

# Chiropractic Health & Wellness Center

711 E. Walnut St. Suite 106 - Pasadena CA 91101

Phone: (626) 356 9045 Fax: (626) 356 9047

## AUTHORIZATION TO RELEASE MEDICAL RECORDS

I, \_\_\_\_\_ HEREBY AUTHORIZE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO RELEASE ANY AND ALL MEDICAL RECORDS, INCLUDING DOCTOR'S NOTES,  
LABORATORY RESULTS, X-RAY REPORTS, ETC. TO:

CHIROPRACTIC HEALTH & WELLNESS CENTER.

711 E. WALNUT ST. SUITE 106

PASADENA, CA 91101

PATIENT'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

S.S. #: \_\_\_\_\_

DATE OF ACCIDENT: \_\_\_\_\_ DATE OF EXAMINATION: \_\_\_\_\_

PATIENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DATE REQUESTED: \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_

REMARKS: \_\_\_\_\_

**FAILURE TO RELEASE MEDICAL RECORDS IS PUNISHABLE BY LAW UNDER  
HEALTH AND SAFETY CODES SEC#25252 OF THE STATE OF CALIFORNIA.**