

Saddleback Dermatology & Laser Center

Ira Bell, M.D., Karen G. Benik, M.D., Jane G. Khoury, M.D., Azin Meshkinpour, M.D., Kim Tang, M.D.
24432 Muirlands Blvd., Suites 219 & 227, Lake Forest, CA 92630
Tel: (949) 770-8115 Fax: (949) 770-9191
www.saddlebackdermatology.com

MEDICAL RECORDS RELEASE

Date: _____

I hereby request: _____

to release any and all of my medical records to:

SADDLEBACK DERMATOLOGY & LASER CENTER

- Ira Bell, M.D.
- Jonathan Baron, M.D.
- Karen G. Benik, M.D.
- Jane G. Khoury, M.D.
- Azin Meshkinpour, M.D., M.P.H.
- Kim Tang, M.D.

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Lake Forest, CA 92630
phone: (949) 770-8115
fax: (949) 770-9191**

Patient Name: _____
(please print)

Patient Signature: _____

Patient's date of birth: _____

Witness: _____

(OVER FOR REVERSE RELEASE)

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