<u>Main Locations</u> Anoka Blaine Duluth Edina Mankato Maplewood	R	RETINA CONSULTANTS OF MINNESOTA
St. Cloud St. Louis Park Woodbury	Authorization for Release of Medical Records	
<u>Additional Locations</u> Apple Valley Baxter Chaska Hutchinson	Requesting Records From:	
Business Office RETINA CONSULTANTS OF MINNESOTA Centennial Lakes Office Park 3601 W 76th Street Third Floor Edina, MN 55435 952-897-1175	Patient Name: DOB: Patient Address:	
<u>Our Physicians</u> Herbert Cantrill, MD Steven Bennett, MD David Williams, MD	Patient Phone Number:	
Edwin Ryan Jr, MD Abdhish Bhavsar, MD Sundeep Dev, MD Robert Mittra, MD Polly Quiram, MD, PhD Geoffrey Emerson, MD, PhD	Other Names Used: (Maiden name, nickname, etc.)	
M. Vaughn Emerson, MD John Davies, MD Jacob Jones, MD, PhD D. Wilkin Parke III, MD Yevgeniy Sychev, MD Peter Tang, MD, PhD Ananth Sastry, MD	Please release the following medical rec	cords of the patient named above to:
Peter Belin, MD Christopher Hwang, MD, PhD Zeeshan Haq, MD Guneet Sodhi, MD Tommaso Vagaggini, MD	Fax records to (location / fax number):	
Scheduling Hotlines 800-877-2500		
Formerly VitreoRetinal Surgery) 800-233-8504 (Formerly Retina Center) RetinaMN.com	 — History & Physical Exam — Operative Notes — Progress Notes 	Consultation Reports Pathology, Lab & X-ray Other:
	I hereby authorize the release of any information from my exam including diagnostic tests and photographs. This does not authorize re-release of the information to anyone. A photocopy will be treated as the original.	
	Patient's signature:	Date: