



Neurosurgical Associates, P.C.

Specializing in Spine & Cranial Surgery

Neurosurgical Associates, P.C.
1651 North Parham Road
Richmond, Virginia 23229

Hanover Medical Park
8220 Meadowbridge Road, Suite 209
Mechanicsville, Virginia 23226

CJW - Johnston Willis
10710 Midlothian Turnpike, Suite 138
Richmond, Virginia 23235

(804) 288-8204 • www.neurosurgicalva.com

AUTHORIZATION TO TREAT & RELEASE CLINICAL INFORMATION

I, _____ hereby authorize Dr. _____, and Neurosurgical Associates, P.C. to perform a medical examination and evaluation on myself and to release any and all medical / non medical information to any person or persons which would need access to my information for continuance of my medical care. My information may be sent to referring physicians; hospitals, physical therapists; durable medical equipment vendors; pharmacies; and any other health care professional. I further authorize Dr. _____ and Neurosurgical Associates, P.C. to obtain and / or release my medical records. and any test results from any source including health care providers, hospitals, insurance carriers and employers.

Signature: _____

Date: _____