Hodges Woodall Optometry, PC

Daryl Hodges, OD • Nicholas Woodall, OD

814 East Washington St. • Greencastle, IN 46135 • Phone: (765) 653-5896 • Fax: (765) 653-4554

Request for Release of Personal Health Information

Today's Date: _____

To: _____
Physician / Office Name

Fax #: _____

I authorize the release of all relevant medical records and prescriptions, or copies of each, and request that they be transferred by fax or mail to:

Hodges Woodall Optometry, PC
814 E Washington St
Greencastle, IN 46135
Ph: 765-653-5896
Fax: 765-653-4554

Patient's Printed Name: _____

Patient's Date of Birth: _____

Patient's Signature: _____