Dr. Yasmin Papadopoulos, MD, CCFP
20 Wynford Drive, Suite 302
Don Mills, Ontario M3C 1J4
Tel: 416-445-9673
After hours info line: 416-486-1956

MEDICAL RECORDS REQUEST DATE:_____ (FAXED)

Attention:_____

Location:_____

Phone: _____ Fax:_____

Patient:_____ Health Card #:_____

Release Request Signed: _____

Send To:

Email: Dr.y.papadopoulos@gmail.com

Fax: **416-445-9388**

Please either fax, email or send a digital copy (compatible with OSCAR EMR)

Title	Requested
CPP or Chart Summary	
Lab Work	
Radiology	
Consult / Specialist / Hospital Report	
Last FOBT or Colonoscopy (if done)	
Last PAP or Mammogram (if done)	
All immunization and current prescription list	