



Trinity Medical Care, PC
Family Practice for ages 6 and older

Telephone (757) 962-6262
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Linda J. George, MD, Diplomate of the ABFP
1856 Colonial Medical Court, Suite A
Virginia Beach, VA 23454-3075

AUTHORIZATION FOR RELEASE OF PROTECTED HEALTH INFORMATION

RELEASING PHYSICIAN'S NAME

ADDRESS: _____

I HEREBY REQUEST THAT MY MEDICAL RECORDS BE RELEASED TO:

**TRINITY MEDICAL CARE, PC
LINDA J. GEORGE, MD
1856 COLONIAL MEDICAL COURT, SUITE A
VIRGINIA BEACH, VA 23454-3075
TELEPHONE: 757-962-6262
FACSIMILE: 757-962-1185**

CHOOSE ONE:

- PLEASE INCLUDE MY COMPLETE MEDICAL RECORD.
OR
 PLEASE INCLUDE THE PROBLEM LIST, MEDICATION LIST, IMMUNIZATION RECORD AND ALL LABS AND OTHER TEST RESULTS FOR THE PAST TWO YEARS.
OR
 PLEASE INCLUDE: _____

PATIENT'S NAME: _____

DATE OF BIRTH: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

SIGNATURE OF PATIENT OR GUARDIAN **DATE:** _____

THIS AUTHORIZATION IS VALID FOR 12 MONTHS FROM THE DATE ABOVE. I UNDERSTAND THAT I MAY CANCEL THIS REQUEST WITH WRITTEN NOTIFICATION AT ANY TIME. YOUR DOCTOR OR THEIR REPRESENTATIVE MAY CHARGE A FEE FOR THE COPYING OF RECORDS