

Protecting and improving the nation's health

ODR Amendment Request Form

Please return completed forms to:				
Address:	PHE Office for Data Rele FAO Rachael Brannan Public Health England Wellington House 133-135 Waterloo London SE1 8UG	blic Health England ellington House 3-135 Waterloo ndon		
Tel:	020 7654 8030	Email:	ODR@phe.gov.uk	
ODR Reference:				
CPRD Reference (where applicable)				
Title:				
Amendment date:				
Applicant: All fields should be completed with the contact details of the individual who has overall responsibility for the project (for example the principal investigator or audit lead).				
Title:				
First name:		Surname:		
Job Title:				
Email address:				
Contact telephone number:)			
Please indicate the	e nature of the change:			
□ Data flows □ Data processor □ Data processor				
□ Data items□ Data sources		□ Duration amendment□ Other (please specify):		
□ Processing purpo	ose(s)	_ care. (product opcomy).		

This form should be submitted, in conjunction with any relevant supporting documentation, to	Please <u>summarise</u> the change to the application, specifying how the amendment differs from the detail of the approved data requestand justify why the change is necessary (please ensure all supporting documents are submitted in conjuction with this form):				
This form should be submitted, in conjunction with any relevant supporting documentation, to					
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Γhis form should be submitted, in conjunction with any relevant supporting documentation, to DR@phe.gov.uk.	Any additional information:				
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