**A U T H O R I Z A T I O N**

**TO: \* HOSPITAL**

**[Address]**

**RE: \* [name]**

**DOB: \***

# **Health Card#\***

**Clinical notes and records from \*to present**

**I HEREBY AUTHORIZE AND DIRECT YOU** to deliver to:

**LAW FIRM**

Attention: \*,

Solicitors for the Defendant, \*

fully legible copies of all hospital records and documents in your possession relating to my treatment from \* to present, including admission and discharge summaries, any and all x-ray reports, consultation reports, handwritten doctors' notes, nurses' notes, consultation notes, operative notes and any other handwritten notes and comments, physiotherapy reports and records, laboratory, radiology, prognosis and diagnostic and other reports and test results, in-patient and out-patient records and reports, letters, medication charts and any and all written documentation in your possession pertaining to me.

**AND THIS SHALL BE** your good and sufficient authority for so doing.

**DATED** at Toronto, this day of , 202\*



**WITNESS \* [NAME]**