FREDERICK COUNTY PEDIATRICS

11717 Old National Pike, Suite 8
New Market, MD 21774
Phone: 301.882.7489 Fax: 301.882.7520
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Request for Medical Records

James P. Lee, M.D. * Jennifer Burns, M.D. * Amy Mathew, M.D. * Adrienne Harmel, CPNP

Patient Name: _____ Date of Birth: _____

Patient Name: _____ Date of Birth: _____

Patient Name: _____ Date of Birth: _____

Patient Name: _____ Date of Birth: _____

Patient Name: _____ Date of Birth: _____

Parent/Guardian Name: _____ Relationship: _____

Address: _____ Phone: _____

City/State/Zip: _____

Reason for Release of Records: _____
Information to be released: □ Medical Record □Immunization Record □Other: _____

Records to be released from:	***Records to be sent to:***
_____ *Name of Physician/Agency* _____ *Address* _____ *Address* _____ *Phone Number* *Fax Number*	***Frederick County Pediatrics*** *11717 Old National Pike, Suite 8* *New Market, MD 21774* *Phone: 301.882.7489 Fax: 301.882.7520*

*I hereby authorize **Frederick County Pediatrics** to obtain health information for the above named patient(s). This authorization is valid for 12 months from the date of signature. I understand that I may cancel this request with written notification but that it will not affect any information released prior to notification of cancellation.*

_____ _____

Signature of Parent/Guardian: *Date:*