



# ARTHRITIS CENTER OF NEBRASKA

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Heather A. Sorensen, APRN-NP

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Samone M. Wulf, PA-C

Jaimie A. Russell, APRN-NP

*Board Certified Rheumatologists Providing Comprehensive Rheumatologic Care and Osteoporosis Evaluation*

## Consent for Release of Information

Release Records to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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Release Records from: Arthritis Center of Nebraska

Please circle one

Dr. Melvin A. Churchill, William J. Saalfeld, DNP, APRN-NP,  
Karis A. Lange, PA-C., Dr. Rick C. Chatwell,  
Kristin A. Twidwell, PA-C, Samone M. Wulf, PA-C,  
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Jaimie A. Russell, APRN-NP  
3901 Pine Lake Road, Suite 120  
Lincoln, NE 68516 Fax: 402-328-0961

## 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.

3901 Pine Lake Road, Suite 120, Lincoln Nebraska 68516-5497  
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**Consent for Release of Information for Arthritis Center of Nebraska Use**

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