

John F. Guarino M.D., P.A.
Dr Matthew Tufts, M.D., P.A.
4245 Kings Hwy, Unit A
Port Charlotte, FL 33980
(941) 391-5102
(941) 391-6937 Fax

Authorization for the use and disclosure for protected health information

There is no charge when your records are sent from Dr. Guarino to another licensed medical provider. Beyond this service, I agree to be responsible for the cost of copying these records. The charge is \$1.00 per page for the first 25 pages and \$.25 per page thereafter, if applicable. This will cover fees, labor, supplies, and postage.

Please note that this can normally take 7-10 business days to fully complete this request. The request is processed sooner in situations of a medical emergency.

Patient Name: _____ **DOB:** _____

Address: _____

Signature: _____

_____ **Send Records to Dr. John Guarino & Dr. Maria Tufts**

_____ **Send my records to:** _____

Medical Requests request:

_____ Last Colonoscopy & pathology. Date of last procedure _____

_____ Last EGD & pathology. Date of last procedure _____

_____ Most recent breast reports and pathology. Date of last procedure _____

Additional Requests: _____

Office Use:

Previous Dr. Moenning Patient _____

Physician Approval _____ Mailed/Faxed _____ Date Completed _____