

THOMAS G. FOREMAN M.D. F.A.C.S.
Hornell Surgical Group
111 Seneca Street Hornell, NY 14843

Patient Records

As a patient, you have a right to copies of your records. They may be either given to you personally or sent to your doctor; however, only copies may be given or sent. The legal charge for those copies is \$.75 per page.

Before you make your decision about your records, you may want to consider whether you do or do not need copies of your records. In this office, the bulk of your chart consists mainly of copies of hospital records, which are available from the hospital. My personal progress notes, for the most part, have already been sent to your primary care provider during the course of your treatment.

If you decide that you do in fact want copies of your records, please fill out the bottom portion of this page.

Please call 607-324-1885 to make arrangements for your records.

What would you like copies of? (check all that apply)

Dr. Foreman's progress notes

History Form (that you filled out)

Hospital Records

Operative Reports

History and Physical

Pathology Reports

Discharge Summary

X-Ray Reports

Lab Reports

Name _____

I will pick up my records personally _____
(signature)

I consent to have my records sent to _____
(physician's name)

(signature)

Office Use Only

Copy Charge \$ _____