**Dr. Your name**

**Senior House Officer**

**Emergency Medicine**

**University Hospital Galway**

This report is prepared for An Garda Siochana

**Subject of report:** Name and address of the patient

B/N

Ref:

**Date of Birth:**

**Date of Incident:**

**Report requested by:** Inspector

An Garda Siochana

Co. Galway

**Documents available** Emergency Department records

**for purposes of preparing** Consent to disclosure

**report:**

**Substance of Instructions:**

The instructions I have received are in the form of a letter from Inspector, An Garda Siochana, Co. Galway. The instruction letter requests that a medical report be prepared dealing with the injuries sustained by above named patient following an incident on the DATE. A copy of consent to disclosure by the patient has been included in the request.

**Introduction:**

The following is a medical report on Mr NAME OF PATIENT who was involved in an incident on the DATE OF ACCIDENT

**History of attendance:**

**Physical Examination:**

**Investigations:**

# Treatment:

**I understand that my duty in writing this report is to help An Garda Siochana with the matters within my expertise. I understand that this duty over-rides any obligation to the person from whom I have received instructions or by whom I am paid. I confirm that I have complied with that duty in writing my report. I believe that the facts I have stated in this report are true**.

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## Dr YOUR NAME

## SHO in Emergency Medicine

**University College Hospital,**

**Newcastle Road,**

**Galway**

**Date Report Completed:**