PAPAGO BUTTES PEDIATRIC CENTER, P.C.

8573 E. SAN ALBERTO, SUITE E-100
SCOTTSDALE, ARIZONA 85258
TEL: 480-778-1732 FAX: 480-778-1709
RICHARD H. REZNICK, M.D., F.A.A.P.
SERGIO SOTELO, M.D., F.A.A.P.
SCOTT A. CANNON, M.D., F.A.A.P.

PATIENT/LEGAL GUARDIAN CONSENT FOR USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION

RECORDS TO BE SENT TO PAPAGO BUTTES PEDIATRIC CENTER, P.C.

PATIENTS NAME: _____ DATE OF BIRTH: _____
PATIENTS NAME: _____ DATE OF BIRTH: _____
PATIENTS NAME: _____ DATE OF BIRTH: _____
PATIENTS NAME: _____ DATE OF BIRTH: _____

FORWARDING INFORMATION: PLEASE MAIL THIS FORM TO:
NAME: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
TELEPHONE: _____

By signing this consent form, I authorize _____ to use and/or disclose certain **protected health information (PHI)** about my child/children (listed above) in the form specifically listed below. And I authorize this information to be released to the party/parties specifically listed below. I understand you will only be able to forward PHI generated by your office.

With my consent _____ may disclose the following PHI:

☐ All health information from patient records for the following dates:
From:_____/_____/_____ To:_____/_____/_____
☐ All health information from patient records related to the following condition:
_____
☐ All health information from patient records for transfer of medical care.
☐ Immunization records
☐ Other, please be specific: _____
_____

With my consent _____ may disclose the above PHI to the following:

☐ By fax to the following company and fax number only:
PAPAGO BUTTES PEDIATRIC CENTER, P.C. Fax number: **(480) 778-1709**
☐ Please mail to the following name and address:
Company name: **PAPAGO BUTTES PEDIATRIC CENTER, P.C.**
Attn: **MEDICAL RECORDS DEPARTMENT**
Address: **8573 E. SAN ALBERTO, SUITE E-100**
City/State/Zip: **SCOTTSDALE, ARIZONA 85258**
Telephone: **480-778-1732**

_____ _____
Patient or legally authorized individual signature Date

_____ _____
Printed name if signed on behalf of the patient Relationship (parent, legal guardian,etc…)