



ARTHRITIS CENTER OF NEBRASKA

Melvin A. Churchill, MD

Alan J. Jacobs, MD

Rick C. Chatwell, MD

Robert M. Valente, MD

Anne R. Lorenz, APRN

Kristina A. Tyndall, APRN

Board Certified Rheumatologists Providing Comprehensive Rheumatologic Care and Osteoporosis Evaluation

Consent for Release of Information for Arthritis Center of Nebraska Use

Release Records to: Arthritis Center of Nebraska
 Please circle one Dr. Melvin Churchill, Dr. Rick Chatwell,
Dr. Alan Jacobs, Dr. Robert Valente,
Kristina Tyndall, APRN, Anne Lorenz, APRN
3901 Pine Lake Road, Suite 120
Lincoln, NE 68516 Fax: 402-328-0961

Release Records from: _____

Information to be released:

| | | | |
|-------|-----------------------------------|-------|---------------|
| _____ | Medical History (diagnoses sheet) | _____ | Lab Reports |
| _____ | Current Progress Notes | _____ | X-ray reports |
| _____ | Bone Density Reports | _____ | Current EKG |
| _____ | All of the above | _____ | Other |

Purpose: _____

Patient's Name: _____

Address: _____

Patient's Date of Birth: _____ Social Security: _____

| | | | |
|-------|---------------------------------|-------|-------------|
| _____ | Patient or Authorized Signature | _____ | Date Signed |
|-------|---------------------------------|-------|-------------|

| | | | |
|-------|-------------------|-------|-------------|
| _____ | Witness Signature | _____ | Date Signed |
|-------|-------------------|-------|-------------|

Please note: This is a one time authorization used solely for the above requested records.