



**Get *Real* HealthCare, P.C.**

Exploring new options in common sense medicine.

Telephone (757) 962-6262  
Facsimile (757) 962-1185  
www.getrealhealthcare.com

Michael Thompson, M.D.  
1004 First Colonial Road, Suite 103  
Virginia Beach, VA 23454

## Authorization for release of protected health information

Releasing Physician's name \_\_\_\_\_

Address: \_\_\_\_\_

I hereby request that my medical records be released to:

**Get *Real* HealthCare, P.C.**  
Michael Thompson, M.D.  
1004 First Colonial Road, Suite 103  
Virginia Beach, VA 23454  
Telephone: 757-962-6262  
Facsimile: 757-962-1185

Choose one:

- Please include my complete medical record.
- or
- Please include the problem list, medication list, immunization record and all labs and other test results for the past two years.
- or
- Please include: \_\_\_\_\_

Patient's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Signature of patient or guardian \_\_\_\_\_ Date: \_\_\_\_\_

This authorization is valid for 12 months from the date above. I understand that I may cancel this request with written notification at any time.