

KeiperSpine

Glenn L. Keiper, MD
Neurosurgery

Ralph G. Peterson, PA-C
Physician Assistant

PATIENT HEALTH INFORMATION RELEASE

NAME _____

DATE OF BIRTH _____

Social Security Number: _____

RELEASE MY MEDICAL RECORDS TO:

P. Evalyn Cole, MHSA, CASC
CEO/Administrator

KeiperSpine
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Eugene, Oregon 97401

PHONE: 541.485.2357; FAX: 541.485.2358

PLEASE RELEASE A COPY OF MY MEDICAL RECORDS AND
HEALTH HISTORY TO:

PATIENT: _____ DATE _____

WITNESS: _____

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email: ecole@eugenespine.com