Pramod Malik, MD
FACG, FASGE, AGAF, CPI
Board Certified in Gastroenterology

AUTHORIZATION FOR RELEASE OF MEDICAL RECORDS

Patient Name in full:

Other names (Aliases):

Date of Birth: ***Social Security #:***

Reason for disclosure: *(Check one)* ☐ *Medical care* ☐ *Second opinion* ☐ *Transfer of care* ☐ *Other* _____

Entity FROM whom the information is requested:

Physician/ organization:

Street Address:

City: ***State:*** ***Zip:***

Tel: ***Fax:***

Entity TO whom the information is to be sent to:

Physician/ organization: *Pramod Malik, MD – Virginia Gastroenterology*

Street Address: *2790 Godwin Blvd; Suite 205*

City: *Suffolk* ***State:*** *VA* ***Zip:*** *23434*

Tel: *757-942-2566* ***Fax: 757.932.9279***

Information requested:

☐ *Progress & consult notes (In/Outpt)*
☐ *Endoscopic procedure & Path reports*
☐ *Lab reports*
☐ *Other* _____
☐ *Operative procedure notes*
☐ *CT/MRI/MRCP/ US/ radiology procedures*

1. *I hereby authorize and request release of my above Protected (individually identifiable) Health Information to* ***Virginia Gastroenterology Institute, PC (VGI)****.*
2. *I understand and acknowledge that this may include treatment for physical and mental illness, alcohol/drug abuse, and/or HIV/AIDS test results or diagnoses.*
3. *I understand that I may revoke this authorization at any time by notifying the releasing organization in writing but it does not affect the information already received by* ***VGI****. I understand that if the organization authorized to receive the information is not required to comply with the federal privacy protection regulations, then such information may be re-disclosed and will no longer be protected.*
4. *I understand that this authorization is voluntary and that I do not have to sign this authorization. My refusal to sign will not affect my ability to obtain treatment.*

Signature of patient or patient's representative ***Date***

Printed name of patient's representative *Relationship to the patient*

(This form MUST be completed before signing)

Form Last Updated: April 2017

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