

Requesting a copy of a medical record

How to request a copy of a medical record?

- Please read the following information carefully. You will find the request form enclosed in this document.
- Follow steps 1 to 5 in the request form enclosed in this document. Complete and sign the application.
- Enclose (if necessary) a copy of your proof of identity, or of the person authorised to sign, with the request. If desired, you may cover the unnecessary information such as the citizen service number, the passport photo and the signature. This copy will be destroyed by us after we have checked it.
- Also include any additional documents that are needed to comply with your request. This is explained in the request form.

Are there any costs associated with requesting a copy of a medical file?

Digital file

You can view a large part of your medical data via MijnMMC. If you would like to view additional information, you can request it. Because your medical data is confidential and a file can contain many pages, it is advisable to request your file in PDF. The file is then always available in MijnMMC; your own, secure patient portal. This is free of charge.

Paper file

Requesting a paper file is free the first time. If you would like another copy, the following costs will be charged:

- A second request for a file: € 5.00 per file. If the file contains more than 100 pages: € 20.00 per file.

If you want your medical data sent to you, you will be charged for the postage. Because your file is confidential, medical data is only sent by registered mail.

Radiology

If you would like to request radiology images without charge, you can make a request by phone.

If we cannot or may not comply with your request There are situations conceivable in which your request cannot or may not be met. For example, if the patient in question has died. If you have any questions about this, please contact the Quality & Safety Department by telephone on (040) 888 9188. MMC aims to have the copy available within one month of the request. You will be notified by email when the copy of your file is ready.

What happens after my request is submitted? You indicate on the form which files you are requesting. The concerned department or Quality and Safety secretariat is responsible for handling your request. Your file will be consulted to determine which care providers must assess your request. In your request form, you indicate how you want to receive your file. Depending on your wishes, the file will be made available in MijnMMC, sent by registered mail or be ready at one of the locations.

Request form for a copy of a medical file

STEP 1A: Patient details for whom the data is requested

Name and initials ☐ Male ☐ Female

Maiden name

Date of birth

Address

Postcode / city

Telephone

E-mail address

Reason request

STEP 1B: The applicant is a person other than the patient
If not applicable, continue with STEP 2.

This is only allowed for children under the age of 16, if there is mentorship or guardianship or authorization.

If your request concerns a child older than 12 and younger than 16, he or she must sign the request with you. If your child is 16 years or older, the child's signature is sufficient. Always enclose a copy of the proof of identity.

If you are the legal representative of an incapacitated patient, please enclose a copy of proof of that representation.

Name of applicant.....

Address:

Postcode / city:

Telephone:

E-mail address:

Relationship to patient?

- ☐ Registered partner or spouse of patient
- ☐ Parent(s) and/or guardian(s)
- ☐ Legal representative
- ☐ Son/daughter
- ☐ Other::

If the patient is dead, what is the reason for your request?

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STEP 2. Verzoekt om:

- ☐ Copy of the medical file
- ☐ Copy of the nursing file
- ☐ Imaging material (radiology images)

Specialism	Name specialist	Period
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.....		
.....		
.....		
.....		

STEP 3: Sending or collecting a copy of your file
Indicate how you want to receive your data.

- ☐ I would like to view the medical file in MijnMMC
 - This is only possible for your own medical file;;
 - A PDF of the medical file will be made available in MijnMMC
- ☐ I will collect the copy of the file with or without radiology images
 - ☐ Veldhoven location ☐ Eindhoven location
 - You will receive an e-mail when your file with or without radiology images is ready
 - You must show proof of identify when collecting the copy of your file
- ☐ I want to have the copy of my file with or without radiology images sent by registered mail (€ 10,00 postage).
 - A file is always sent by registered mail. This is because it concerns confidential data.
 - Please enclose a copy of your valid proof of identity with this request.
 - Fill in the following details if you want to have the data sent to you:

Debit authorization

IBAN bank
account number:

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Name IBAN bank account number:

STEP 4: Signature (please print and sign, then send to the address below)

Signature patient/applicant

Date

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The undersigned gives permission, in the case of a second request, to debit the determined amount from his/her bank/giro account via this one-time authorisation.

STEP 5: Send your application to Máxima MC

To be able to process your request as quickly as possible, your request must end up in the right place. Please note the correct address on your envelope containing your completed request and any additional documents, such as a copy of your ID.

- If you are requesting one copy of a medical file, you should address your request to the outpatient clinic from which you are requesting the file.

Máxima MC
Outpatient clinic / nursing ward.....
Antwoordnummer 10080
5500 VB Veldhoven

- If you request images and reports of radiological (X-ray) examinations, please contact:

Máxima MC
Radiologie
☎ 040-8889000

- If you request multiple copies of medical records, and/or a medical record combined with the reports of radiological (X-ray) examinations, please address your complete request to the attention of:

Máxima MC
Secretariat Quality & Safety
Antwoordnummer 10080
5500 VB Veldhoven

To be completed below by the department to which the request is made (for the attention of the FCI department)

Number	Cost
.....	€ 5,00: second request for a copy of one nursing or medical file with a maximum of 20 euros per request
.....	€ 10,00: postage by registered mail

Please transfer the amount to cost centre::, department.....

The total amount due is:

Signature Position.....

