TRANSMISSION VERIFICATION REPORT

TIME : 12/08/2009 16:05
NAME : RECEPTION
FAX : 01656661801
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DATE,TIME	12/08 16:04
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University NHS Trust

Mental Health Directorate
Fax/ffacs: **00 44 1656 753108**
Your ref/Eich Cyf:
Date/Dyddiad: **12th August 2009**

Direct line/Rhif llinell union: **00 44 1656 753036**
email/ebost: karina.sansom@abm-tr.wales.nhs.uk
Our Ref/Ein Cyf: **TW/PP**

FACSIMILE TRANSMISSION: 001 512 4192216

For the Attention of Medical Records
Austin State Hospital
Texas

Dear Sir/Madam

MAURICE JOHN KIRK
D.O.B : 12. 03.1945
MARLPITS, ST DONATS, LLANTWIT MAJOR, SOUTH GLAMORGAN, CF61 1ZB

We would be grateful if you could fax copies of medical records from this gentleman's admission to your Unit during April 2008.

Mr Kirk is currently an inpatient at Caswell Clinic Medium Secure Unit for psychiatric assessment.

Any background history that we can obtain regarding this gentleman would be of great help. I understand that he was only with you for a fairly brief time but would be, nonetheless, grateful for a record of this admission and any assessments which were carried out.