doctor	→	Copy of professional identification card and patient's authorization
Next of kin	→	Copy of identification card or passport <b>and</b> notarized document verifying status as next of kin

### *Legal representatives for minors:*

Parents	→	Copy of identification card or passport and family record or birth certificate, and, if needed, the judgment rendered
Third party	→	Copy of identification card or passport and judgment rendered
Legal representatives of adults under guardianship	→	Copy of identification card or passport and judgment rendered

I, the undersigned, Mr./Mrs./Miss: \_\_\_\_\_  
Please write your last and first name

Born on: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Tel.: \_\_\_\_\_

If applicable: father, mother, legal representative or next of kin of  
Mr./Mrs./Miss: \_\_\_\_\_

Please write the last name, first name, and maiden name if applicable

**Request copies of the following documents:**

- Hospitalization report
- Surgical report
- Histological report
- All information contained in the patient file
- Other documents, please specify: \_\_\_\_\_

**To be:**

- Viewed at the clinic
- Sent by registered mail with delivery confirmation  
to Mr./Mrs./Miss: \_\_\_\_\_

- Sent by registered mail with delivery confirmation  
to Dr. \_\_\_\_\_

Reason for request (for the file of a deceased patient):  
\_\_\_\_\_  
\_\_\_\_\_

Date:

Signature:

*Helpful information for locating the file:*

Facility :  Ambroise Paré  Pierre Cherest  Hartmann

Date of hospitalization – Service: \_\_\_\_\_

**Fee\*:**

Cost of sending the file by registered mail with delivery confirmation	Post Office fee
Photocopying	€0.18/page

**Document to be sent by registered mail with delivery confirmation to:**

*For the Ambroise Paré and Pierre Cherest SMC:*  
Mrs. Dominique Boulangé  
25-27 Bd Victor Hugo  
92200 Neuilly sur Seine

*For the Hartmann Clinic:*  
Mr. Eric Journeaux  
26 Bd Victor Hugo  
92200 Neuilly sur Seine

\*You will receive an invoice before the requested documents are sent.