

## APPLICATION FOR RELEASE OF COAL MINE WORKER'S **HEALTH RECORDS**

Health Surveillance Unit

Completion of this form is required to access a coal mine worker's medical records from the Health Surveillance Unit (HSU). Medical records are released in accordance with the confidentiality provisions of the Coal Mining Safety and Health Regulation 2017. Further information may be found on the <u>Queensland Government website</u>. Requests for a coal mine worker's medical records must include full name and date of birth. Records held under a different name require submission of documentation linking the current name to the former name. Requests failing to meet the criteria will not be processed. Eligible requests may take between 5 – 10 business days to process, depending on the

| DETAILS OF REQUEST                                                                       | business days to process, depending on th     |
|------------------------------------------------------------------------------------------|-----------------------------------------------|
| Coal mine worker identification details                                                  |                                               |
| Full Name:                                                                               |                                               |
|                                                                                          | Date of Birth:                                |
| If applicable, name specified on record/s: (e.g. records specifying a different name the | 230 that see a late                           |
|                                                                                          | an that stated above e.g. maiden name, alias) |
| Email address:                                                                           | Contact number:                               |
| Applicant (c.)                                                                           | contact humber:                               |
| Applicant (tick relevant box)                                                            |                                               |
| Coal mine worker (includes former workers)                                               |                                               |
| Appointed Medical Advisor (ANA)                                                          |                                               |
| Appointed Medical Adviser (AMA)  Doctor: CO 14.0                                         | fficer (EMO)                                  |
| Doctor: Sonya khativala.  Medical centre: 6/15-1/21                                      |                                               |
| Medical centre: Whits unday Doctors  Email address: Mad Doctors                          | Service                                       |
| Email address: MEDICALS DIVINITSUNDAY CONTACT #: 074967 6700                             | ators.an.au                                   |
| Signature: (1/Ah)                                                                        |                                               |
|                                                                                          |                                               |
| Appropriate Doctor for mineral mine or quarry worker assessment (re                      | OCUÉTOS MARIA                                 |
| July Milling Co.                                                                         |                                               |
| Medical centre: 6/6/49/0000                                                              | 2                                             |
| Email address: <u>medicals</u> Contact #: 01 49627700                                    | LOCKER OF                                     |
|                                                                                          | runcius. can. as                              |
| Signature: XWAXWA                                                                        |                                               |
| Other party                                                                              |                                               |
| Name:                                                                                    |                                               |
|                                                                                          |                                               |
| Organisation (e.g. WorkCover, legal firm):  Email address: Signature:                    |                                               |
| Signature:                                                                               |                                               |
| MITTING YOUR REQUEST:                                                                    |                                               |
| ointed medical advisers (AMAs)/Appropries p                                              | FOR ASSISTANCE:                               |
| I mine worker/Legal authority: <u>HSU@rshq.qld.gov.au</u>                                | General enquiries: HSU@rshq.qld.gov.au        |
| <u> </u>                                                                                 | Telephone: 07 3818 5420                       |

Application for Release of coal mine worker's health records V3 December 2021

## MEDICAL RECORDS REQUEST Coal mine worker consent is mandatory prior to the release of records unless the information is required for the purpose of a comparative assessment/review for a health assessment completed under the Coal Mine Workers' Health Scheme. Where consent is required, proof of identity from the coal mine worker must be provided. Acceptable identity documents include a current driver's licence and/or passport. It is the AMA's responsibility to determine if recent examinations and reports can be used for a worker's health assessment. Please note only the section 4 of the <u>health assessment report</u> and the <u>exit assessment report</u> are required to be provided to the employer by the AMA. Worker consent and proof of identity is always required when records are being requested to complete respiratory health surveillance for mineral mines and/or quarries. Records for comparative assessment (Requires worker consent if needed for mineral mine or quarry respiratory health surveillance) ☐ Spirometry report Approximate date(s) of record(s): \_ ☐ Dual read CXR report Approximate date(s) of record(s): \_ NB: Unless a specific date of report is requested, HSU will release the latest record held Latest record (\*Requires worker consent) \*Full health assessment (includes medical reports e.g. spirometry, dual read CXR report [where available]) \*Section 4 only NB: HSU will release the latest record held Multiple records (\*Requires worker consent) ☐ \*Full medical history ☐ \*Multiple health assessments Dates of records: NB: Please allow 10 business days for collation of multiple records To protect privacy, appropriate evidence of identity and authorisation is required prior to the release of medical records. A legible copy of the worker's driver's licence or passport is sufficient and must accompany this application. COAL MINE WORKER AUTHORISATION , (full name) Chief Executive Officer of Resources Safety and Health Queensland to release the nominated medical records to the representative identified. I have provided formal documentation as verification of my identity. Signature of coal mine worker Date HSU Administration use only

Application for Release of coal mine worker's health records V3 December 2021

☐ Identity unable to be confirmed

☐ Authorisation insufficient

☐ Refer to explanatory email

☐ Duplicate request

☐ Dual read unavailable

☐ Spirometry unavailable

☐ No record/s held by HSU

 $\square$  No previous record/s held by HSU