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Chevy Chase, MD 20815
Phone: 301-215-7100

1016 16th Street NW
Lower Level
Washington, DC 20036
Phone: 202-659-2050

8230 Boone Blvd
Suite 125
Vienna, VA 22182
Phone: 703-962-7104

4600 North Park Ave
Plaza North
Chevy Chase, MD 20815
Phone: 240-855-0720

3301 New Mexico Ave NW,
Suite 216
Washington, DC 20016
Phone: 202-237-2453

Authorization to Release Health Information to Eye Doctors of Washington

Date: _____

Patient's Name: _____

Date of Birth: _____

Address: _____

Patient's Appointment is on: _____

Dear Dr. _____,

I hereby authorize you to release my medical records including diagnosis, examination and treatment rendered to me during the period from _____ to _____.

Please release these records to the attention of:
Eye Doctors of Washington: Medical Records
Fax: 202-688-2857

Patient Signature: _____

Witness Signature: _____