

Mattawan Family Eye Care

Teresa M. Seim, OD

52883 N. Main St. Mattawan, MI 49071

Phone (269) 668-5558 Fax (269) 668-5491

Authorization for Release of Pertinent Eye Health Information

Information from Dr. _____ at _____

Information Requested: Last eye exam records

Patients Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Phone: _____

I hereby authorize the above physician to release all pertinent eye health information from previous office visits and eye examinations to Dr. Teresa Seim at Mattawan Family Eye Care. Please send to the fax number listed (preferred) or mail to the above address.

Patient Signature: _____ Date: _____

(Parent if patient is a minor)