

# FAIRFAX COLON & RECTAL SURGERY, P.C.

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Colorectal/Anorectal Surgery, Colonoscopy, Anorectal Physiology

## Release of Medical Records Policy

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We will gladly copy your medical records for you.

There is a fee for this service, \$10 for the service and .50 cents per copied page.

The total cost depends on the size of the record being copied and within a day or two of your request we will let you know the total price for the copy of your records.

You can pay by phone with a credit card, or you can come into the office and pay by check, credit card or cash.

In order to maintain compliance with HIPPA regulations, we will need you to sign the release of information form below:

## Authorization for release of information

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I authorize the use and/or disclosure of my protected health information maintained by Fairfax Colon & Rectal Surgery, PC and/or Fairfax Colon & Rectal Surgical Center, LLC:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Digital Signature\*

\_\_\_\_\_  
Today's Date